

Design and Evaluation of User Interface Design of Mobile Heart Monitoring Application

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Abstract: Many mobile health applications including mobile heart monitoring applications are available on Apple App Store, and Google Play Store. However, when the user feels dissatisfied with the user interface design of the mobile heart monitoring application, it impacts user satisfaction level to the extent that the users do not use it anymore. User satisfaction level is a very important factor in usability to identify a mobile heart monitoring application which is pleasant and comfortable for continuous use. This study recruited four cardiologists in a hospital in Palembang, Indonesia for evaluating the user interface design of a mobile heart monitoring prototype called HeartM. The prototype has several features including measuring patient's heart rate and blood pressure rate, treatment record, forum, and chat to ease communication between heart patients and their cardiologist. The focus of the user interface design evaluation are on content, visual and navigation aspects. This paper contributes to user interface design knowledge and design recommendations particularly for mobile heart monitoring applications.

Keywords: heart disease, mobile application, user interface design, usability

1. Introduction

Globally, many deaths are caused by the chronic diseases such as heart disease (11.8%), tuberculosis (3.3%), cancer (2.0%), and diabetes (1.8%) (Dariush et al. 2016). In Malaysia, this situation is similar based on a report from the Department of Statistics Malaysia (2019). Heart disease was claimed in the said report to be the highest (15.6%) cause of death in 2018 and this number was higher than other chronic diseases such as pneumonia (11.8%), stroke (7.8%), accidents (3.7%), and chronic lower respiratory disease (2.6%).

In the era of the Fourth Industrial Revolution (4IR), heart disease patients are able to monitor their hearts' conditions using mobile heart monitoring applications which are available from Apple App Store and Google Play Store. These applications are available for purchase while some other applications can be downloaded for free by heart disease patients (Sobri et al. 2018). User satisfaction is a very important factor in usability to identify a mobile heart monitoring application is pleasant and comfortable for future use. When the user feels dissatisfied with usability of user interface design in term of content, visual, and navigation of the mobile heart monitoring application, it impacts user satisfaction level such that the user may not use it anymore.

Based on previous studies on user satisfaction, researchers found that user interface design can influence the usability of mobile health applications and this lead to poor user satisfaction. Kamana (2016), (Hussain et al. 2018) and Sobri et al. (2019) claimed that many mobile health applications do not have the features expected and needed by the patients, mobile heart monitoring applications do not support interactive communication between patients with cardiologists (Ribeiro et al. 2017), and poorly designed user interface (Kraleva, 2017).

Given these issues in the literature, designing an effective user interface is a big challenge. A good user interface design should be easy, and simple so that it is more efficient, pleasant, and comfortable to work with. This paper aims to evaluate the user interface design of mobile heart monitoring prototype called HeartM in terms of its content, visual and navigation from the perspective of the cardiologists only. However, in practice, the HeartM is designed to be used by heart disease patients as well as their cardiologists. This paper begins with a brief discussion on the materials and methods. It continues with briefly discussing the theories related of design and evaluation of user interface and the method used in this study. The third section presents the design and evaluation process. The results and discussion are covered in the fourth section. In the last section, the paper wraps with a brief conclusion and salient points for further research.

2. Materials and Methods

This section briefly discusses the theories related to the user interface design and its evaluation. Further, the methods in conducting the study is also covered in this section.

2.1 User Interface Design and Evaluation

There are three elements of user interface design: Physical User Interface (PUI), Logical User Interface (LUI), Graphical User Interface (GUI) and they are useful to study users satisfaction and usability of mobile applications (Kiljander, 2004) and (Hussain et al. 2016). Heo et al. (2009) defined LUI as an interface related to contents and structure for task execution (e.g. menu and navigation structure). PUI means tangible physical interface properties supporting users' physical operations needed to carry out tasks (e.g. keypad and microphone), while GUI is defined as an interface concerned with visual items presenting task-relevant information (e.g. icon and font). However according to Heo et al. (2009) one user interface design can have properties related to two or three user interface design elements at the same time. For example, the menu from LUI element can be integrated and have some GUI elements like fonts, colour, and icons as well.

For this study, the evaluation of the user interface design of HeartMare in terms of content, visual, and navigation. Content-wise the features provided such as measure heart rate, communication between heart disease patient and cardiologist, and reminder to consume the medicine meet the needs of the heart disease patients and standard of care include images used. From the visual-wise, text size, arrangement of words, language used, information and the color in design suitable with content will be evaluated. Lastly, from the navigation-wise, the interaction of heart disease patient and cardiologist on HeartMas well as the placement of the button, the placement of the captions is correct, the shape of the buttons is interesting, and easy of interacting at every interface in design of HeartM will be evaluated.

2.2 Methods: Participants of User Centered Design Study of HeartM

This study adopts the User Centered Design (UCD) method based on Collen and Miller (2015). The problem of lack of user satisfaction affects the usability of mobile health application because designers of the mobile health applications design often do not conform to users' needs (heart disease patient and requirements of healthcare professionals (cardiologist). As per the UCD method, the target users for this current study are the cardiologists. Cardiologists can give an opinion and evaluation of the design prototype or system with the use of survey questionnaires and interviews (Schnall et al. 2016).

The design and evaluation process of user interface design of HeartM was performed for 4 weeks (10th February until 8th March 2020) at Dr. Mohammad Hoesin Hospital, Palembang, Indonesia. There are four (4) cardiologists randomly selected to assist in this study. They have more than ten (10) years experience and are highly qualified cardiologists. Prior to their involvement, the cardiologists sign informed consent letter to lend their assistance in the study. Demographically, there are 2 male cardiologists and 2 female cardiologists. For data analysis, a qualitative analysis was conducted with the aim of identifying user satisfaction of HeartM design in terms of content, visual, and navigation.

3 Design And Evaluation Process

For the design and evaluation of HeartM, this study used iterative high-fidelity of HeartM. Chávez et al. (2019) defined high-fidelity as a realistic representation of the application (i.e. HeartM) in terms of content, visual and navigation. The first phase of design and evaluation process is to identify requirements. In this phase, the main researcher met the cardiologists who have agreed to participate in the study to seek their insights on the features of HeartM. This also includes the specific user interface design pertaining to the aspects of content, visual, and navigation. The questions asked to the cardiologists are shown in Table 1.

Table 1. The Interview Questions to Identify Requirement Phase

Questions	Summary Answers from Cardiologists
Content	
To monitor heart disease what needs to be checked	Heart rate, blood pressure, record, and chat
Information available in HeartM	Record of heart rate
Visual	
The color used for the application consists of several colors or only 1 color	Various bright colors
What is the text size in design of HeartM	Just important easy to read
Navigation	
The features is created in button or text	Button
The features are organized alphabetically or tailor the most important needs	The most important are heart rate, blood pressure, record, and chat

Based on the answers from the cardiologists, the next phase is to design the high-fidelity representation of HeartM. After that, the cardiologists evaluate the high-fidelity HeartM by filling up some questionnaires and new requirements are sought, if any. The design and evaluation process of this study is shown in Figure 1.

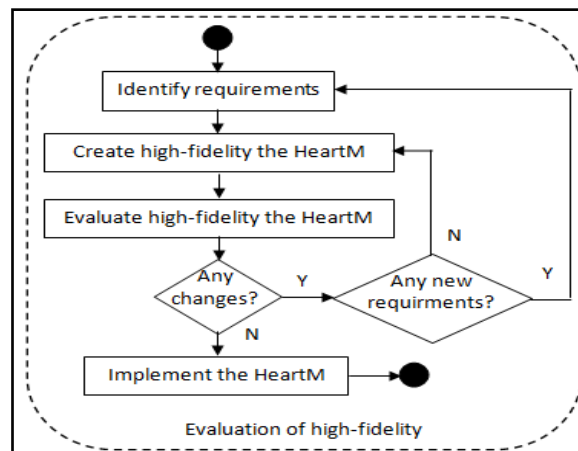


Figure 1. Design and Evaluation Process of HeartM

4 Results and Discussion

This section presents the results and discussion of design and evaluation of HeartM described in the previous section. The high-fidelity of HeartM focused on the design and to corroborate as well as to ensure the identified requirements are met. This allowed the design of HeartM and enable feedbacks to be gathered and worked upon, and iteratively conducted at the early design phase. In this study, the cardiologists evaluated HeartM by filling in the questionnaires, and use Likert scale of possible responses ranges from 5 (very satisfied), 4 (satisfied), 3 (neither), 2 (unsatisfied), and 1 (very unsatisfied) that can be used for each question. The questionnaires adapted of user interface design aspects of mobile phones (Ham et al. 2008).

The following are the results of statistical calculations based on indicators in the user interface design in term of content, visual, and navigation (Ham et al. 2008). For descriptive statistics the evaluation of the high-fidelity of HeartM was calculated for content, visual and navigation from the perspective of each cardiologist. Table 2 presents the comparison statistics from the cardiologists who evaluated the high-fidelity design of HeartM.

Table 2. The Comparison Statistics from The Perspective of Each Cardiologist

Aspects	Perspective of Each Cardiologist (C)			
	C1	C2	C3	C4
Content				
The features provided in design of HeartM meet the needs of the heart disease patients	3	3	3	4
The features provided in design of HeartM are in accordance with the heart disease patient's standard of care	3	3	3	3
Design of HeartM was made according to the advice of a cardiologist	4	4	4	4
Images used in design of the relevant of HeartM	4	4	4	4
Design of variant of themes to support chat functions provided of HeartM are in accordance with the heart disease patient's standard of care	3	3	3	3
Visual				
The text size in design of HeartM is easy to read	4	4	4	4
The arrangement of words in design of HeartM is easy to understand	3	3	3	3
The language used in design of HeartM is easy to understand	3	3	4	4
The information in design of HeartM is clear	3	3	3	4
The color in design of HeartM suitable with content	3	3	3	3
Navigation				
The placement of the buttons in design of HeartM is correct	4	4	4	4
The placement of the captions in design of HeartM is correct	4	4	4	4
The shape of the buttons in design of HeartM is interesting	3	3	3	4

Display features in design of HeartM neatly arranged	3	3	3	4
Easy of interacting at every interface in design of HeartM	4	4	4	4

Based on Table 2, the findings of the evaluation of high-fidelity HeartMuser interface from the perspective of each cardiologist are: in terms of content have average score of 3.45 because according to them, before measuring heart rate, HeartM should provide the option to notify heart patients situation at the time of measurement. For example, after exercising, doing activities, getting out of bed, and relaxing to make it easier for the cardiologist to analyze the measurement results. Moreover, according to them, it is needed to include variant of themes to support chat functions in order to make it easy for heart disease patients and cardiologist in conducting their communication.

Meanwhile, in term of visual the average score was 3.35 because according to them, high-fidelity of HeartM have been text size, arrangement of word, information are easy to read and to understand and colour are suitable with the content. Whereas, in term of navigation, the average score was 3.7 because according to them, the placement of the buttons, and the captions are correct, and ease the interacting with patients at every interface. The overall from result evaluation shown the cardiologists' user satisfaction to user interface design of HeartM have average score of 3.5. It can be deduced that the cardiologists are not yet satisfied with the user interface design of HeartM. Hence, some of the proposed improvements suggested by the cardiologists to HeartM are shown in Table 3 and Figure 2.

Table 3. The Proposed of Variant of Themes to Support Chat Functions of HeartM

Theme	EXAMPLE
Heart rate tests	Today, my heart rate was at 70 BPM
Heart disease questions	What needs to be checked to heart monitor ?
Heart disease information	Many available mobile heart application in Play Store, and Apple App Store for purchase, and free
Personal health administration	Can I cancel the check up and change to tomorrow, please ?
Social messages	Please, keep your cholesterol level low.
Technical messages	Dear all my patients, I'm sorry, tomorrow I don't come to hospital, thanks a lot.

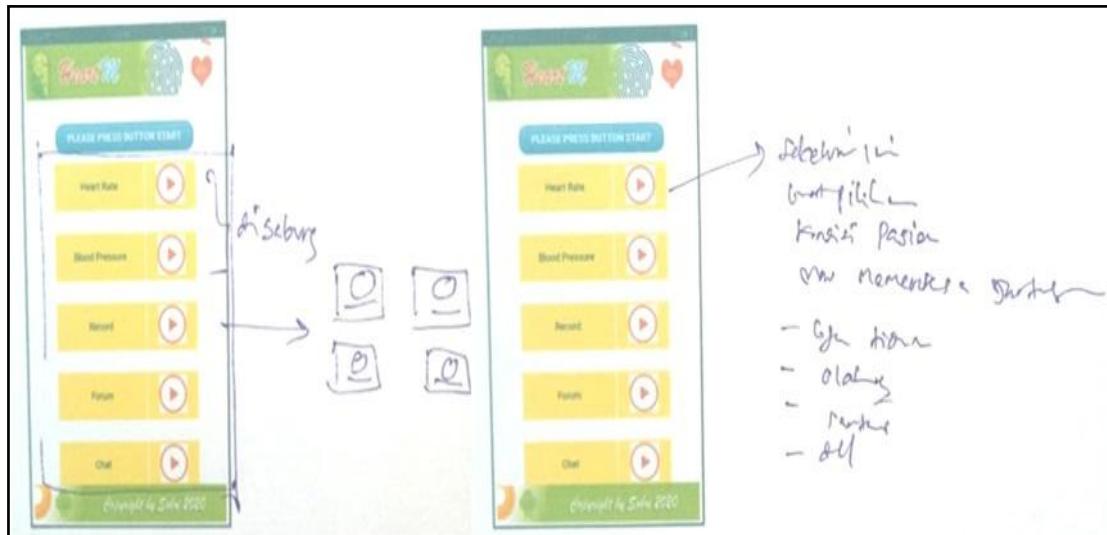


Figure 2. The Proposed Improvement to HeartM

The findings of this study can help fill the gaps with the existing mobile heart monitoring applications e.g. Cardiac Diagnosis, iCare Health Monitoring Full, and Heart Rate Plus (Sobri et al. 2019) and to improve the prototype of HeartM as per recommendations by the cardiologists. These include to make it easy to analyze the measurement results of HeartM by providing options to notify heart patients' situation at the time of measurement, and additional variant of themes to support chat functions to make it easy for heart patients and cardiologist communication.

5 Conclusion

The evaluation of the mobile heart monitoring application called HeartM discovered that user interface design in term of content, visual, and navigation are crucial to ensure users' satisfaction as well as in ensuring overall usability of the applications. This paper contributes in recommending to user interface designers to produce better user interface design in term of content, visual and navigation for chronic diseases in general and for the mobile heart monitoring application in particular. Further research will focus on improving HeartM based on the recommendations proposed by the cardiologists.

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