Design of Symptomatic and Remedial Standpoint on breathing non-invasive Bio-sensor based health monitoring

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Abstract: Non invasive bio sensors based human body health monitor proves fast easy portable solution for detection of diseases or its intensity of spreading in human body. Disease includes diabetes, heart rate, blood pressure, kidney conditions, or urine saturation in blood, etc. ease of detection recognition without testing blood is non invasive technique which is pain free and fast recognition. Propose system in this paper uses human breathe exhales gases. Conventional method uses blood samples in most of cases. In this propose system human exhales gases is concentrated on bio-sensor. Output of bio sensor is taken and processed. This processed signal is use to detect different diseases growing in human body. Concentration of diabetes or sugar level, urine saturation in blood, oxygen saturation level in blood is displayed o lcd screen. Finally for results accuracy bio sensor based test results and blood sample test results are compared and 90% of accuracy of system is concluded.

Keywords: Bio-sensor, breath, biosensor, molybdenum disulfide, MQ135, MQ4, oxygen saturation, microcontroller.

1. INTRODUCTION

As now-a-days in recent time human life style and habitat is changing completely and fast. Due to fast life human has no time to watch his own health which is degrading day by day. Over consumption of junk food, eating unhealthy food, more spicy food, consumption of opposite food, irregular time consumption of food, etc are some reasons of degrading of human health and facing too early growth of diseases such as diabetes, heart attack, blood pressure high or low, kidney failure, cancer, etc. due to lowering the immunity day by day. Therefore this paper proposed the handheld portable system to detect the health conditions. System contains biosensors such as MQ135 to detect diabetes, MQ4 to detect urine saturation in blood and oxy pulse sensor to detect oxygen saturation in blood. MQ135 and MQ4 works on human breathe which exhales different gases. According to concentration of this gases different diseases have been identified which is quick and easy more over no need to take sample of blood. Primary testing of diabetes level, heart rate, oxygen saturation, and kidney health can be detected. Conventional method uses blood samples in most of cases which is critical and time consuming and also more costly. In this propose system human exhales gases is concentrated on bio-sensor. Output of bio sensor is taken and processed. This processed signal is use to detect different diseases growing in human body. Concentration of diabetes or sugar level, urine saturation in blood, oxygen saturation level in blood is displayed o lcd screen. Finally for results accuracy bio sensor based test results and blood sample test results are compared and more than 90% of accuracy of system is concluded.



Figure 1. Block diagram for proposed system.

Human breathe exhale not only carbon dioxide but also exhales acetone gas, methane gas also. Concentration of acetone gas denotes sugar saturation in blood. As concentration of acetone gas exhales increases so as in denotes in increase in sugar saturation level in blood. Concentration of exhale of methane gas increases with increase in urine saturation in blood which means poor kidney health. For oxygen saturation in blood IR rays absorption through blood is detected sensor is placed on fingertip. Output of bio sensor is analog in nature which is then converted into analog electrical signals via sensor and amplified by amplifier to readable voltage level. This analog voltage is then converted to digital or binary form to can be read by microcontroller via ADC analog to digital conversion which is in built in ATMEGA328 controller. Then this digital value is calibrated and displayed on lcd display.

This type of noninvasive method of testing human health parameters is easy to diagnose, easy to read, instrument is portable and can be carried anywhere, no need to take blood sample from body each and every time. Can able take readings in any conditions. Low cost. Higher accuracy, no pain, etc.



Figure 2. Architecture of breath test and list of disease detection

2. Proposed System

Breath exhales different gases concentration along with carbon-dioxide should be used as a diagnostic medium to track health and illnesses for several important reasons. It satisfies the desire for affordable, non-invasive, and user-friendly diagnostic techniques. Breath exhales acetone gas in different concentration with respect to blood sugar concentration that can be diagnosing using acetone gas sensor. Concentration of methane gas increases with increase in concentration of urine saturation in blood can be sense through methane sensor. Optical ir sensor can be used to detect oxygen saturation signals to detect oxygen concentration in body. This system can uses for initial portable fast diagnose of different chemical levels in human body to detect health.



Figure 3. circuit diagram

Human breathe exhales not only CO2 but also some different gases as per organ health condition. Concentration of acetone gas in breathes exhale increases with increase in blood sugar saturation or diabetes level. Same as concentration of methane gas increases with increase in urine saturation in blood. Detecting the gases levels can detect organs health so as easy to detect human health. Above circuit shows experimental setup to detect sugar level in blood, urine saturation in blood, and oxygen saturation in blood. Setup includes MQ135 sensor for detection of acetone for blood sugar saturation, MQ4 for urine saturation in blood, pulse sensor for oxygen saturation. Output of all this sensors is analog in nature. AVR atmega328p will read analog value form sensors via ADC inbuilt and then calibrate it and display readings. It takes only 5 seconds to read the parameters.



Figure 4. Experimental hardware setup



Figure 5. Urine saturation blood urea nitrogen



Figure 6. diabetes detection or sugar saturation in blood

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)=91	6.00	D P=	830	
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Figure 7. oxygen saturation in blood

	BLOOD UR	EA / BUN		
	Result	Unit	Biological Ref. Range	
Test Blood Urea Blood Urea Nitrogen	: 20 : 9.35	mg/dl mg/dl	15-40 mg/dl 5-21 mg/dl	
	BLOOD SUGA	RRANDOM		
Test	Result	Unit	Biological Ref. Range	
Random Plasma Glucose Random Urine Glucose	: 98 : Absent	mg/dl	70-150 mg/dl Absent	

Figure 8. Blood test report

Above section shows the result for parameters checked on given experimental setup. Results are compared with blood test report for five persons. Blood urea nitrogen saturation in blood test report is 9.70 where as kit shows 9.90 mg/dl.

Random plasma glucose in blood test comes 98mg/dl kit shows 98.80. Oxygen saturation is 96.6% whereas kit shows 96%. Therefore accuracy of this kit showing accurate result is up to 95%.

3.Conclusion

Proposed system in this paper is non-invasive method and low-cost biosensor based testing method for checking human health conditions diagnose by testing breath exhale gas contents such as acetone for sugar saturation, methane gas for kidney health. The development and implementation of portable handy non-invasive bio-sensor testing kit for physical health diagnose of any user at any time gives instant results, painless, cost effective, effortless, time saving. Early prediction means early care and minimum treatment and lesser time required to recover from any disease or to stop further spreading of diseases to critical value or untreatable value lead to increase in percentage of average human lifespan. Portable biosensor for saliva test can diagnose kidney health, heart health, cholesterol level, cancer, skin diseases, diabetes, COVID-19, oral dental issues, viral diseases, immunity level and much more with higher accuracy percentage of diagnose as compared with conventional serum technology. This system has accuracy results more than 90 percent.

References

[1] Jingjing Liu and et all, Salivary Cortisol Determination on Smartphone-Based Differential Pulse Voltammetry System. Sensors MDPI, 5th march 2020.

[2] Yi-shing Lisa Cheng, Terry Rees and jhon Wright, A review of research on salivary biomarkers for oral cancer detection. Clinical and Translational Medicine, 2014.

[3] Narasimhan Malathi, Sabesan Mythili, and Hannah R. Vasanthi, Salivary Diagnostics: A Brief Review. Hindawi Publishing Corporation ISRN Dentistry, Volume 2014, Article ID 158786.

[4] L.Malathi, E.Rajesh, N. Aravindha Babu and Sudha Jimson. Saliva as a Diagnostic Tool. Biomedical and Pharmacology Journal, Vol. 9(2), 867-870 (2016).

[5] Zohaib Khurshid and et all. Role of Salivary Biomakers in Oral Cancer Detection. Article in Press.

[6] Bhaskar Navaneeth, M Suchetha. A dynamic pooling based convolutional neural network approach to detect chronic kidney disease. Elsevier Biomedical Signal Processing and Control 62 (2020) 102068.

[7] Bhasker Navaneeth, M. Suchetha. PSO optimized 1-D CNN-SVM architecture for real-time detection and classification applications. Computers in Biology and Medicine (2019).

[8] N.Bhaskar, S. M. A computationally efficient correlational neural network for automated prediction of chronic kidney disease. Elsevier july 10, 2020.

[9] Mohammad A. Javaid and et al. Saliva as a diagnostic tool for oral and systemic diseases. Journal of oral biology and craniofacial research 2015.

[10] Navaneeth Bhaskar, Suchetha M and Nada Y Philip. Time Series Classification based Correlational Neural Network with Bidirectional LSTM for Automated Detection of Kidney Disease. IEEE sensors journal 2020.

[11] Ugo Bottoni and et al. Infrared Saliva Analysis of Psoriatic and Diabetic Patients: Similarities in Protein Components. IEEE transactions on biomedical engineering, vol 63, no.2, feburary 2016.

[12] David Kinnamon and et al. Portable biosensor for monitoring cortisol in low-volume perspired human sweat. Scientific Reports 17 october 2017.

[13] Evanthia E. Tripoliti and et al. Point-of-Care Testing Devices for Heart Failure Analyzing Blood and Saliva Samples. IEEE Reviews in Biomedical Engineering, Volume 13. 17 march 2019.

[14] Valentina Bianchi and et al. IOT and Biosensors: A Smart Portable Potentiostat With Advanced Cloud-Enabled Features. IEEE Access October 14, 2021.

[15] Nasir J. sheikh and Omar Sheikh. Forecasting of Biosensor Technologies for Emerging Point of Care and Medical IoT Applications using Bibliometrics and Patent Analysis. Proceedings of PICMET 16: Technology Management for Social Innovation. 2016.

[16] Francesca G. Bellagambi and et al. Electrochemical biosensor platform for TNF cytokines detection in both artificial and human saliva: heart failure. Sensors and Actuators 2017-Elsevier.

[17] Y.-H.LeeandD.T.Wong,-Saliva: an emerging bio-fluid for early detection of diseases, American Journal of Dentistry, vol.22, no.4, pp.241–248,2009.

[18] T. Pfaffe, J. Cooper-White, P. Beyerlein, K. Kostner, and C. Punyadeera, -Diagnostic potential of saliva: current state and future applications, Clinical Chemistry, vol. 57,no. 5, pp.675–687,2011.

[19] J.M.Lee, E.Garon, and D.T.Wong, - Salivary diagnostics, Orthodontics and Craniofacial Research, vol. 12, no. 3, pp. 206–211, 2009.

[20] S.Mittal, V.Bansal, S.Garg, G.Atreja, and S.Bansal, - The diagnostic role of Saliva—a review. Journal of Clinical and Experimental Dentistry, vol. 3, no. 4, pp. e314–e320, 2011.

[21] D. Malamud, - Saliva as a diagnostic fluid, Dental Clinics of North America, vol.55, no. 1, pp. 159–178,2011.

[22] M.Greabu, M.Battino, M.Mohoraetal. -Saliva—a diagnostic window to the body, both in health and in disease, Journal of Medicine and Life, vol. 2, no. 2, pp. 124–132,2009.

[23] F. Ahmadi Motamayel, P. Davoodi, M. Dalband, and S. S. Hendi,-Saliva as a mirror of the body health, DJH Journal, vol.1, no.2, pp.1–15,2010.

[24] K. D. Bhoola, M. W. McNicol, S. Oliver, and J. Foran, -Changes in salivary enzymes in patients with sarcoidosis, The New England Journal of Medicine, vol. 281, no. 16, pp. 877–879,1969.

[25] F. A. Scannapieco, P. Ng, K. Hovey, E. Hausmann, A. Hutson, and J. Wactawski-Wende,-Salivary bio markers associated with alveolarboneloss, the New York Academy of Sciences,vol.1098,pp.496–497,2007.

[26] P.N.Floriano, N.Christodoulides, C.S.Milleretal. –Use of saliva-base dnano-biochip tests for acute myocardial infarction at the point of care: a feasibility study, Clinical Chemistry, vol. 55, no. 8, pp. 1530–1538,2009.

[27] M.Qvarnstrom, S.Janket, J.A.Jonesetal, -Salivary lysozy mean d prevalent hypertension, Journal of Dental Research, vol. 87, no. 5, pp. 480–484, 2008.

[28] S.-J.Janket, J.H.Meurman, P.Nuutinenetal, -Salivary lysozy mean d prevalent coronary heart disease: possible effects of oral health on endothelial dysfunction, Arteriosclerosis, Thrombosis, and Vascular Biology, vol.26,no.2,pp.433–434,2006.

[29] A.Totan, M.Greabu, C.Totan, and T.Spinu, –Salivary as partate aminotransferase, alanine aminotransferase and alkaline phosphatase: possible markers in periodontal diseases? Clinical Chemistry and Laboratory Medicine, vol. 44, no. 5, pp. 612–615, 2006.

[30] C.Zuliani, G.Matzeu, and D.Diamond, - A potentiometric disposable sensor strip formeasuring pHinsaliva, Electrochim.Acta, vol.132, pp. 292–296,2014.