Book of abstracts



PHOTONICA2019

The Seventh International School and Conference on Photonics, 26 August – 30 August 2019, Belgrade, Serbia

> & Machine Learning with Photonics Symposium (ML-Photonica 2019)









& ESUO Regional Workshop



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Editors: Milica Matijević, Marko Krstić and Petra Beličev

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Photonica2019 4. Biophotonics

Long-period grating sensors for the measurement of apexcardiogram

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Apexcardiogram (ACG) represents record of low-frequency vibrations of the precordium caused by heart contractions. The information obtained from ACG is mostly related to left ventricular contractions. The most common position for its measurement is in parasternal area of chest wall, above the apex of the heart. The measurement of ACG can provide date significant in timing of systolic events of the cardiac cycle. Particulary, ACG is used as aid in timing of the opening snap of the cardiac valves, for the identification of the exact timing of the third (S3) and fourth heart sounds (S4) and for early diagnosis of the mitral valve stenosis or regurgitation [1].

The frequently used methods for non-invasively recording of ACG include using of electro manometer sensor, piezoelectric microphone sensor and crystal-microphone sensor for measuring mechanical displacements of chest wall [2]. The disadvantages of these sensors are potential noise caused by electrical interference and technical difficulties in their application on body surface. The goal of this study is to evaluate possibility of using long-period grating (LPG) sensor as potential non-invasive method for ACG recording. The advantages of utilizing LPG sensors are their low cost, utilization simplicity, and insensitivity to electrical interference.

The study protocol includes measurements on group of healthy volunteers utilizing a single LPG sensor. LPG sensor is positioned in paternal area of chest wall, above the apex of the heart and fixed with the elastic bandage. It is used as a sensor of mechanical pulsation on the body surface. All healthy volunteers are asked to hold their breath in mid-expiration phase for at least 10 seconds in order to avoid the interference of the ACG with a breathing signal. Our results show that we are able to record signals with morphology of normal ACG repeatably on each healthy volunteer, and with the significant signal-to-noise ratio. Hence, we can conclude that LPG sensors can be used for recording ACG by measuring mechanical low-frequency vibrations of the precordium on the body surface above the apex of the heart.

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