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Mobile and Wearable Health Seminar Series  
University of Cambridge

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# Beyond Listening: The Evolution of Earables in Health and Wellbeing Monitoring

# Personal Introduction

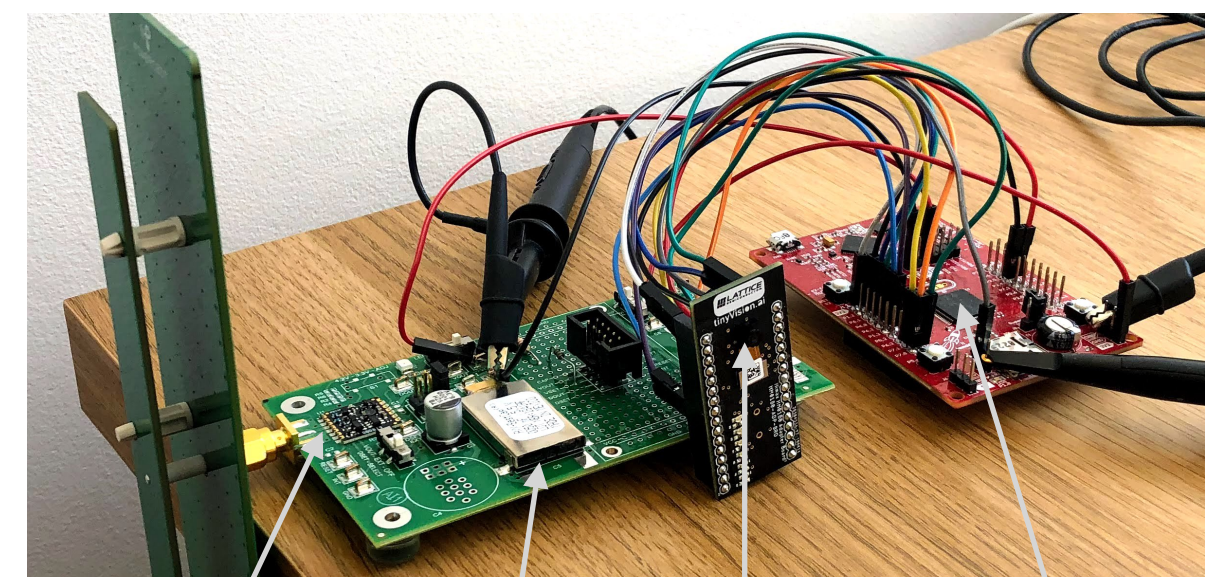
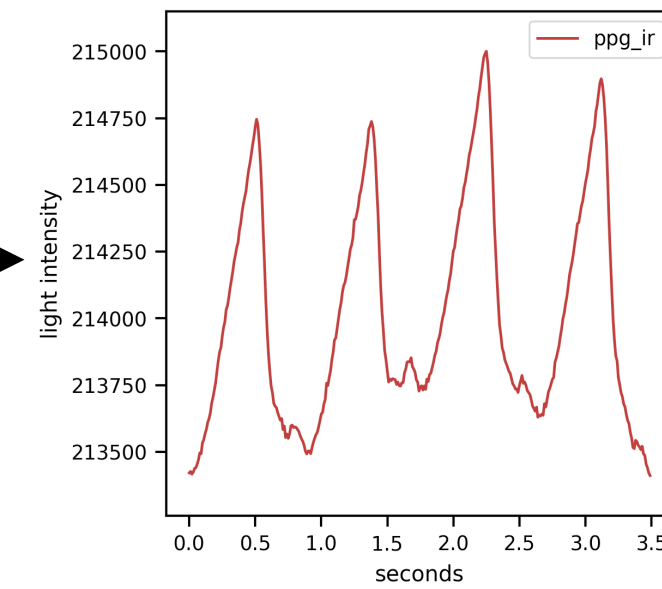
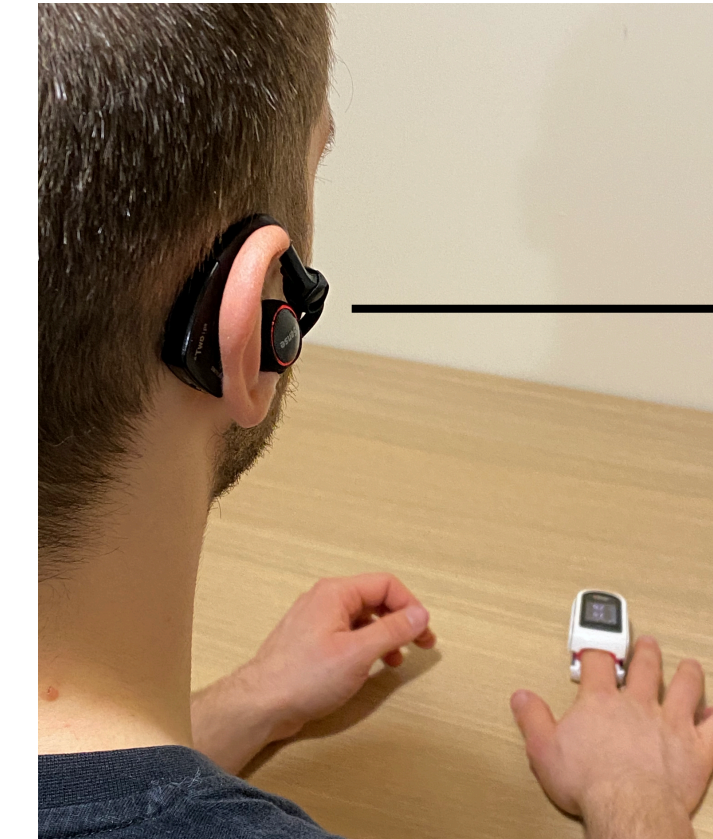
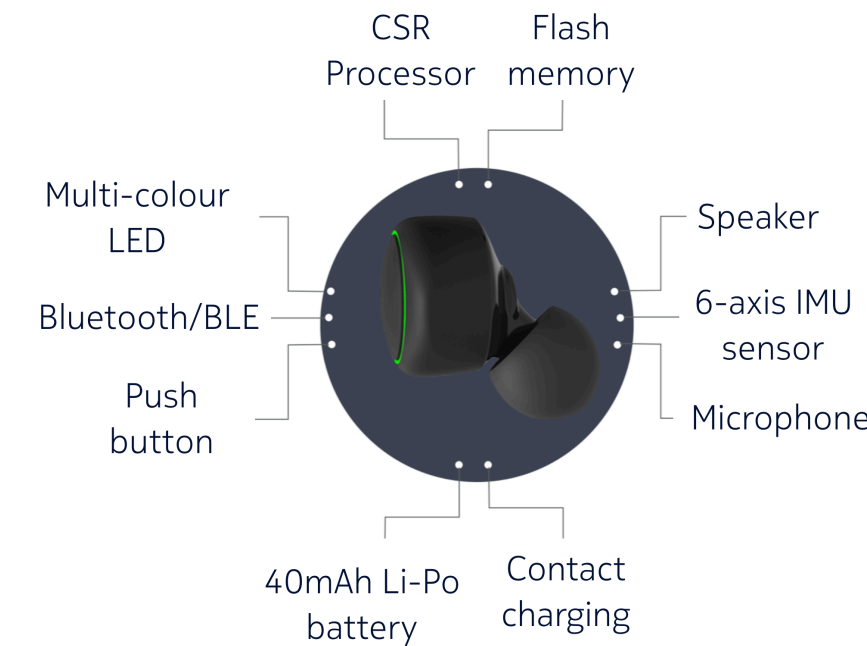
Principal Research Scientist and Tech Lead at Nokia Bell Labs

## Earable computing

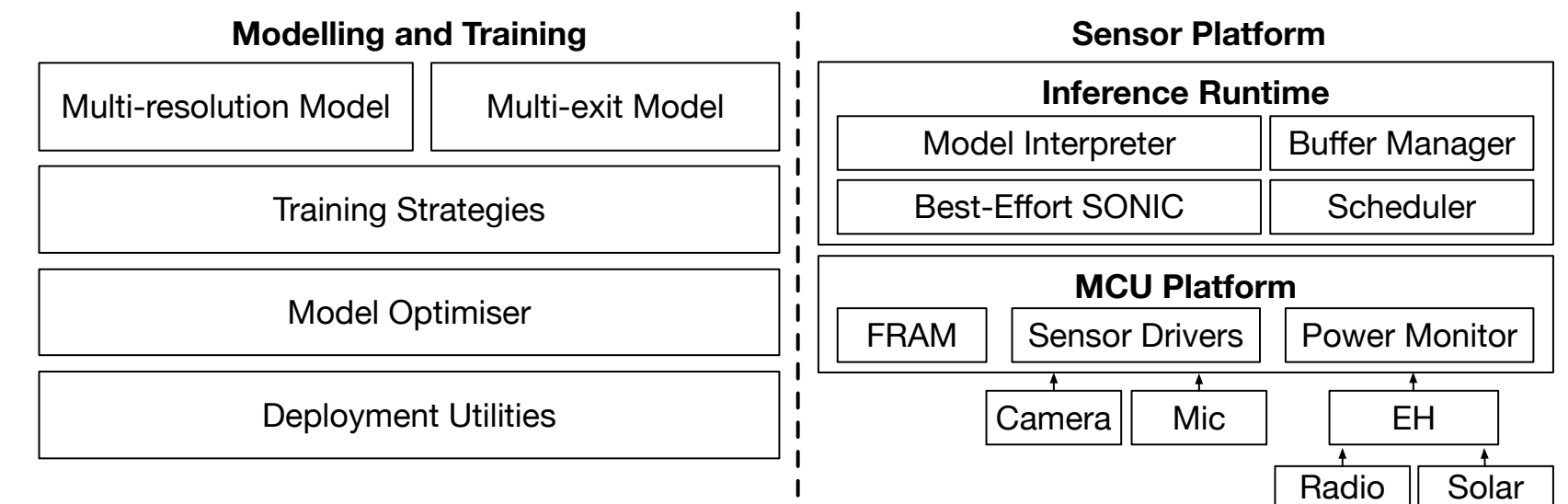
- Vital signs monitoring in the ear
- Activity and facial expressions recognition
- Platform development and community release (eSense)

## Intermittent computing and embedded machine learning

- Framework for energy-adaptive ML workloads on batteryless sensors



915MHz Radio Harvester    50mF Supercapacitor    Ultra-Low Power Camera    16bit Microcontroller (16MHz) MSP430



# Agenda

- Earables as health and wellbeing devices
- PPG sensor for in-ear applications
- Placement of PPG in/around the ear
- Cuffless blood pressure estimation with earables
  - Dual PPG
  - Multi-modal PPG + Microphone
- Conclusion

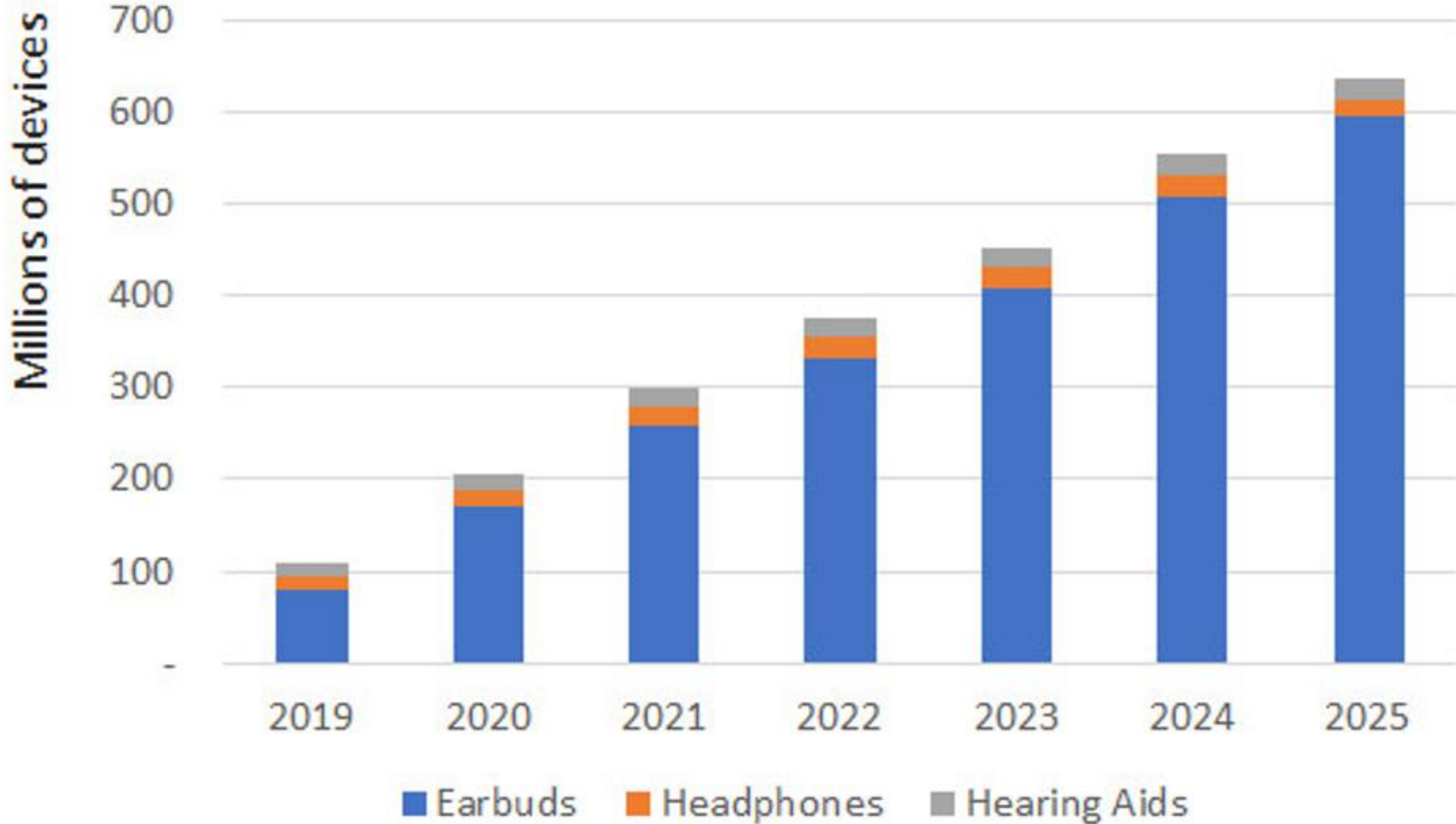
# What is happening in the Earable Space ?

One of the fastest growing markets since the smartphone

Bragi started the trend in 2014 with a \$3.4M Kickstarter campaign  
Apple dominates since the introduction of AirPods in 2016

Continuous interest from industry and academia over the years

Estimated market to reach **\$80Bn in 2025**, growing to **\$120Bn by 2032**



Sources:  
ABI Research — Wearable Report  
WiForce — The Hearables Report 2020-2025  
Market Research Future — Hearables Market Research Report

# Adoption is mainly driven by listening experience

Listening to different types of content is the main use case for True Wireless Earbuds

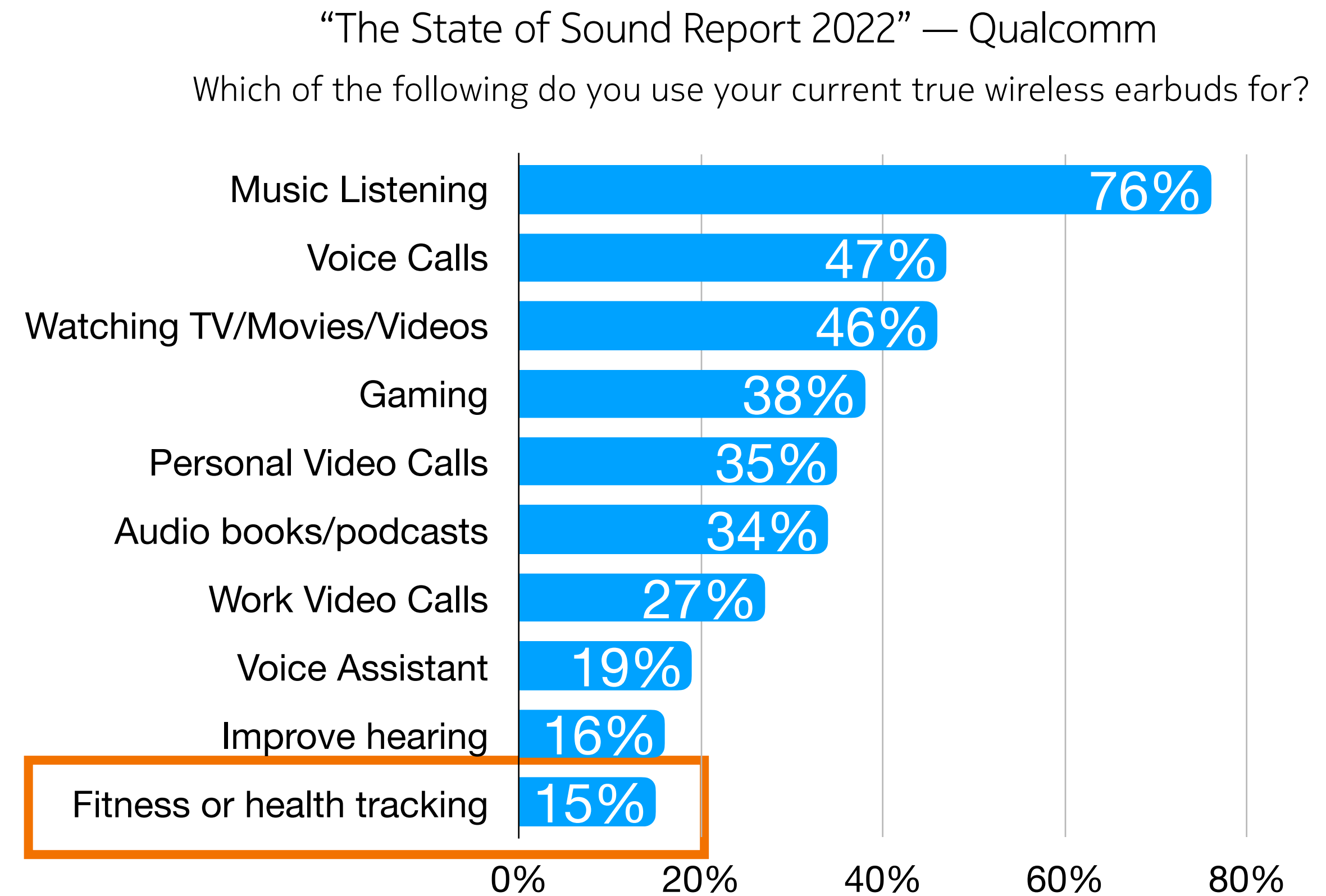
Companies are increasingly focusing on the **listening experience** with significant effort in this direction (e.g. 3D audio, noise cancelling, better call quality, ...)

**Sensory experience** is still an under-utilised area in earables

E.g. monitoring of physical, mental and social wellbeing but also health and vital signs monitoring

“More than half (54%) of consumers surveyed globally said they are likely or extremely likely to purchase wireless headphones or earbuds that offer additional features, such as voice assistance, **fitness biometrics**, or hearing assistance capabilities.”

“There is growing demand for enhanced sensor capabilities and fitness & health tracking, which have risen year-on-year.”



Time and date  
Calls and messages  
Music streaming



2009  
Samsung S9110 Watch Phone



2020  
Apple Watch Series 6

- Activity and sleep tracking
- Blood Oxygen level
- Heart rate
- ECG
- Environmental sound monitoring
- Handwashing monitoring
- Apps

Music playback  
Calls



2015  
Onkyo W800BT



Active Noise Cancelling  
Transparency mode  
Spatial audio  
Adaptive EQ



2019  
Apple AirPods Pro



The future of earables  
will be **sensory-rich**  
and **health-oriented**

# The Importance of Cardiovascular Health

- **Cardiovascular diseases (CVD)** are the **top cause of death globally**, causing an estimated **17.9 million deaths in 2019**
- **High blood pressure** and hypertension affect more than **1 billion people worldwide**
- Only about **42% of adults** with hypertension are **aware of their condition**
- **Frequent monitoring and early detection** are crucial for reducing CVD risks and improving medication outcomes

Source:  
World Health Organization

# Earables Are Well Positioned For Frequent Monitoring

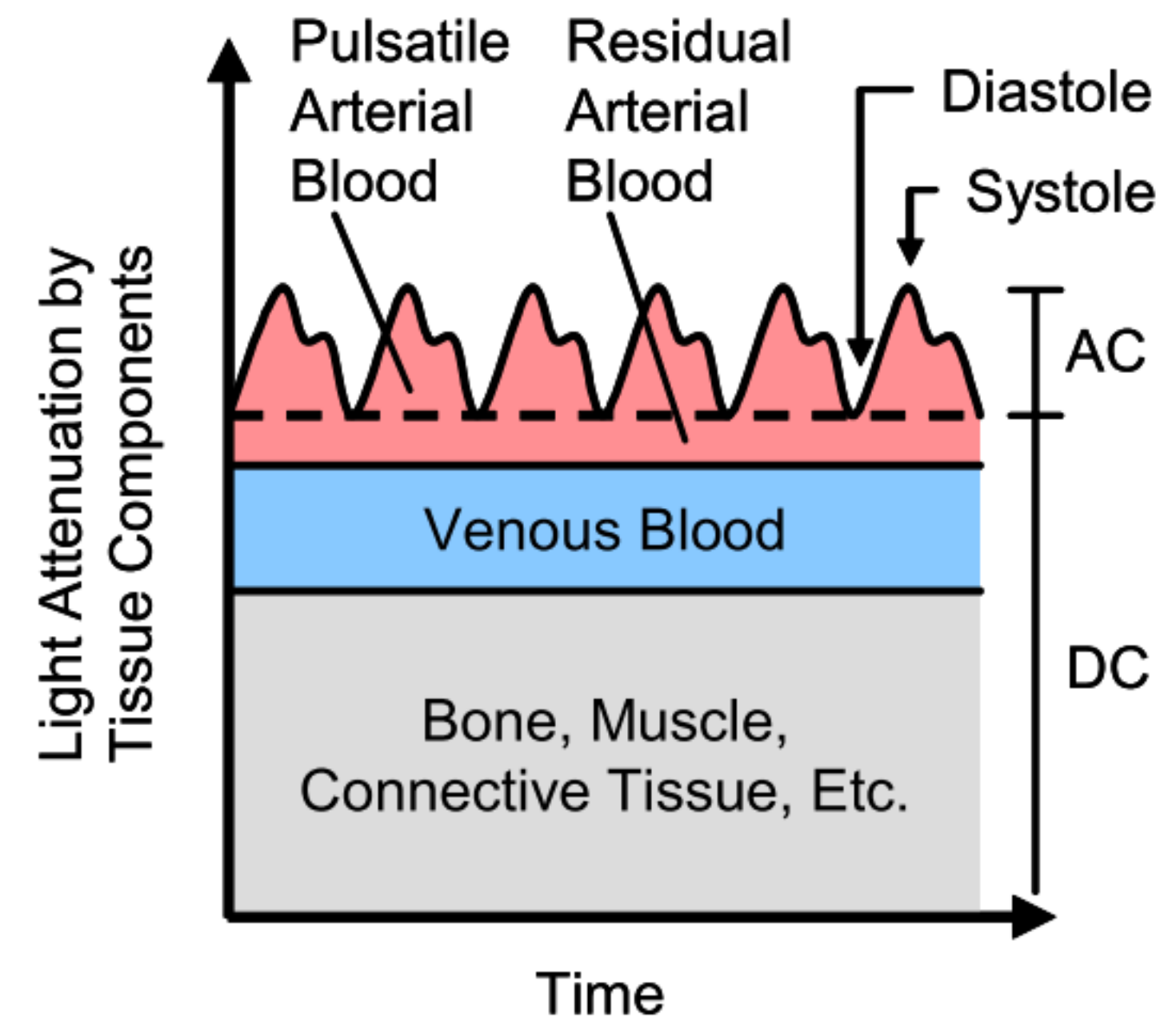
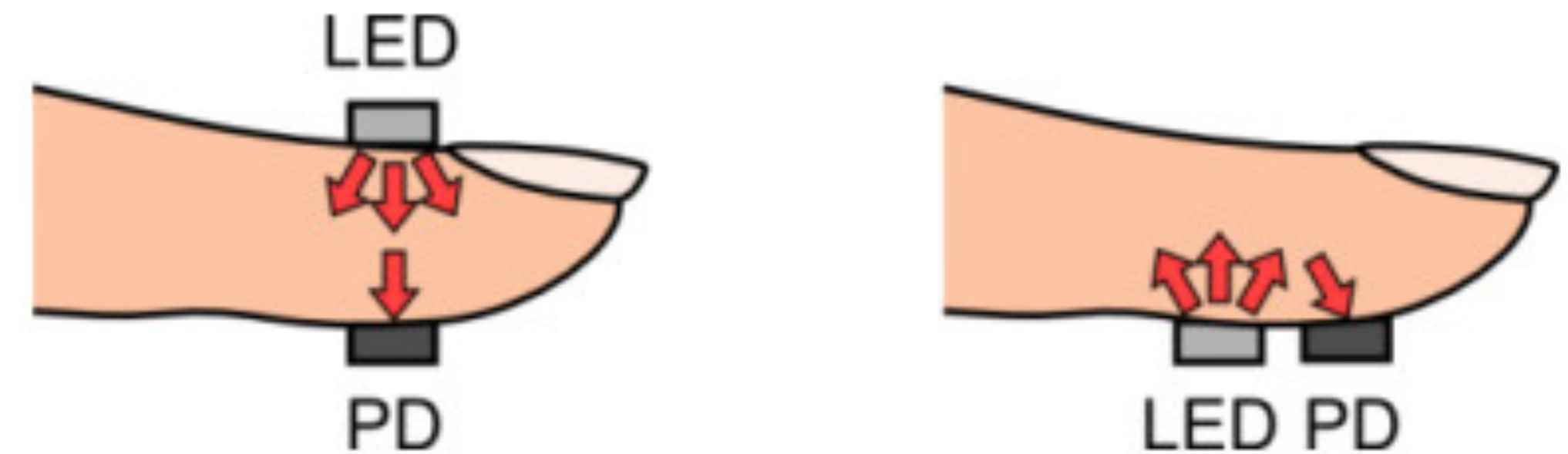
- Established purpose & socially accepted
- Unique placement for robust sensing
  - Dense vascular structure
  - Head is less susceptible to motion artefacts
- Intimate and privacy preserving interaction



# Photoplethysmogram

PPG: a cheaper alternative to ECG

- There are essentially two ways of measuring blood volume changes from PPG:
  - **Light Transmission** (used when collecting PPG data from finger-tips and earlobes).
  - **Light Reflectance** (it is the approach used by smartwatches and off-the-shelves wearables).
- Light is more absorbed by blood than by tissues. Hence, small volume changes correspond to changes in the intensity of light (voltage of the signal).



PPG signals alone can be used to derive a number of vital signs

Heart Rate [HR], Blood Oxygen Saturation [SpO2], and Respiration Rate [RR]

+ Temperature

+ Blood Pressure

**5 Key Vital Signs of Human Body**

**WHY IN-EAR**

**PPG?**

# Technical Reasons

Why in-ear PPG?

- PPG is **straightforward to implement** (LEDs + photodiodes) and mechanically easy to integrate in an earable form
- PPG's output signal is **easy to interpret**

# Biological Reasons

Why in-ear PPG?

- The **ears** are supplied by **several blood vessels**, branches of major arteries (external carotid artery)
- The human **head is less susceptible to motion artifacts** thanks to the natural vibration damping of the musculoskeletal system

# Usability Reasons

Why in-ear PPG?

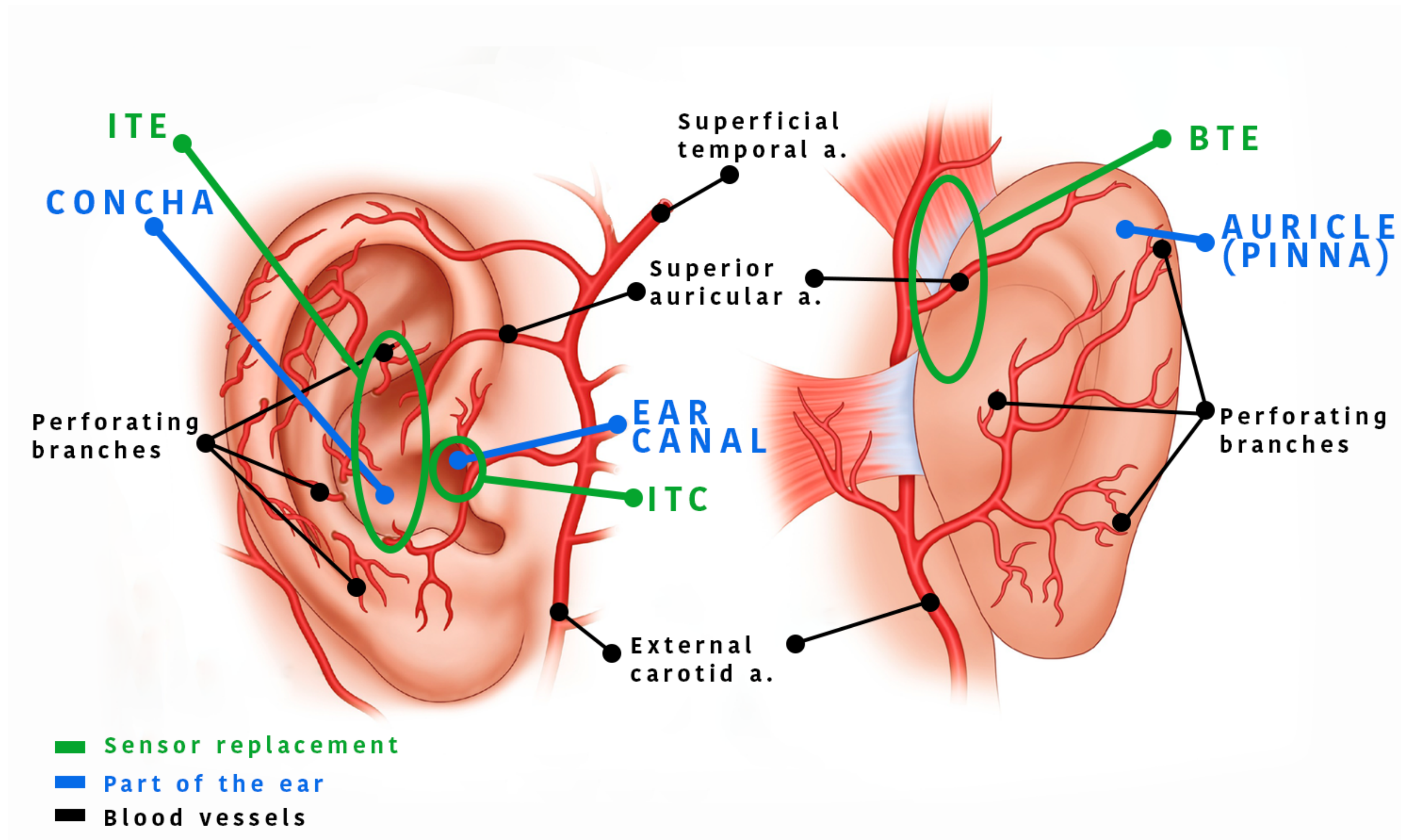
- Earables have to be:
  - **Lightweight**
  - **Ergonomically comfortable**
  - **Non-invasive**
- PPG, thanks to its **mechanical simplicity**, is the most suited sensor to seamlessly integrate into a sensory earable

Where is the **optimal**  
**positioning** of an  
in-ear PPG sensor?

To what extent is  
in-ear PPG **robust** to  
**motion** artifacts?

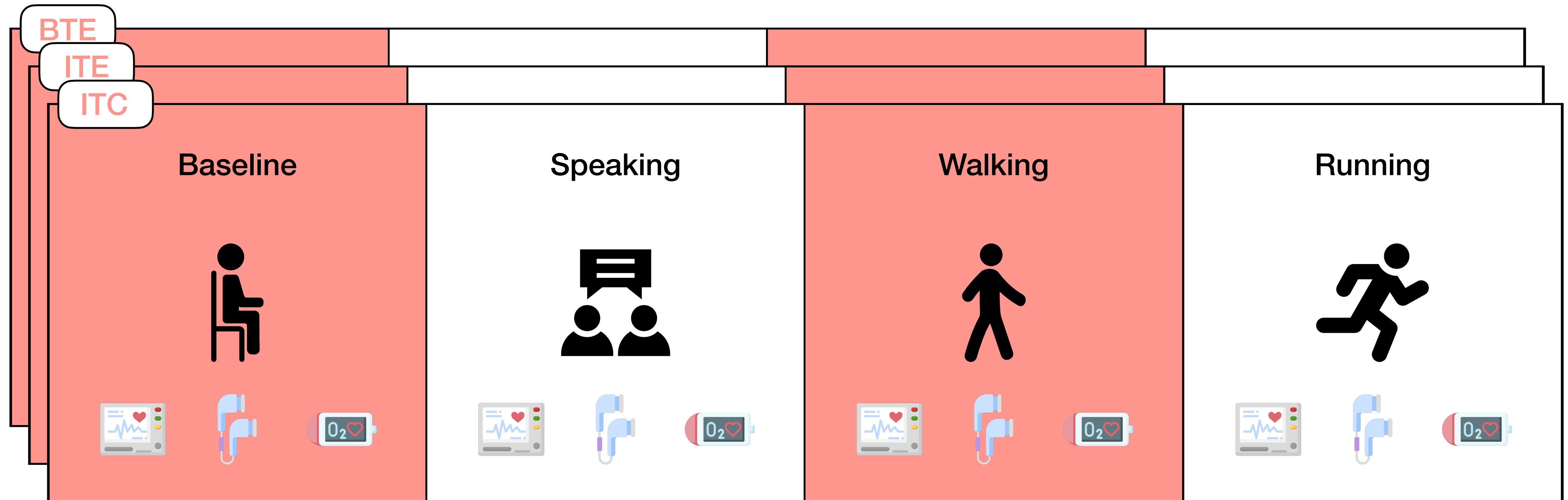


# Ear Anatomy



**BTE** - Behind the Ear | **ITE** - In the Ear | **ITC** - In the Canal

# Study Protocol

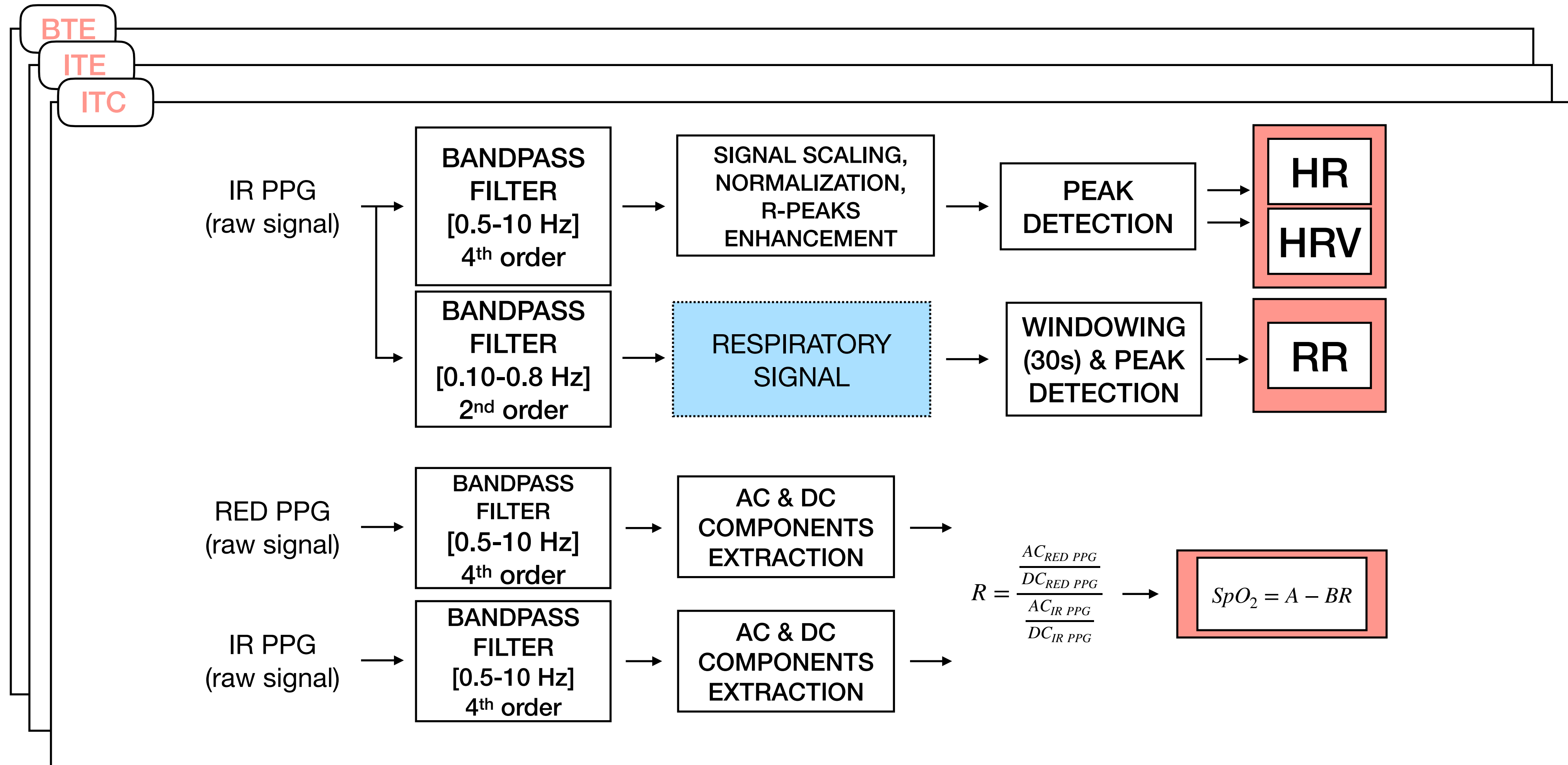


- 12 healthy participants, 2 females, 24-40 years of age, mean 30.4
- Red and IR PPG collected in 3 different locations (BTE, ITE, ITC)
- Compare the extracted vitals with those calculated from medical grade ground truth devices
- Roughly 1 hour of data per participant

# Study Protocol



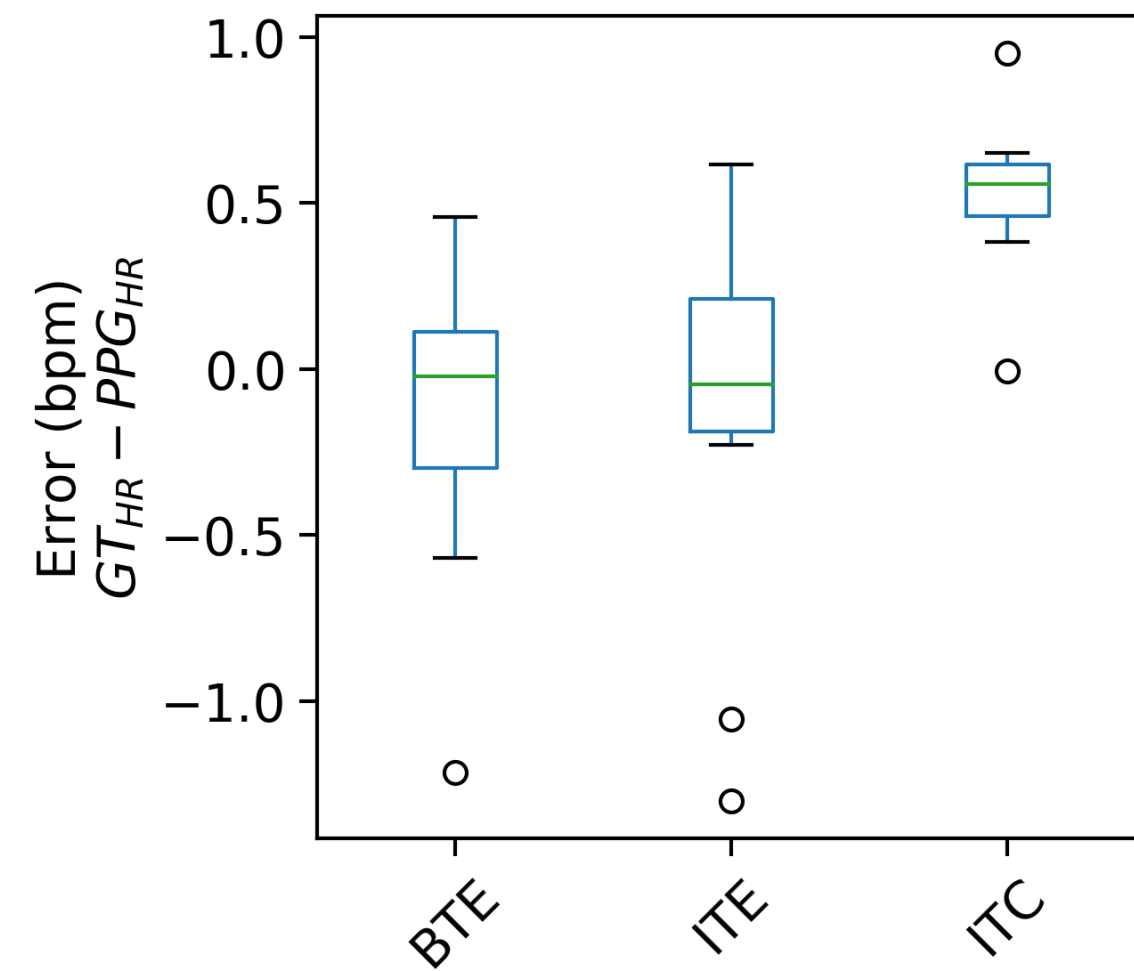
# Vital Sign Extraction



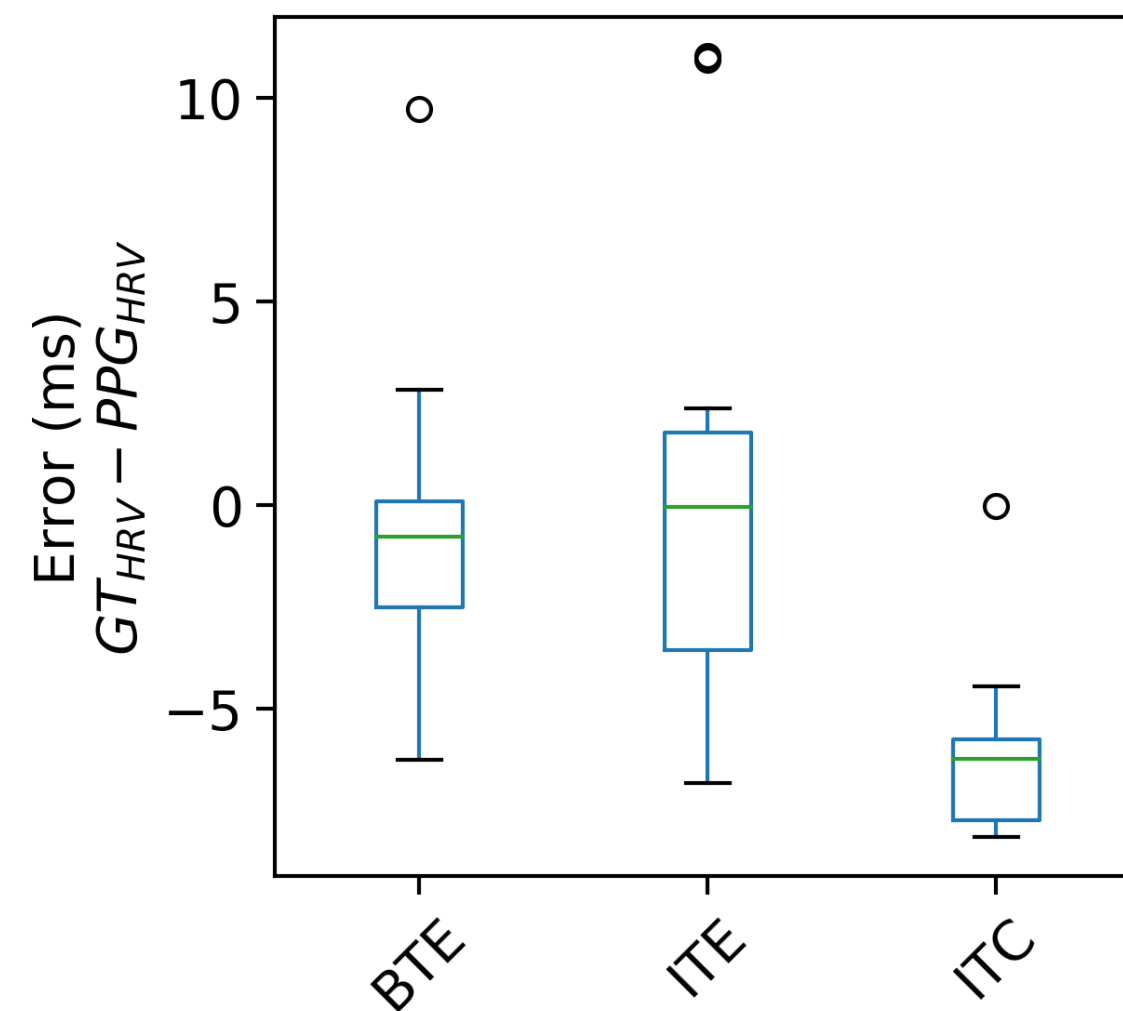
# Inaccuracy at Rest

Where is the optimal positioning of an in-ear PPG sensor?

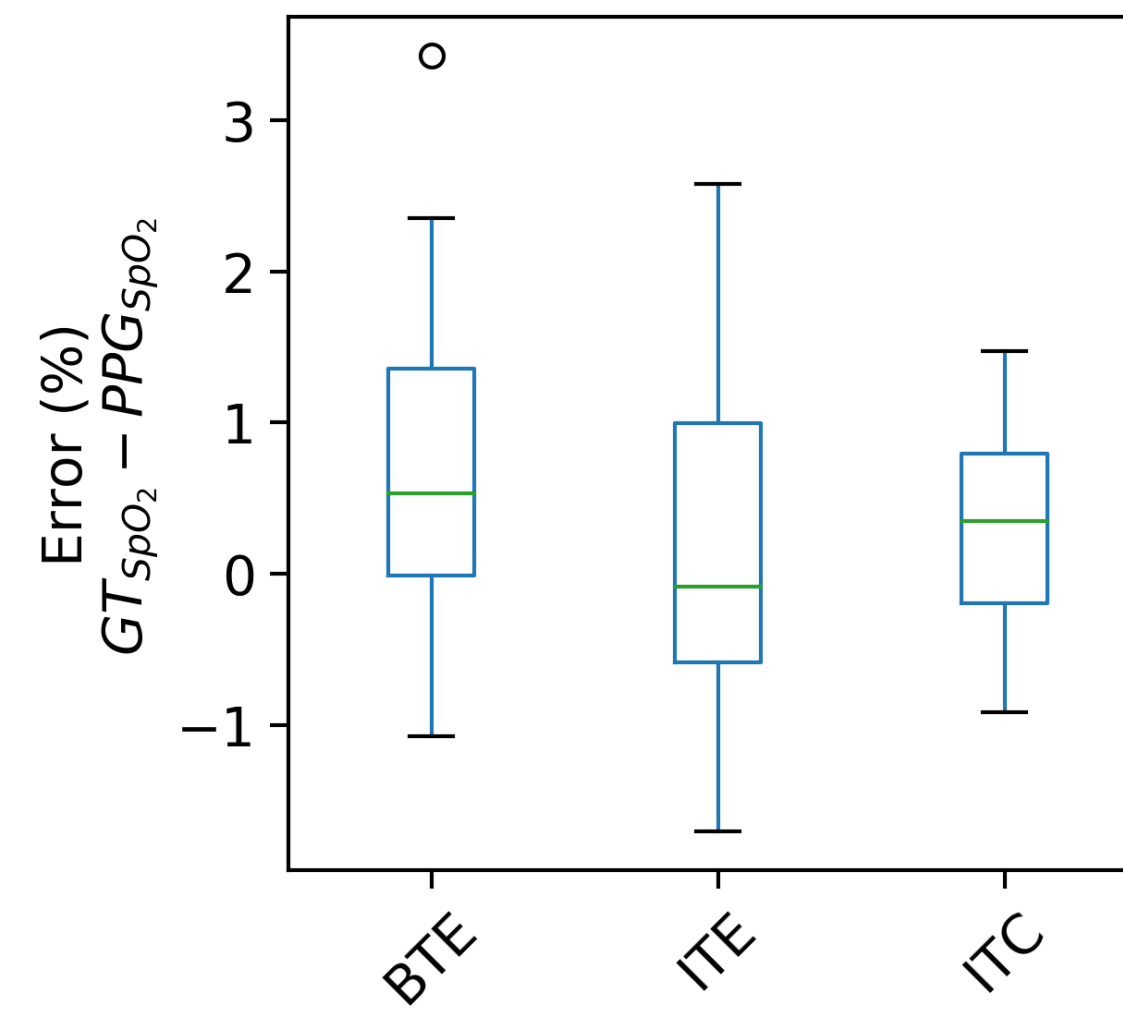
HR



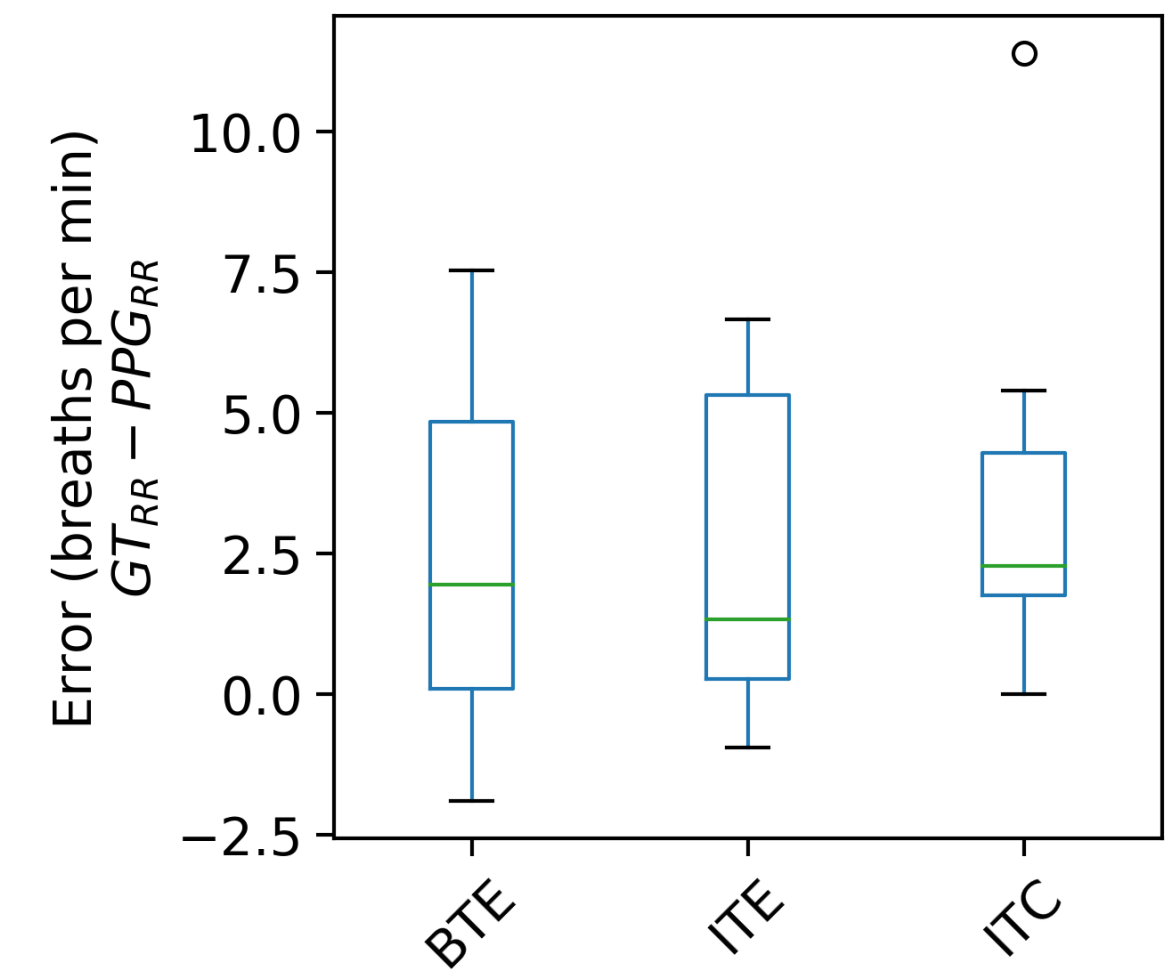
HRV



SpO2



RR



Reliable HR, HRV, and SpO2, with ITC showing the least error variability

# Take Aways

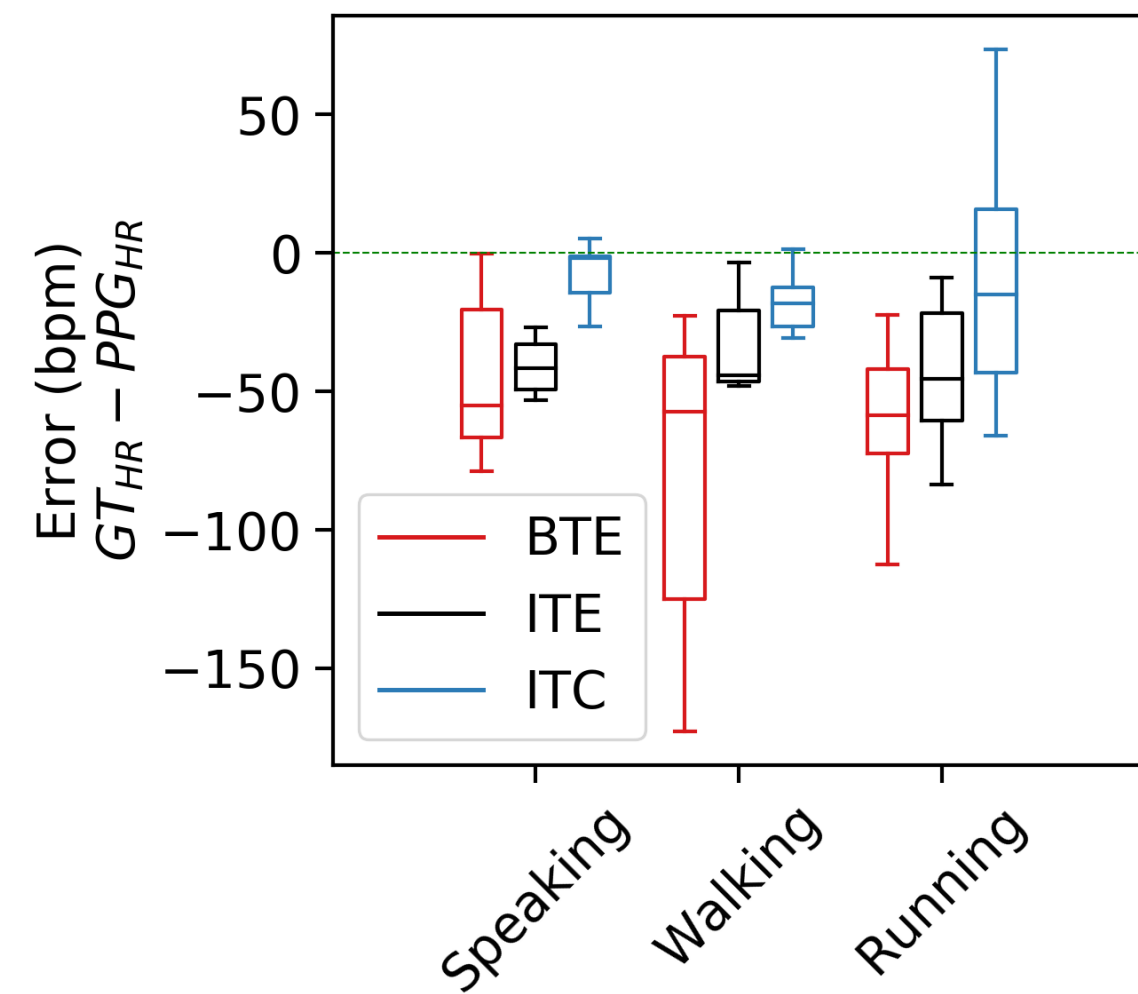
Where is the optimal positioning of an in-ear PPG sensor?

- Among the 3 placements, **ITC** consistently reports the **least variability** due to better **skin-sensor adhesion** and improved **ambient-light shielding** due to the natural darkness of the ear canal
- **RR** has a **larger error margin**, with a tendency of PPG in underestimating it. This could be improved by leveraging extra information from multi-modalities (e.g. microphones & IMU)

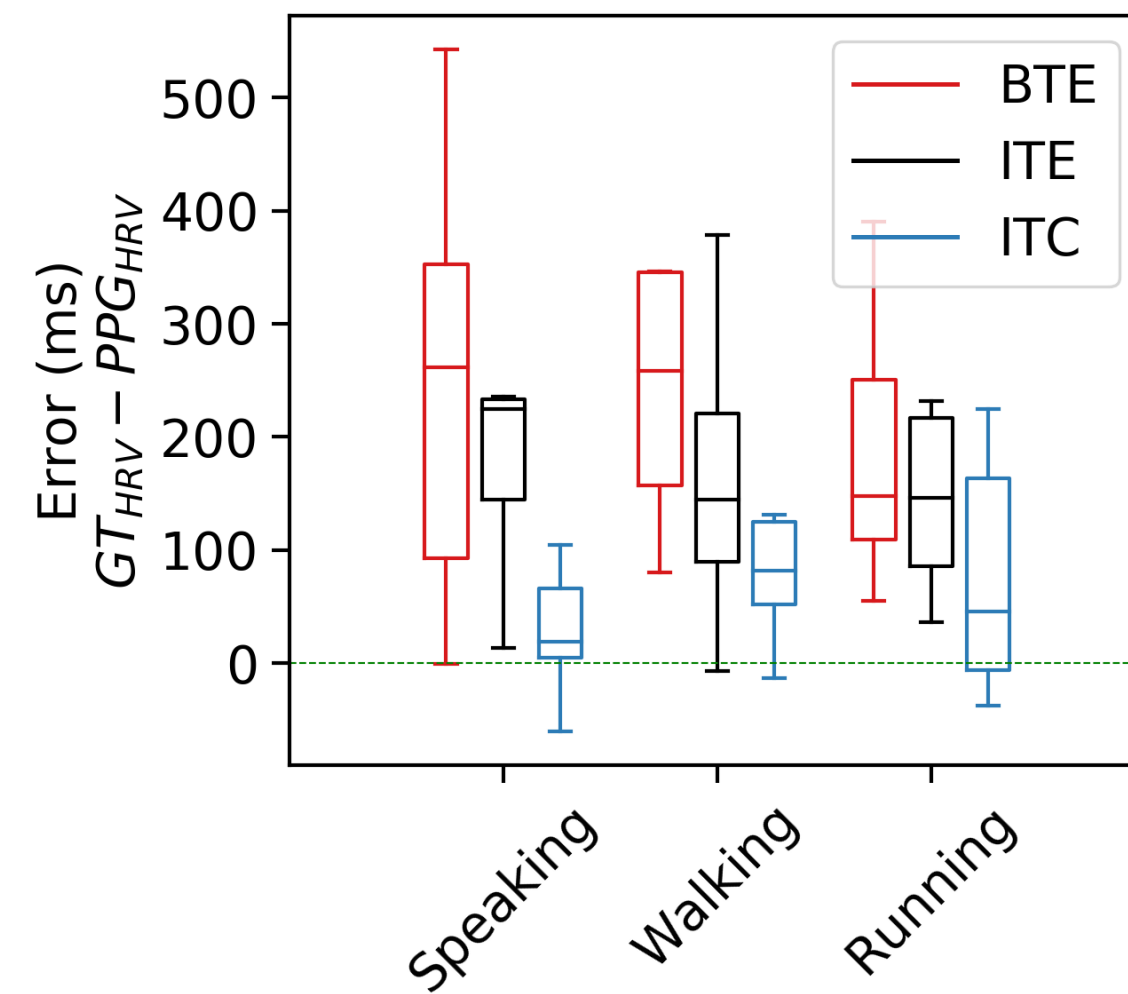
# Inaccuracy with Motion

To what extent is in-ear PPG robust to motion artifacts?

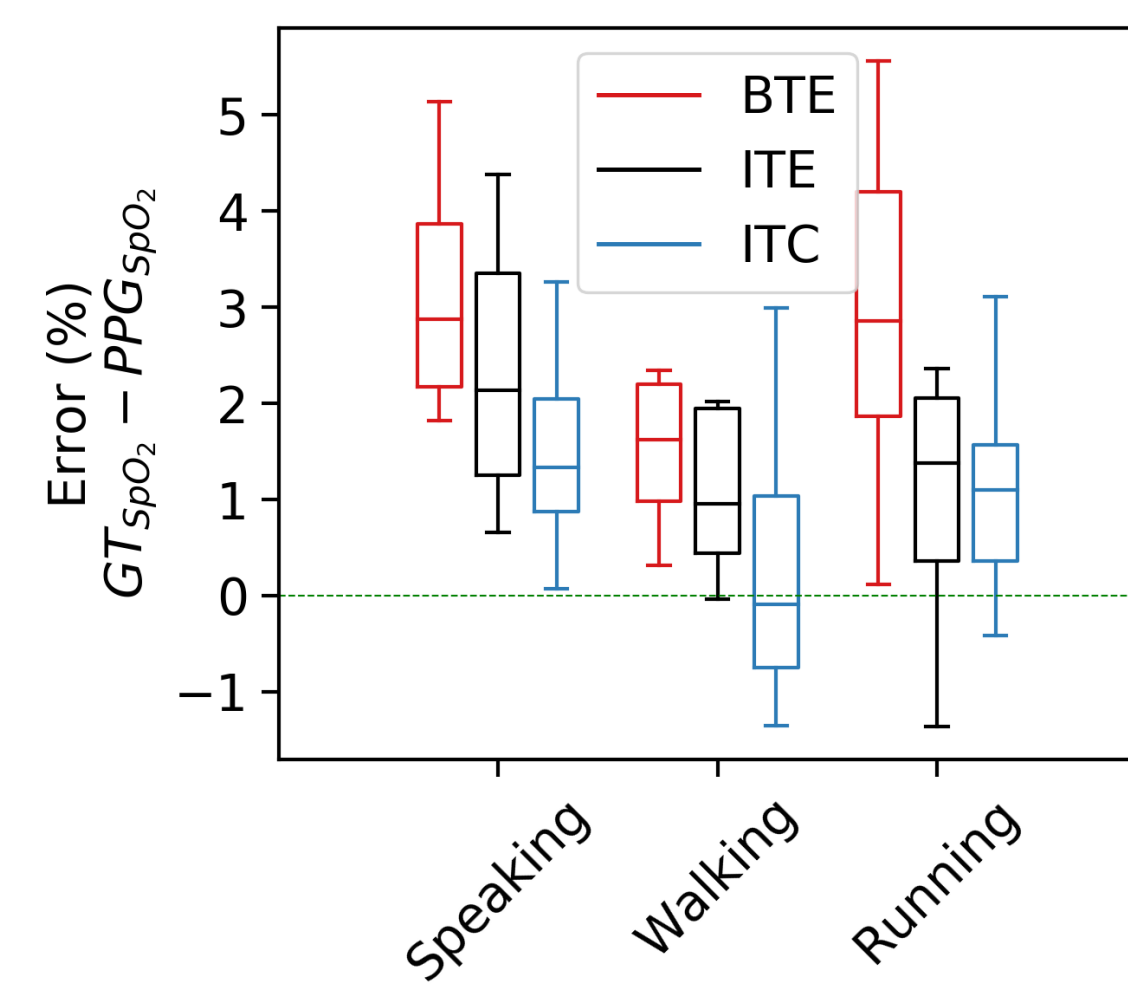
HR



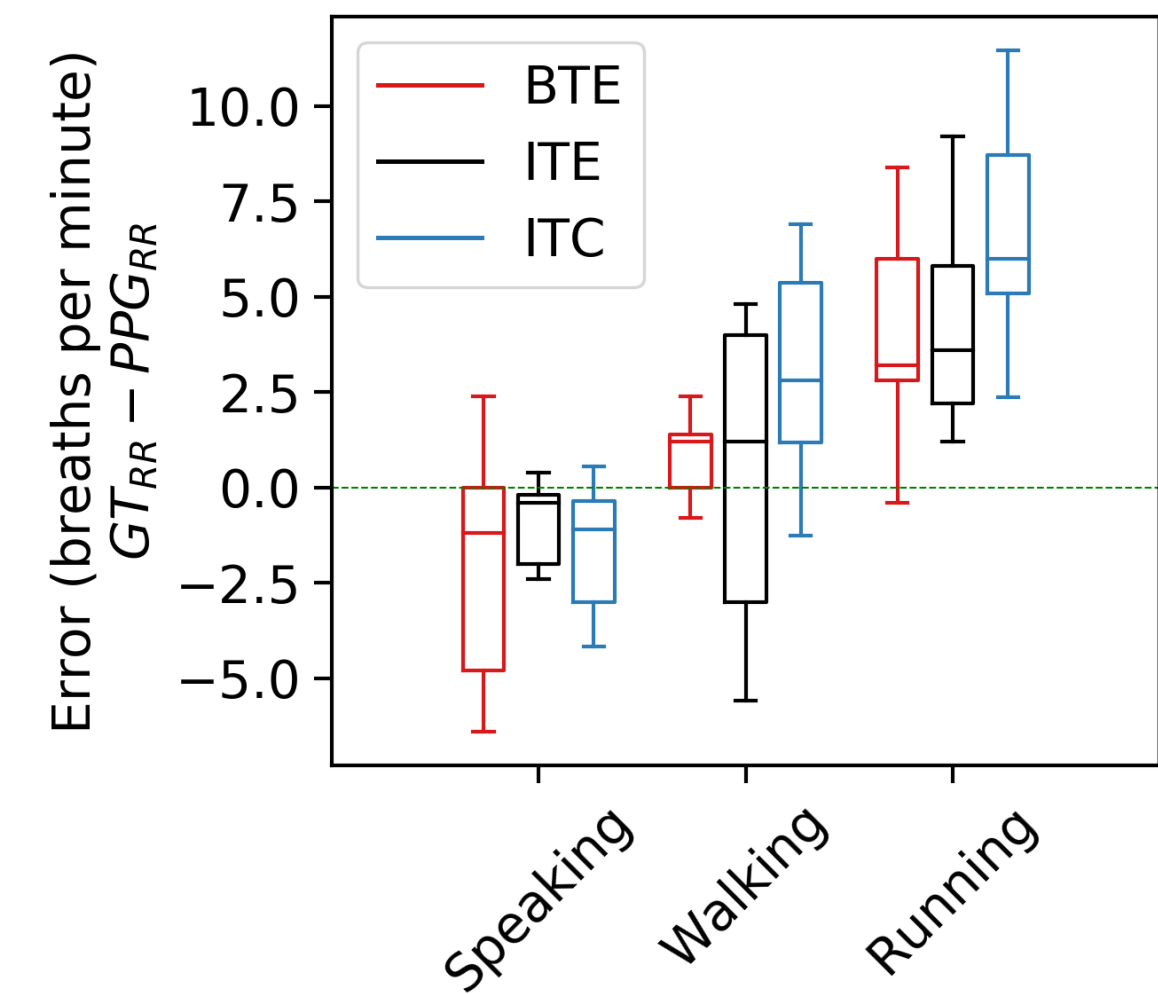
HRV



SpO2



RR

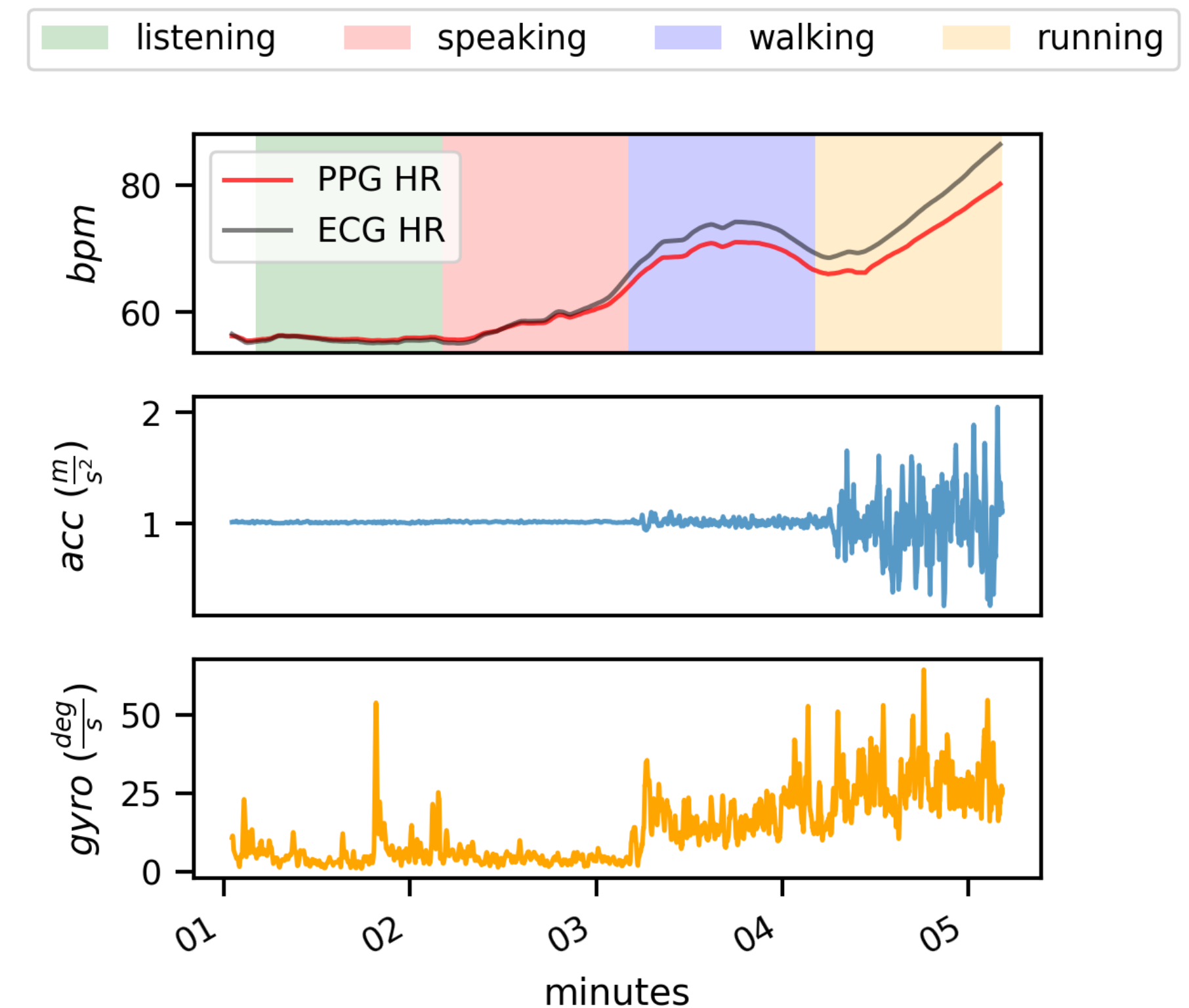


In-ear PPG at the ITC location suffer less from motion artifacts.

# Take Aways

To what extent is in-ear PPG robust to motion artifacts?

- Despite better fit, **ITC** still suffer from **motion artifacts**: the error grows proportionally with the intensity of the artifacts (15% for speaking, up to 30% when the user runs)
- Interestingly the **SpO2** estimate is not worsening with the artifacts intensity but rather remains **constant**
- PPG-extracted vital signs follow a **similar pattern to that of ground truth**





# Outlook

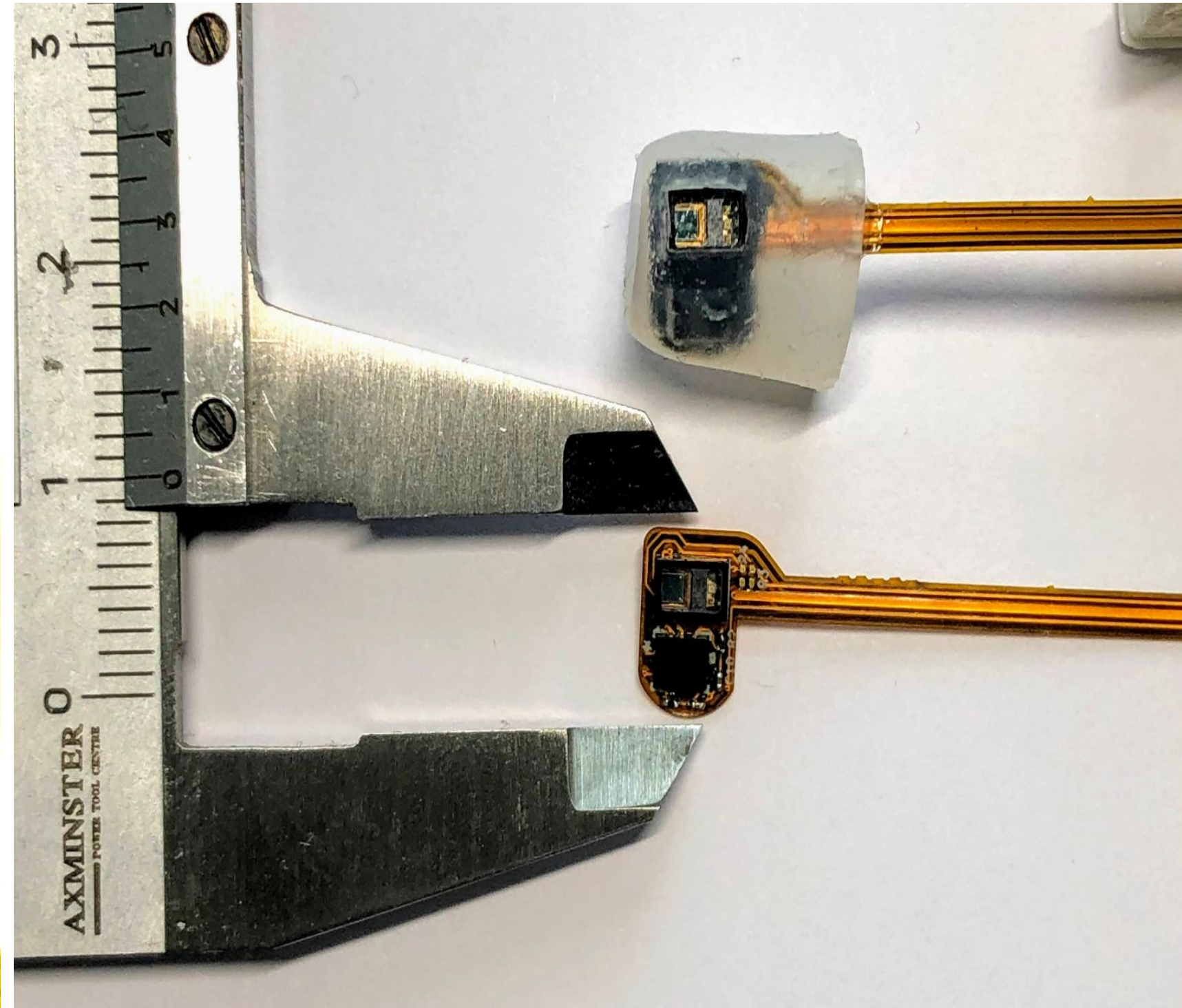
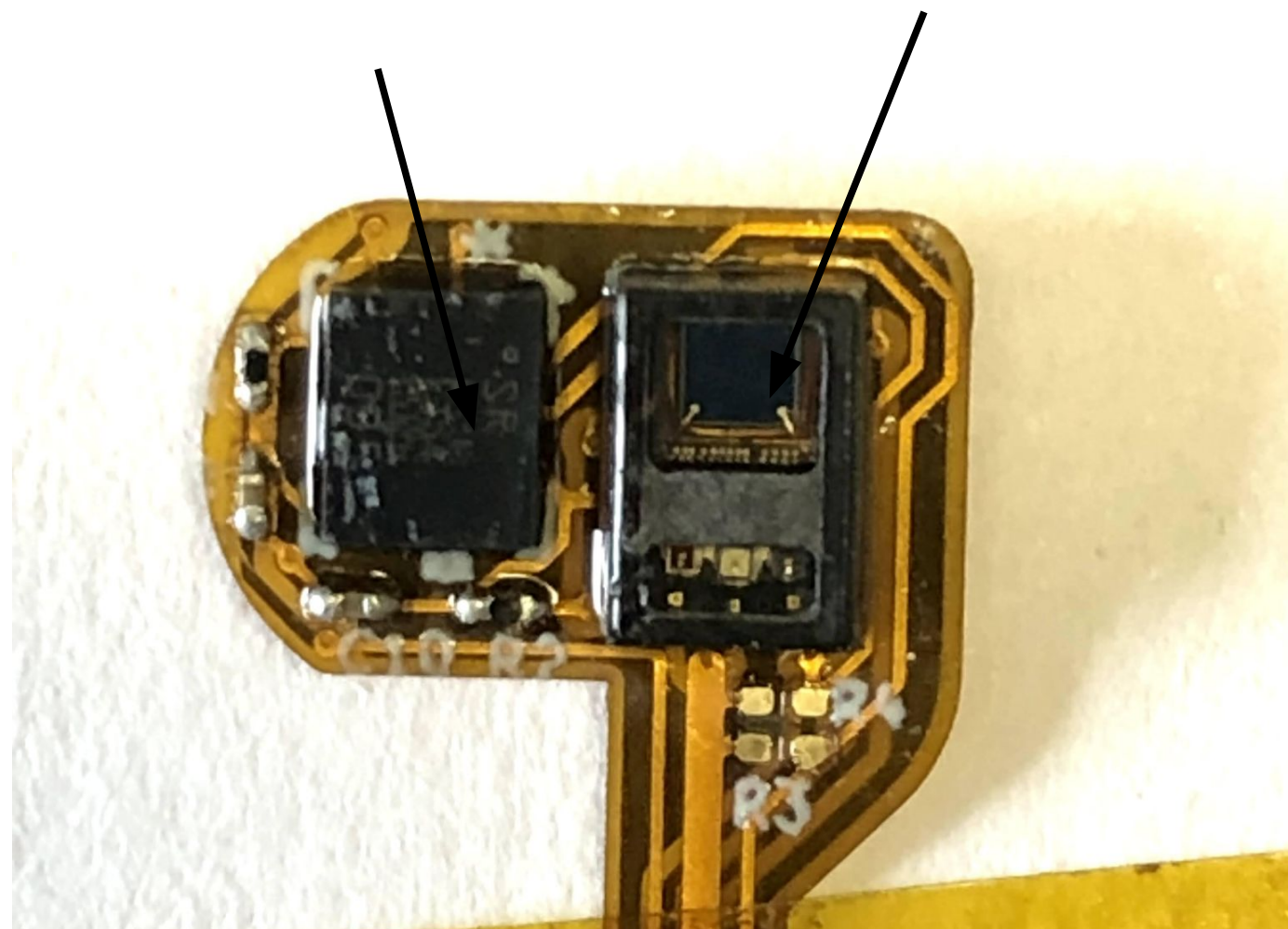
## Form Factor & Ear-Tip Design

- **PPG** is a remarkably useful sensor for vital signs monitoring
- **ITC PPG** liberates us from a specific **earable-form design** given ear-tips are default features for most earables
- Challenges in designing an ear-tip with integrated PPG include:
  - Ensuring a **tight seal** for accurate data collection
  - Providing a **stable fit** to reduce motion artifacts and accommodate various users
  - Maintaining **comfort** for extended wear
- The variety in ear sizes and shapes makes creating a **universal ear-tip** a significant challenge for engineers and designers
- **ITE PPG** offers a promising solution with a balance between integration ease and signal quality

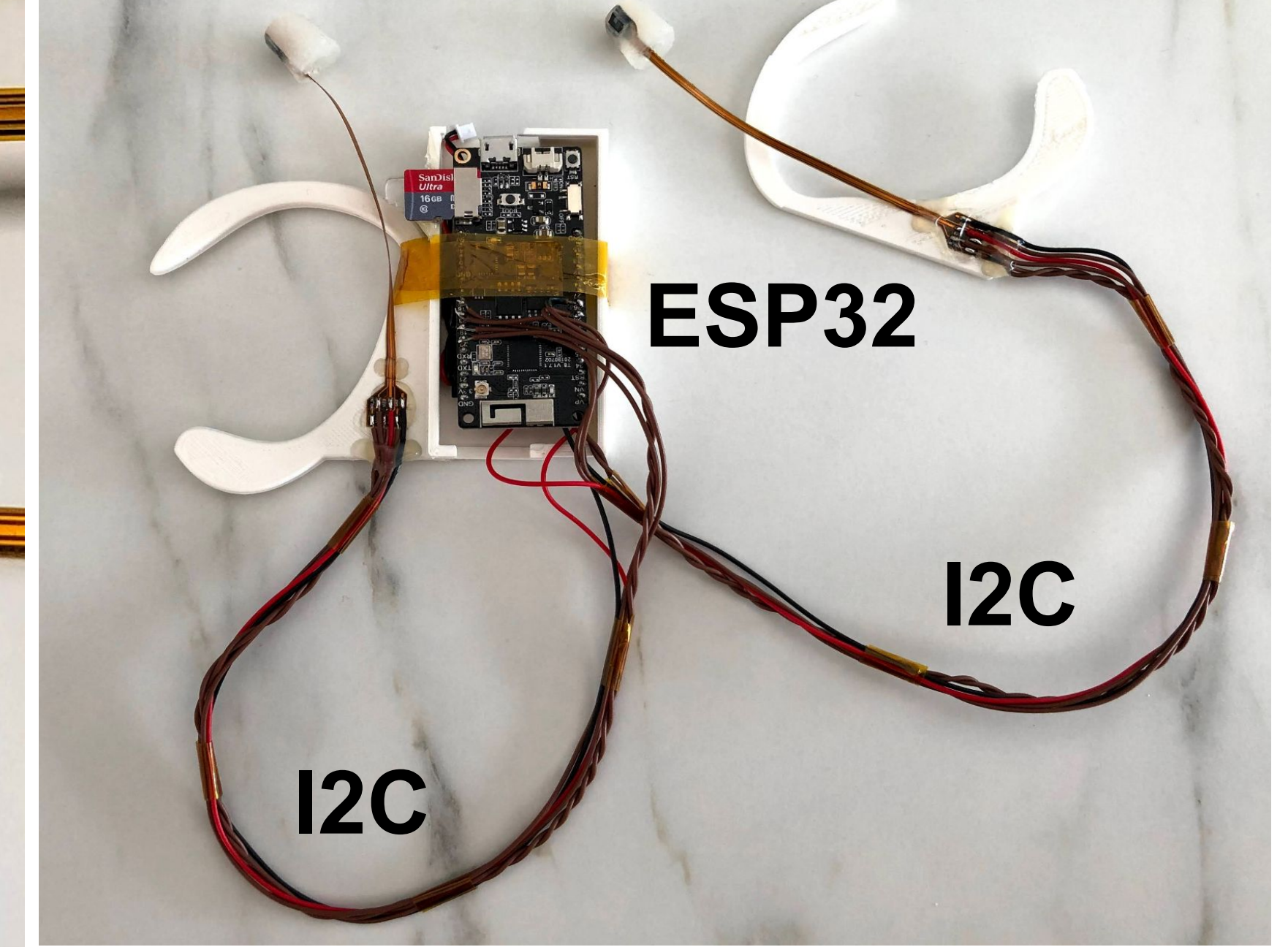
# Outlook

Form Factor & Ear-Tip Design

ST LSM6DSRX IMU  
MAX86161 PPG sensor



Left earbud    Right earbud



Can we estimate **blood**  
**pressure** with in-ear PPG?

# What is blood pressure?

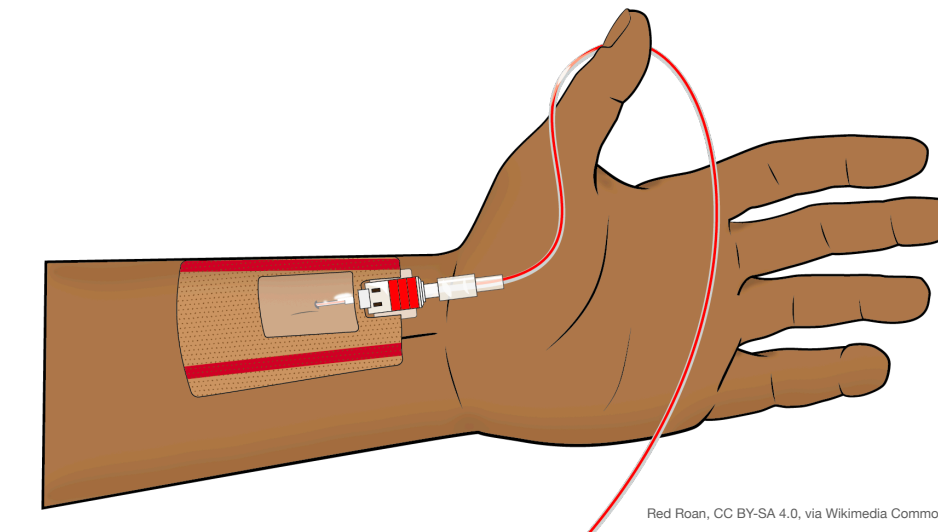
- BP is the pressure of circulating blood against the walls of blood vessels
- **Systolic Blood Pressure** (SBP) is the peak pressure during the heart's contraction phase or systole
- **Diastolic Blood Pressure** (DBP) is the lowest pressure when the heart is relaxed or in the diastole phase
- Typically recorded in millimeters of mercury (mmHg)

BLOOD PRESSURE CATEGORY	SYSTOLIC mm Hg (upper number)	and/or	DIASTOLIC mm Hg (lower number)
<b>NORMAL</b>	LESS THAN 120	and	LESS THAN 80
<b>ELEVATED</b>	120 – 129	and	LESS THAN 80
<b>HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 1</b>	130 – 139	or	80 – 89
<b>HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 2</b>	140 OR HIGHER	or	90 OR HIGHER
<b>HYPERTENSIVE CRISIS (consult your doctor immediately)</b>	HIGHER THAN 180	and/or	HIGHER THAN 120

# Traditional BP Measurement Methods

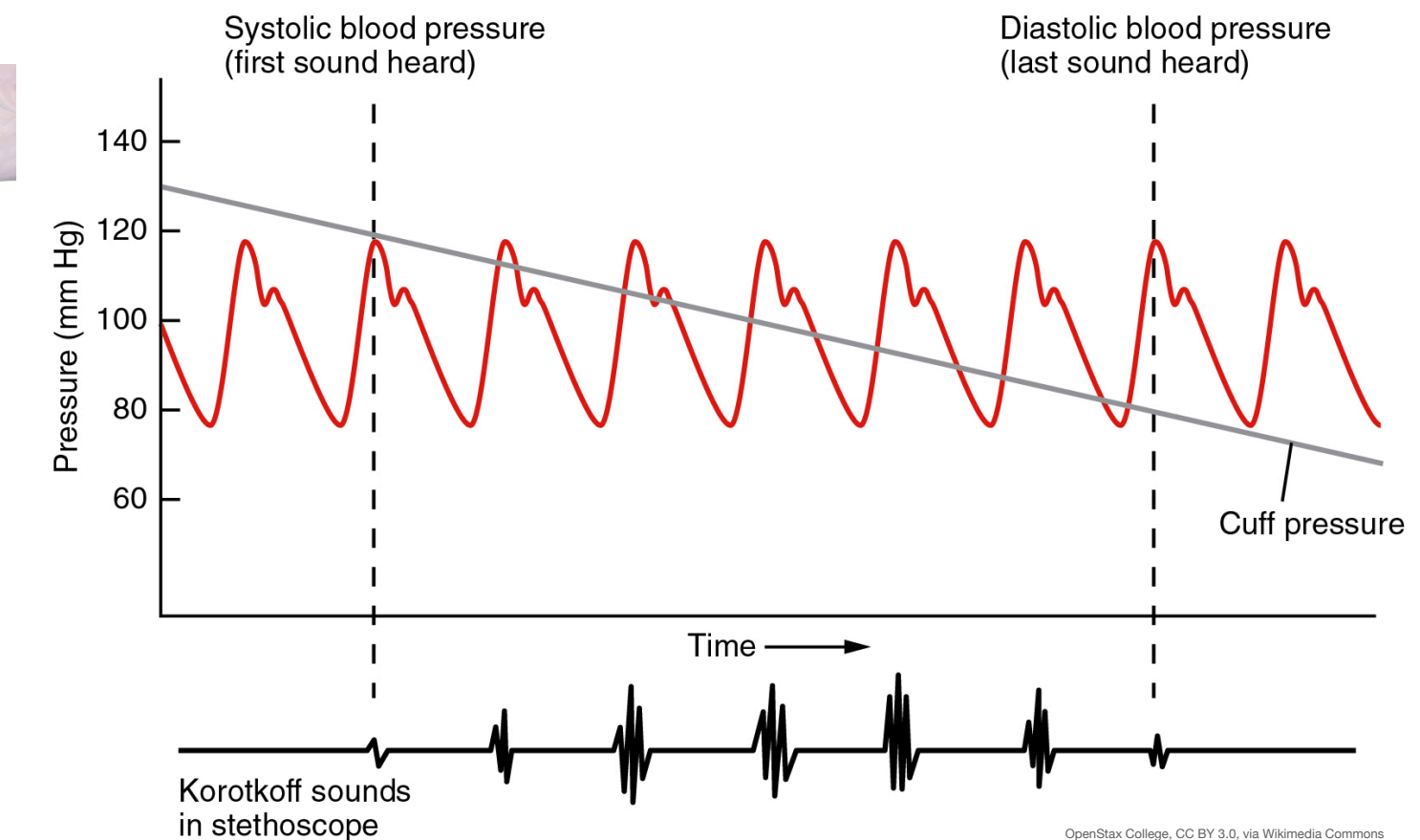
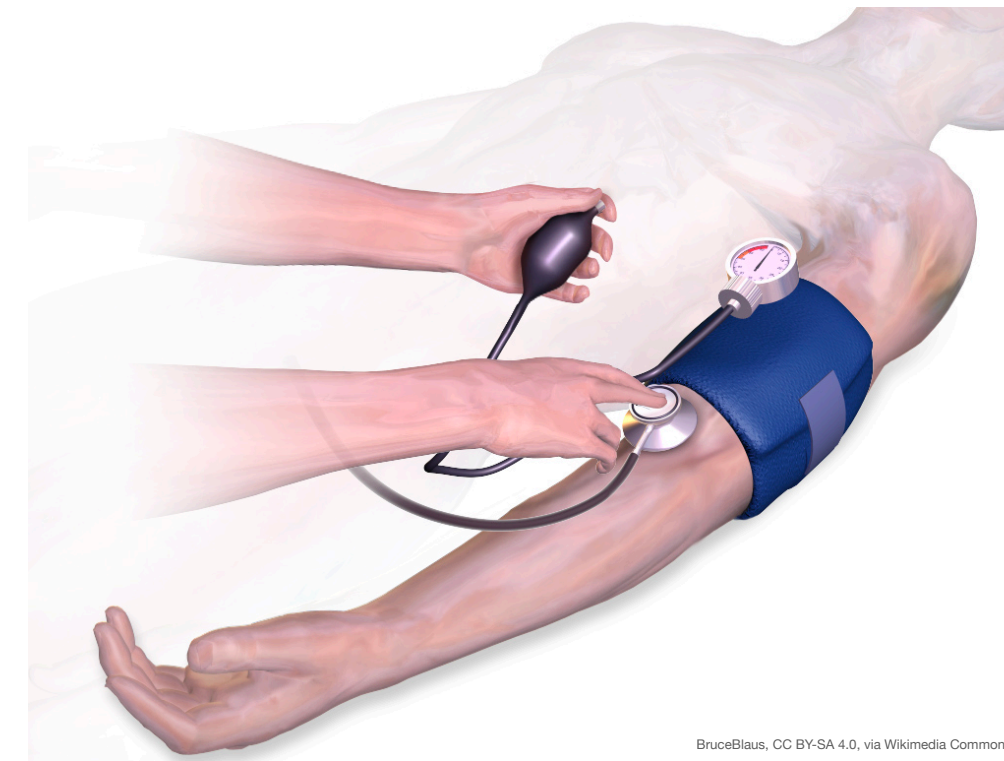
## ARTERIAL CATHETERISATION

Hollow tube inserted into an artery to monitor blood pressure in real-time



## AUSCULTATORY METHOD

A cuff compresses and releases an artery in a controlled way. Sounds of blood through the narrowed artery are heard with a stethoscope. SBP and DBP are measured using a manometer attached to the cuff.



## OSCILLOMETRIC METHOD

Similar to the Auscultatory method but involves the observation of oscillations in the cuff pressure as it is first inflated and then slowly deflated. Some devices do not completely occlude the artery, they measure the Mean Arterial Pressure and the estimate SBP and DBP.

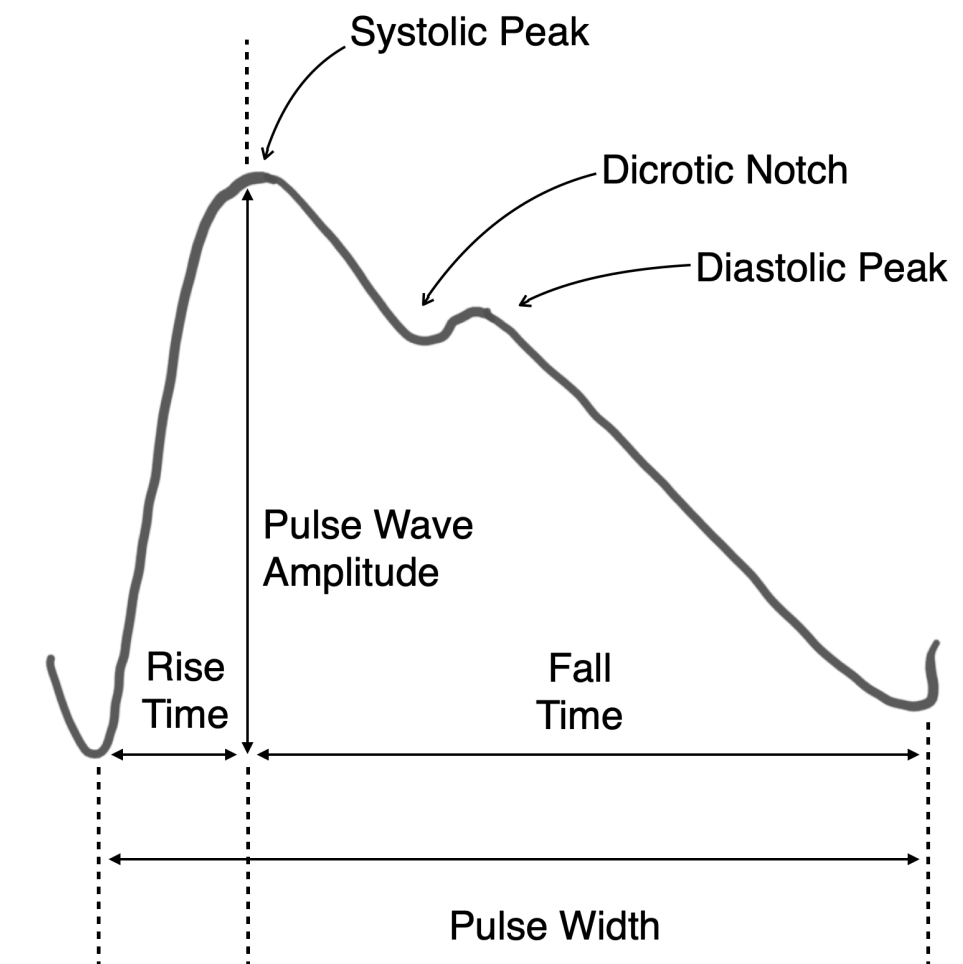


# Blood Pressure Monitoring with PPG Sensors (Cuffless)

## PULSE MORPHOLOGY

Features of the PPG wave are used to estimate blood pressure, often employing learning approaches.

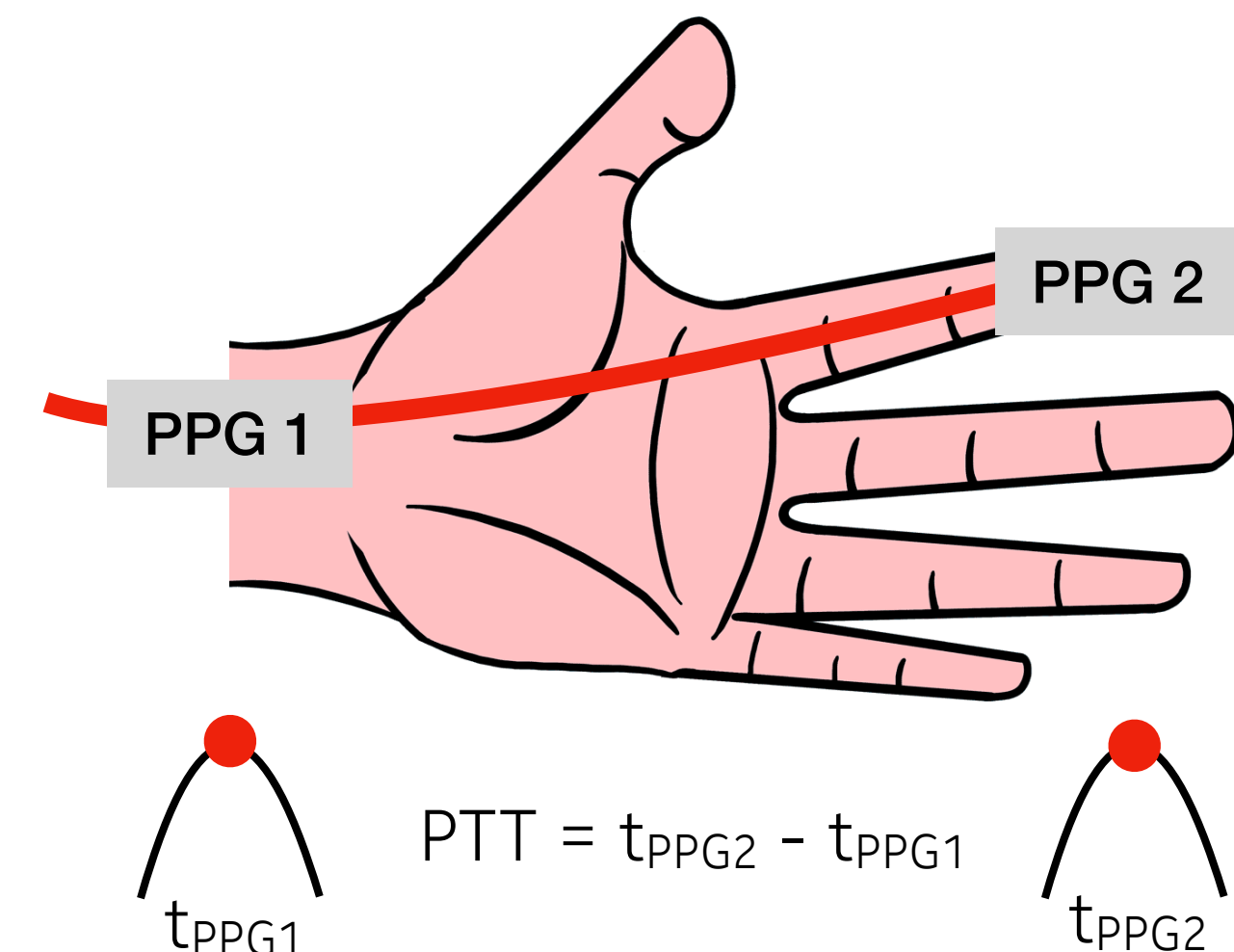
Several factors can affect the pulse morphology. Most importantly: sensor configuration, sensor placement, pressure on the skin.



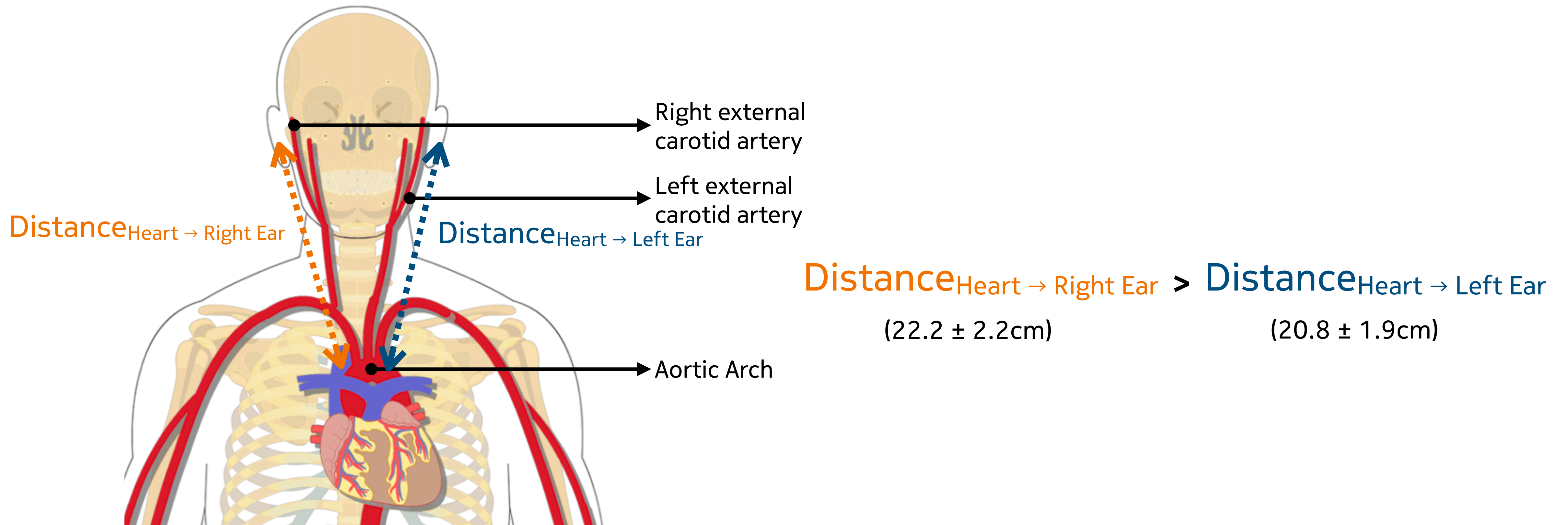
## PULSE TRANSIT TIME

Time necessary for the blood pressure wave to travel between two arterial sites (e.g., wrist and finger of the same arm). This time interval varies inversely with blood pressure.

Calibration between blood pressure and PTT is done using a clinical grade blood pressure monitor.



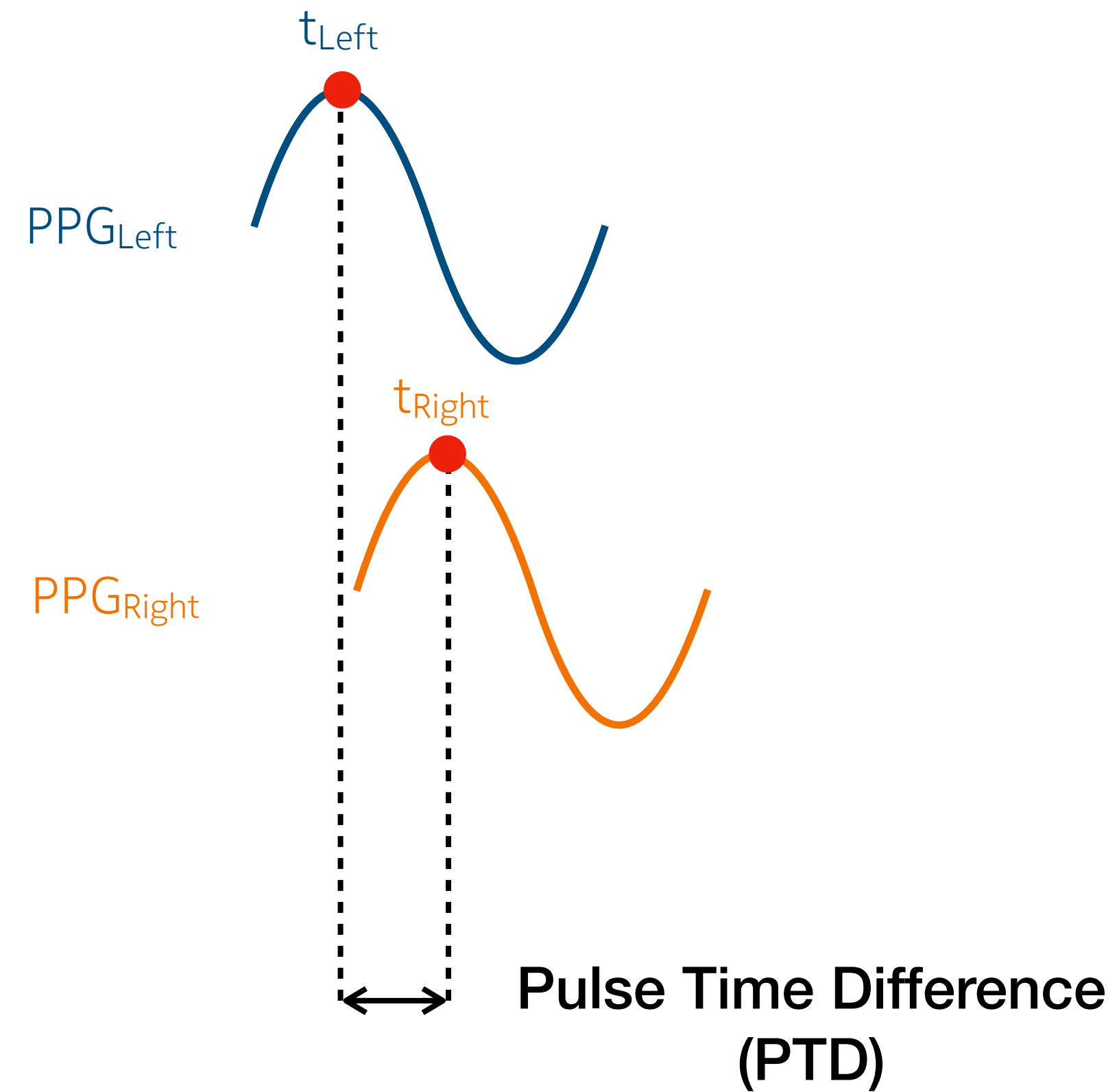
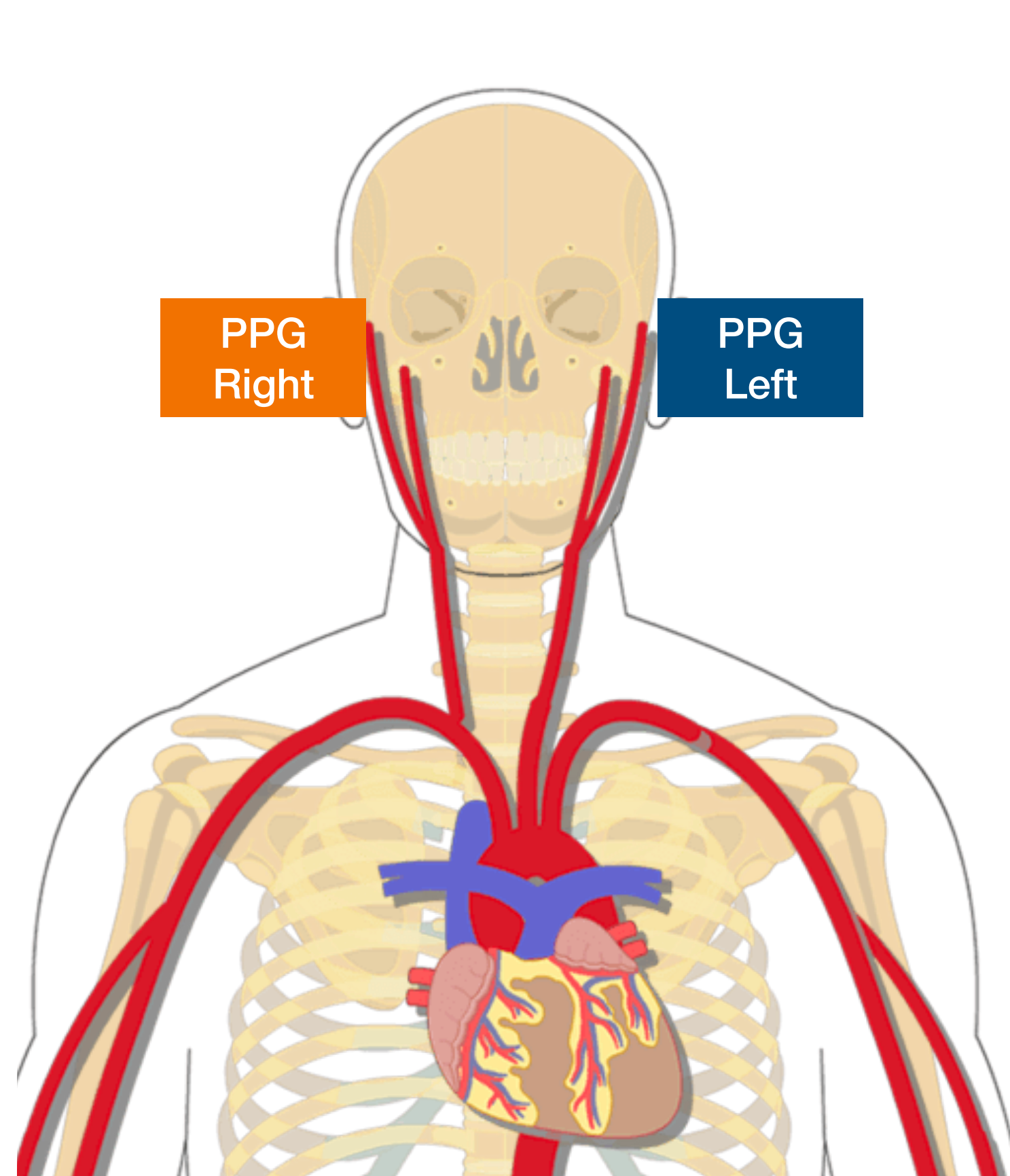
# Head and Upper Body Anatomy



The heart protrudes towards the left side of our body

Farooq Choudhry, John Grantham, Ansaar Rai, and Jeffery Hogg. "Vascular geometry of the extracranial carotid arteries: An analysis of length, diameter, and tortuosity". Journal of Neurointerventional Surgery 8 (04 2015).

# Pulse Time Difference Between The Ears



$$PTD = t_{\text{Right}} - t_{\text{Left}}$$



**Can we measure PTD  
with in-ear PPG?**

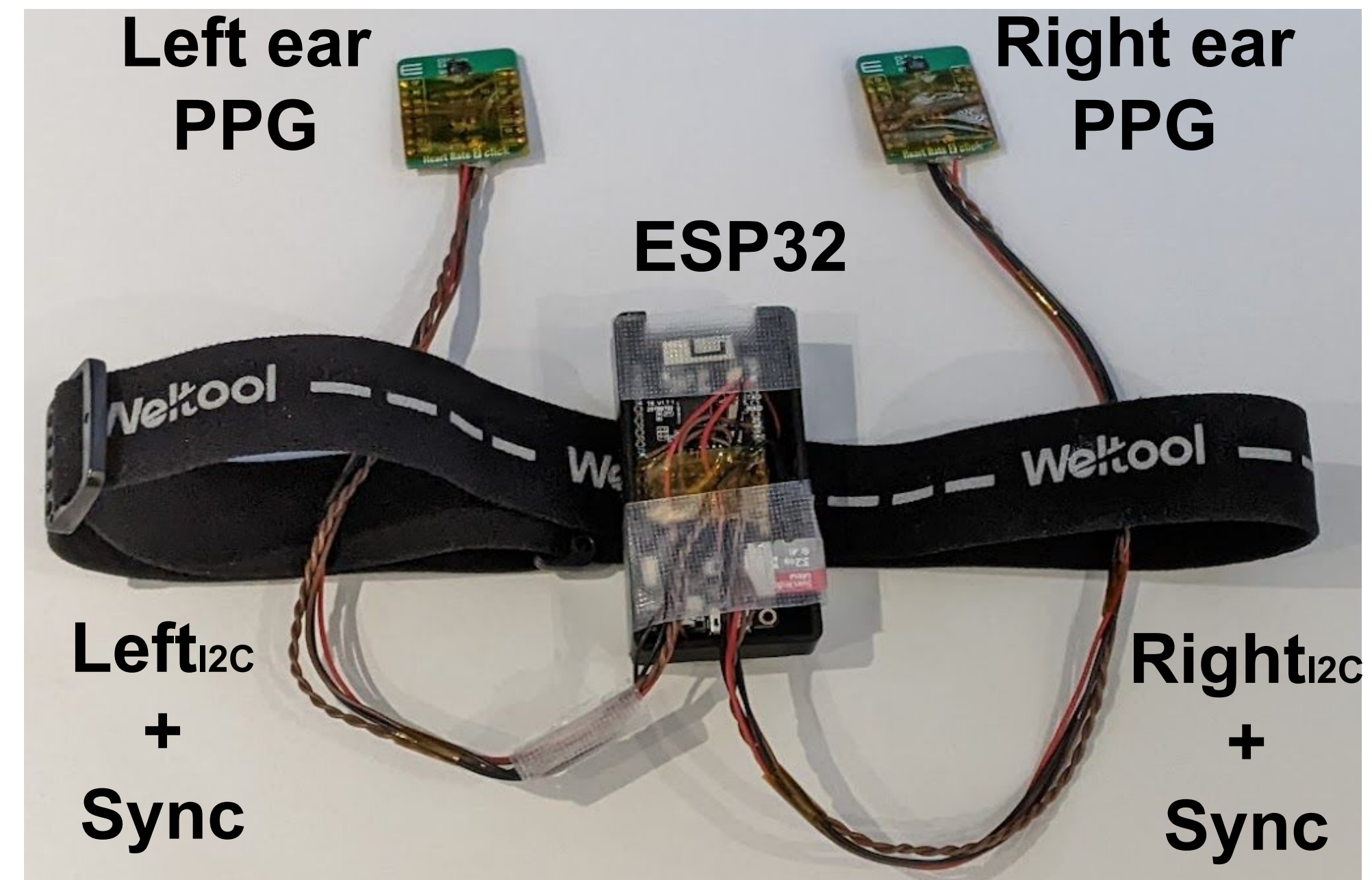
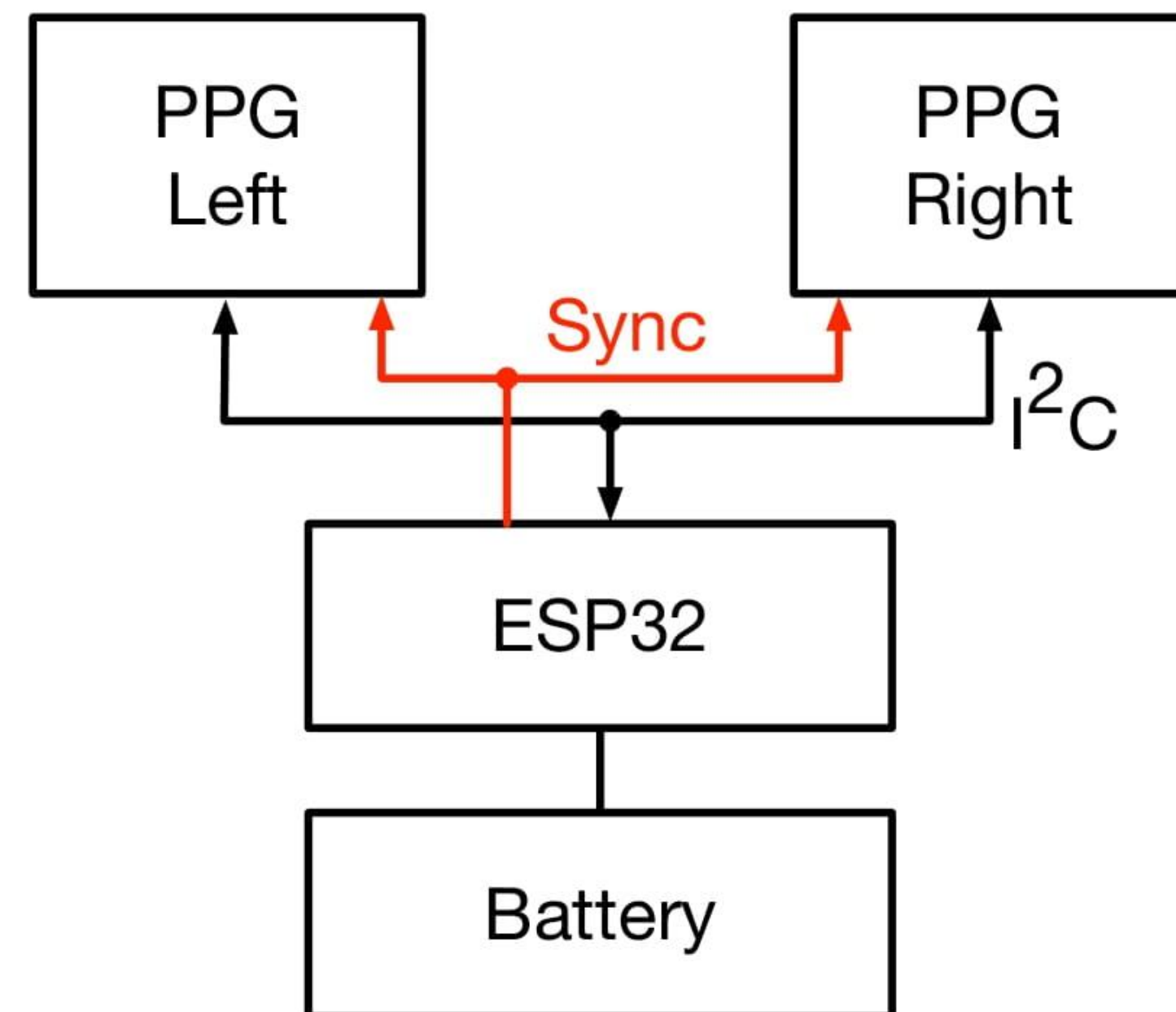
Can we leverage **PTD**  
between **left and right**  
**ears** to estimate **BP?**

# Stereo-BP: Exploiting Pulse Time Difference Between The Ears

## Hardware Prototype

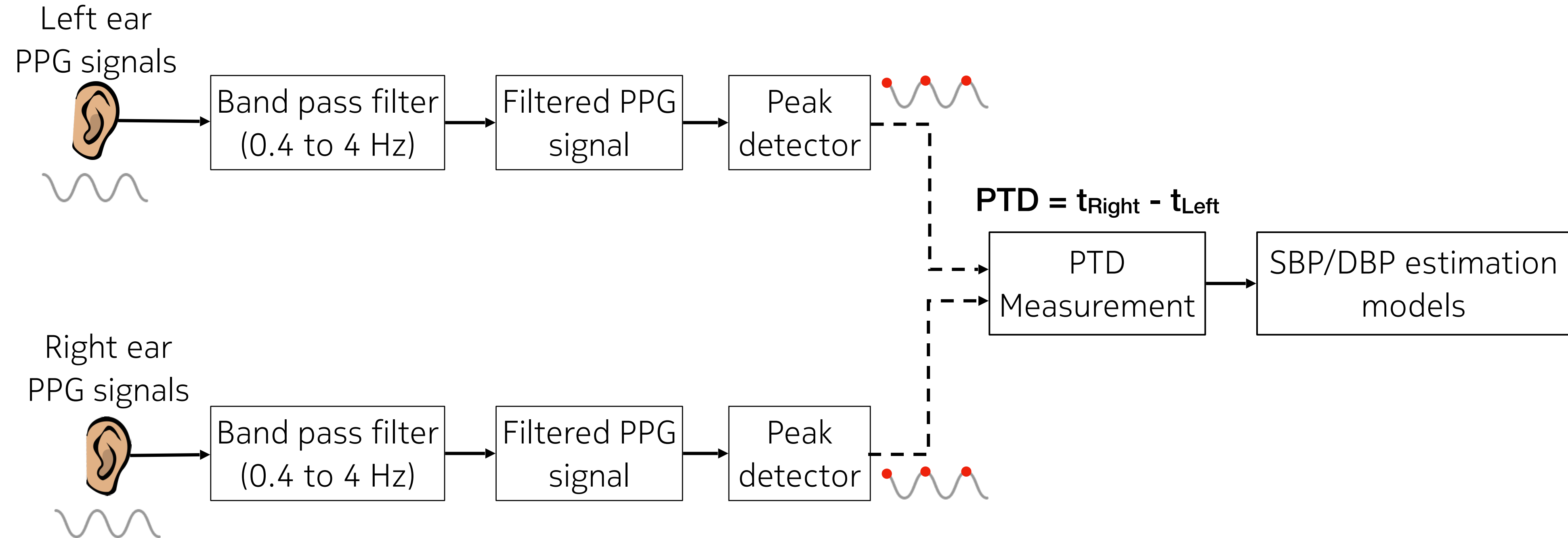
Given the expected PTD is in the order of few milliseconds the design of the system was crucial:

- High frequency sampling rate to increase signal resolution
- Synchronisation of left and right sensors to ensure accurate PTD measurement



# Stereo-BP: Exploiting Pulse Time Difference Between The Ears

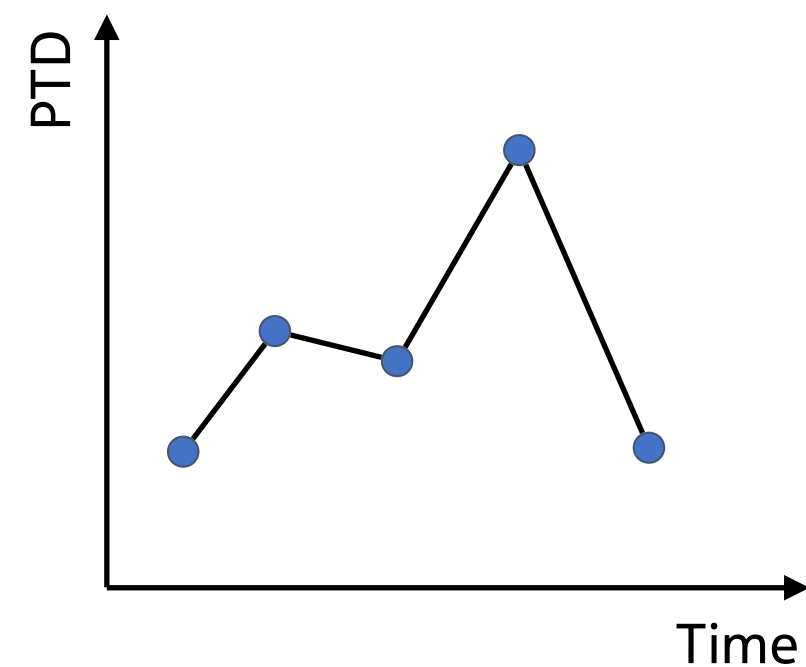
## Blood Pressure Estimation Pipeline



# Stereo-BP: Exploiting Pulse Time Difference Between The Ears

## BP Estimation Models

### THE NEED FOR ESTIMATION MODELS



PTD shows relative changes in blood pressure

To convert the PTD times into values in mmHg we need to model the relationship PTD/BP and calibrate the models

### BLOOD PRESSURE ESTIMATION MODELS

We derive SBP and DBP models from related works and anatomical characteristics:

$$SBP = SBP_0 - \frac{2}{\gamma PTD_0} (PTD - PTD_0)$$

$$DBP = DBP_0 - \frac{2}{\gamma PTD_0} (PTD - PTD_0)$$

- $SBP_0$  and  $DBP_0$  are the baseline systolic and diastolic blood pressure
- $PTD_0$  is the baseline pulse time difference
- $\gamma$  is a constant which depends on age

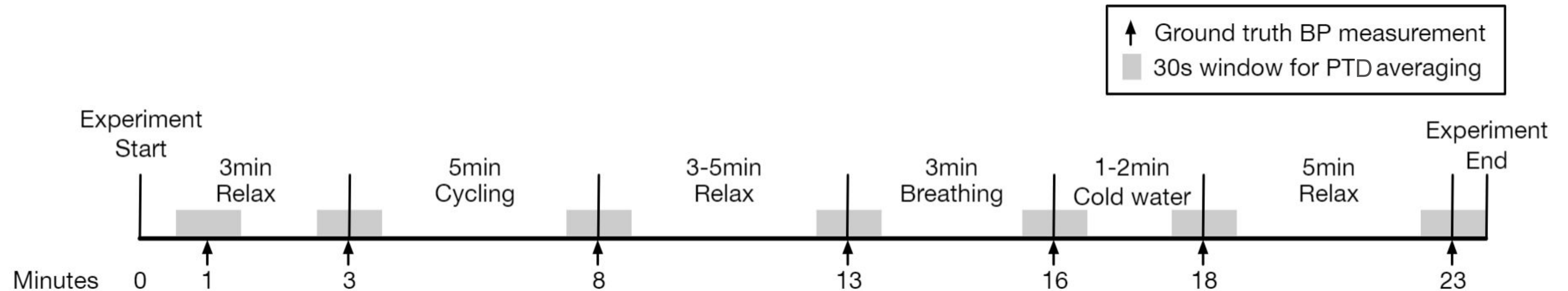
$SBP_0, DBP_0$  and  $PTD_0$  are derived via least square fit of pairs:

$$[PTD, GTBP]$$

Where  $GTBP$  is taken with a cuff-based BP monitor

# Stereo-BP: Exploiting Pulse Time Difference Between The Ears

## Preliminary User Study



- 20 healthy participants, 7 females, mean age 31.5
- Synced PPG data from left and right ears
- Timestamped ground truth BP measurements taken with Omron BP monitor
- Physical exercise on a stationary bicycle, slow/deep breathing, and immersing hand in cold water to induce BP changes
- Personalised model calibration is done with 4 pairs of (PTD, Ground truth BP) points, remaining used for testing

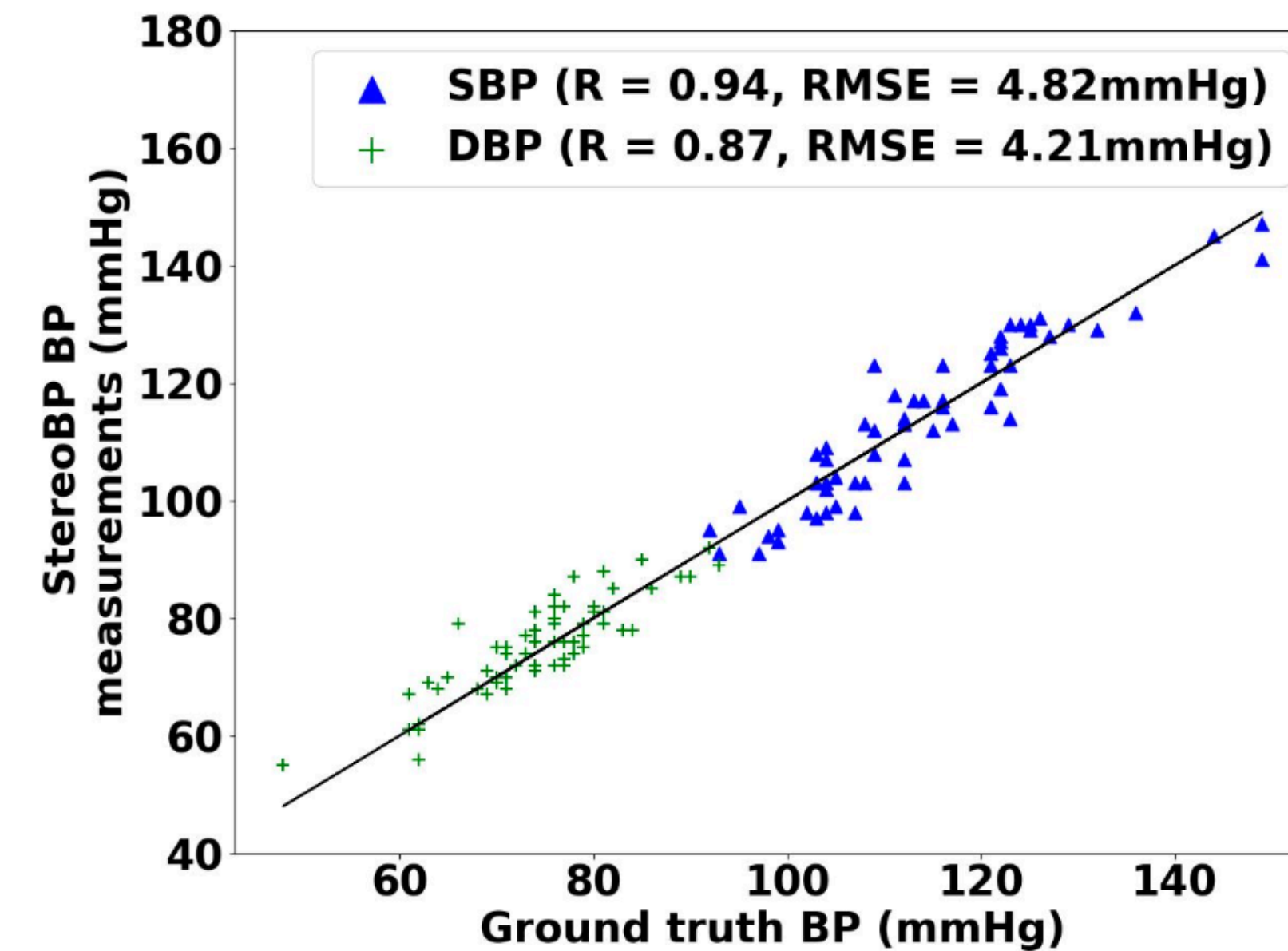
# Stereo-BP: Exploiting Pulse Time Difference Between The Ears

## Results

### PTD BETWEEN LEFT AND RIGHT EARS

- Use the first 3 minutes of data (relaxed state)
- Blood **always arrives earlier** in the left ear than the right ear
- **Mean PTD 41.3ms ± 27.4ms**

### BLOOD PRESSURE ESTIMATION



**SBP MAE** =  $3.97 \pm 3.09$  mmHg

**DBP MAE** =  $3.83 \pm 2.95$  mmHg

# Stereo-BP: Exploiting Pulse Time Difference Between The Ears

## Longitudinal performance of Stereo-BP

9 Participants have been invited for 2 follow-up sessions to assess model calibration stability

Week 1 - User study

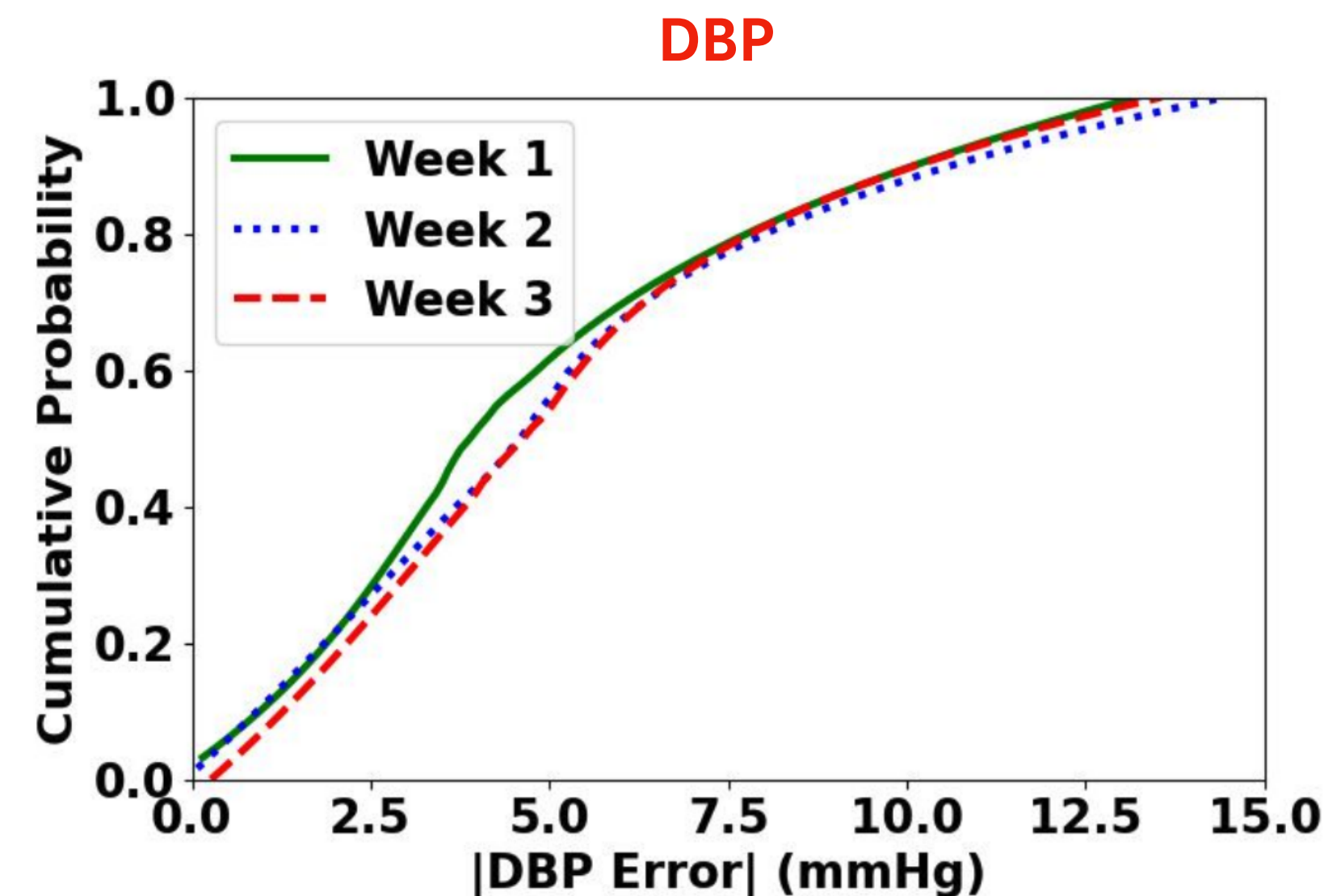
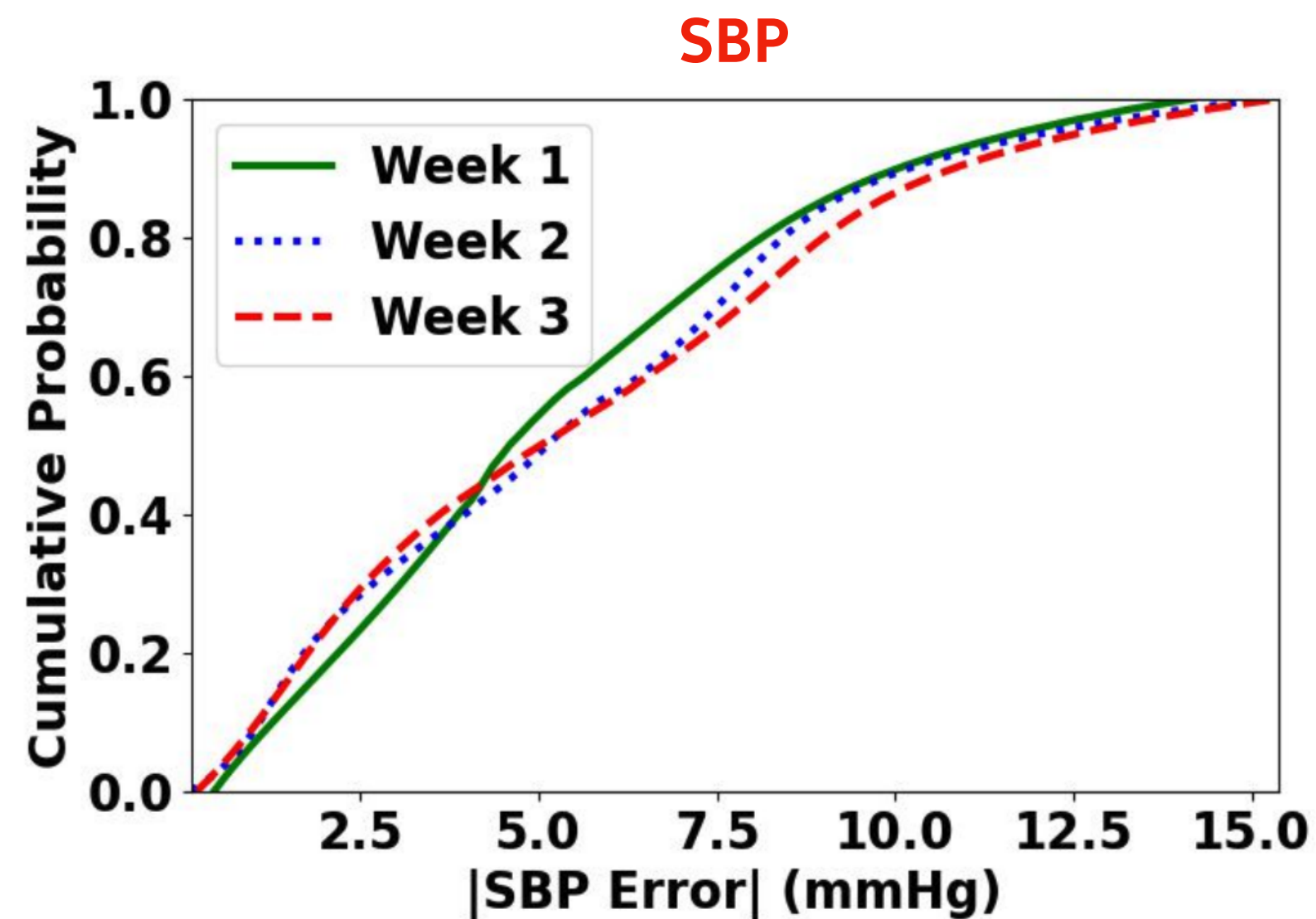
Week 2 - User study

Week 3 - User study

Perform calibration on Week 1

Test Stereo-BP's performance with calibration made on Week 1

Test Stereo-BP's performance with calibration made on Week 1





# Stereo-BP: Exploiting Pulse Time Difference Between The Ears

## Take Aways

- Heart is **closer to the left** ear than the right ear
- $PTD_{\text{Left} \rightarrow \text{Right}}$  ear varies inversely with blood pressure
- ‘Stereo-BP’ – Uses **synced PPG sensors** present in left and right earbuds to estimate blood pressure

## Limitations

- Requires calibration
- Tight synchronisation between left and right earbuds
- Limited sample size

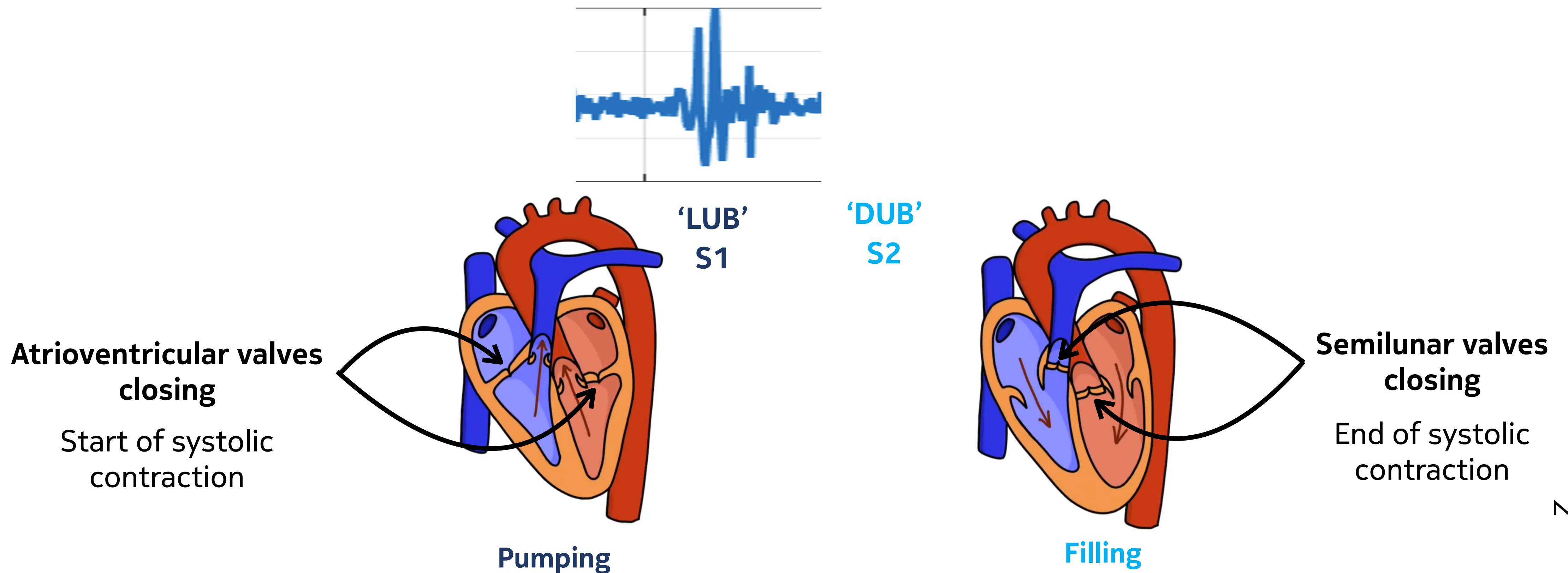
Can we use a  
single earbud?

# Heart Sounds

Blood travel time through the body is linked to BP (PTT and PTD methods)

A single in-ear PPG sensor cannot measure this time

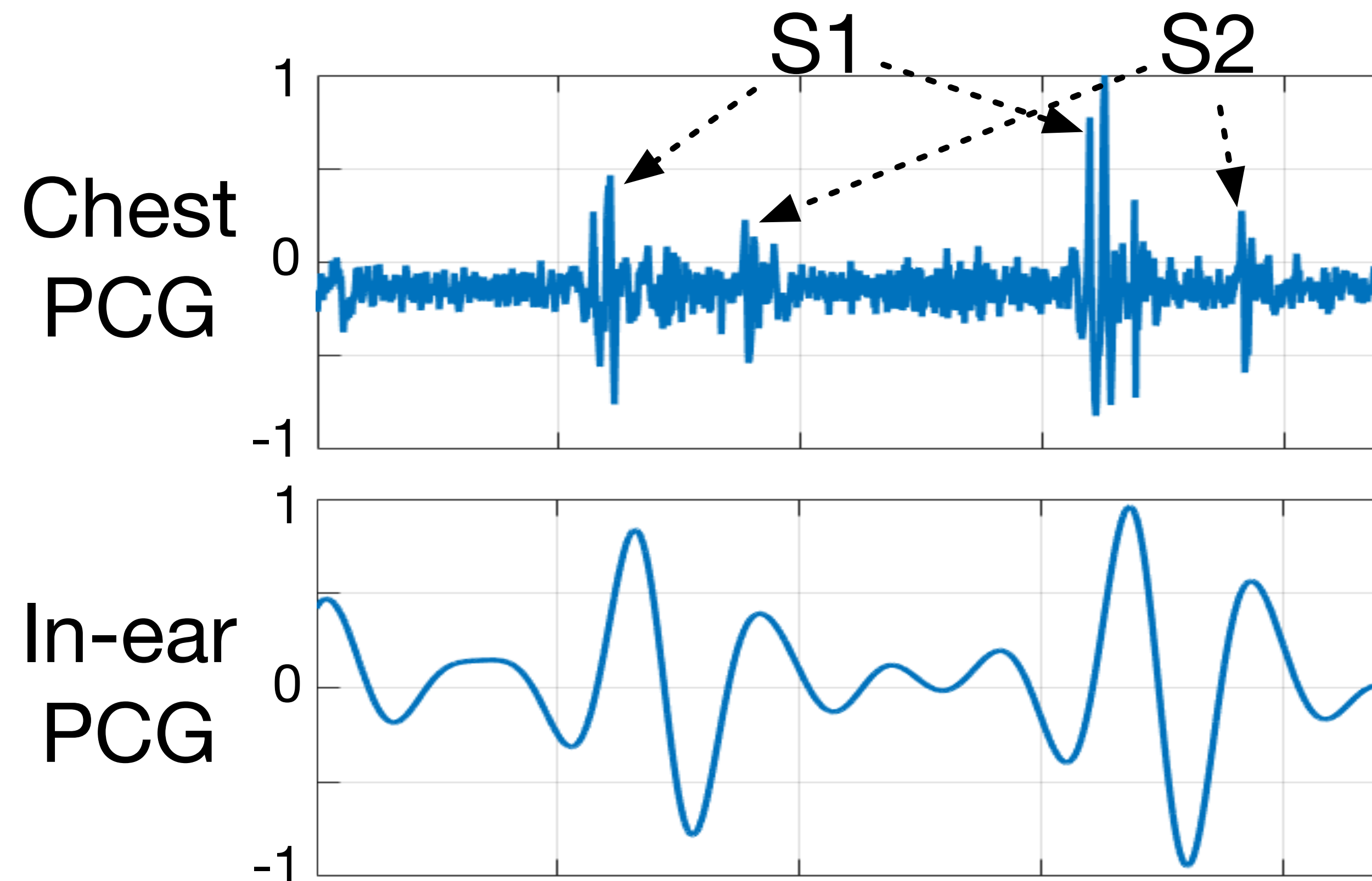
A reference point is needed to determine the time interval



# In-Ear Heart Sounds

Heart sounds can be detected from the ear if the ear canal is well sealed (occlusion effect)

Acoustic signal heavily attenuated and distorted as it travels through tissues and organs



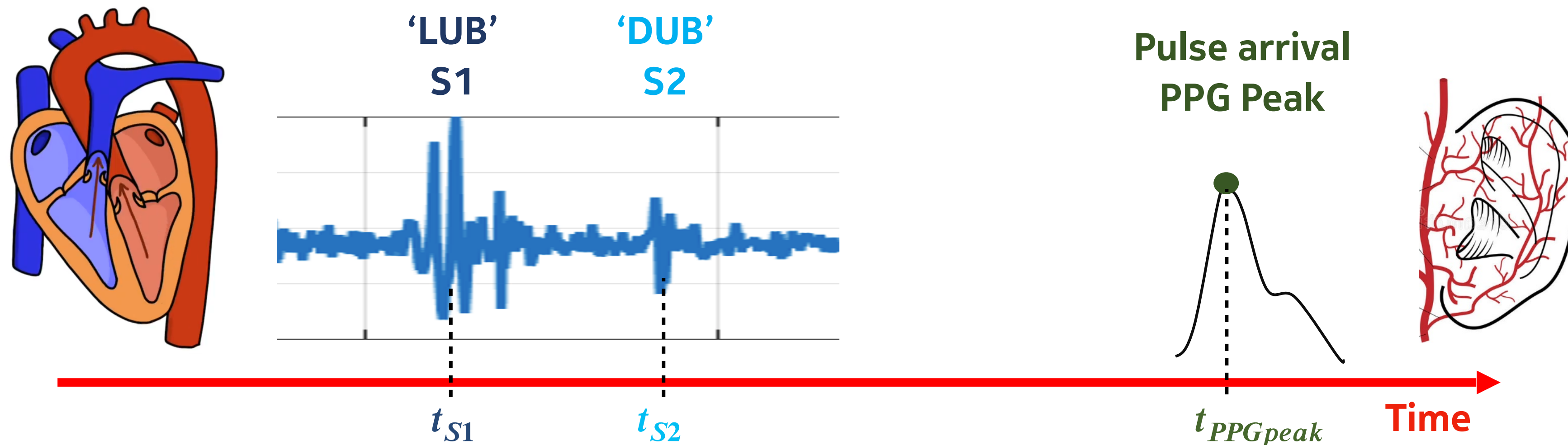
# Our Approach

## OBSERVATION

Sound travels much faster within the body compared to blood

Heart sounds' avg speed ~1500m/s

Blood's avg speed ~20-50cm/s



Vascular transit time:

$$VTT = t_{PPGpeak} - t_{S1}$$

Ejection time:

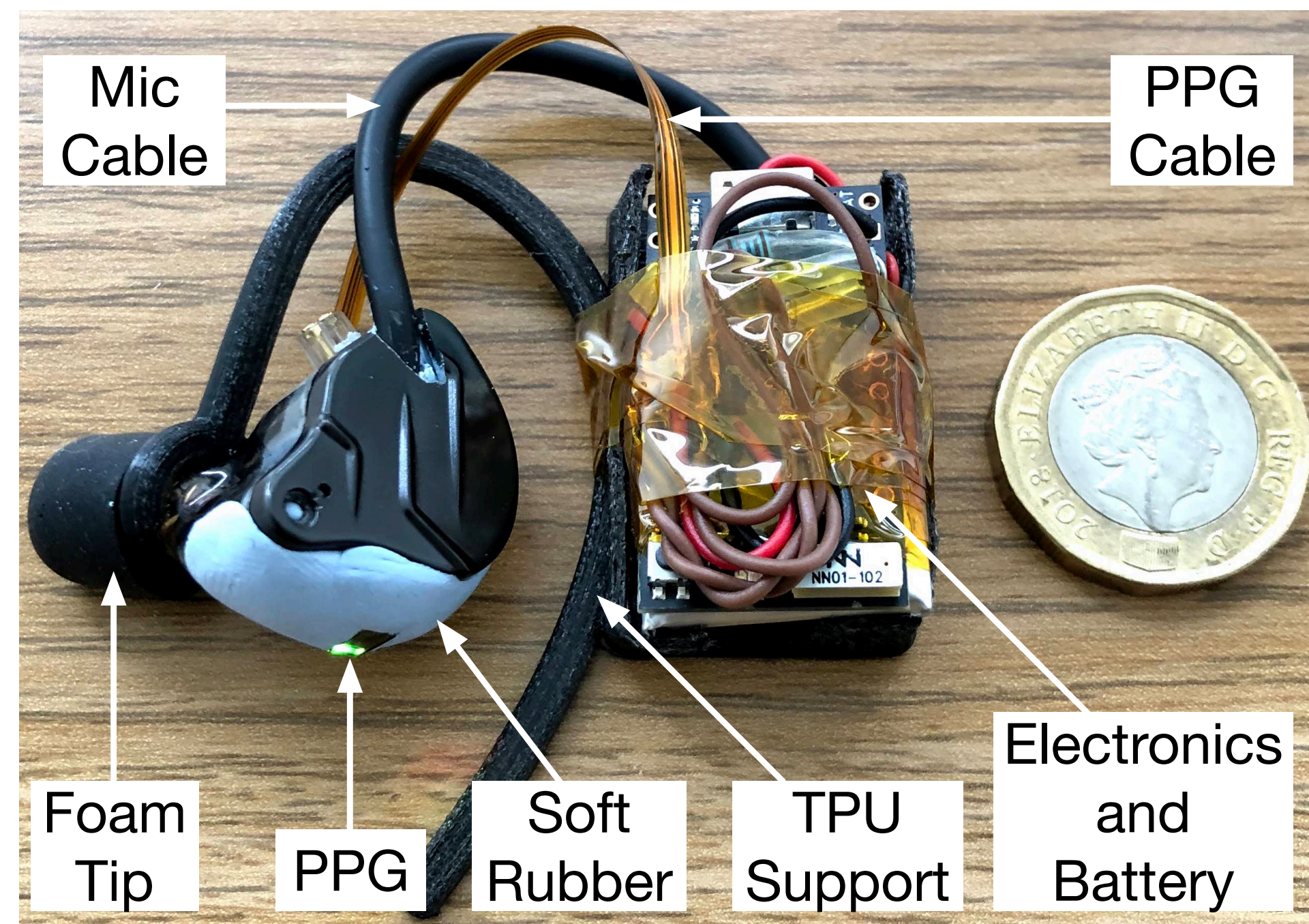
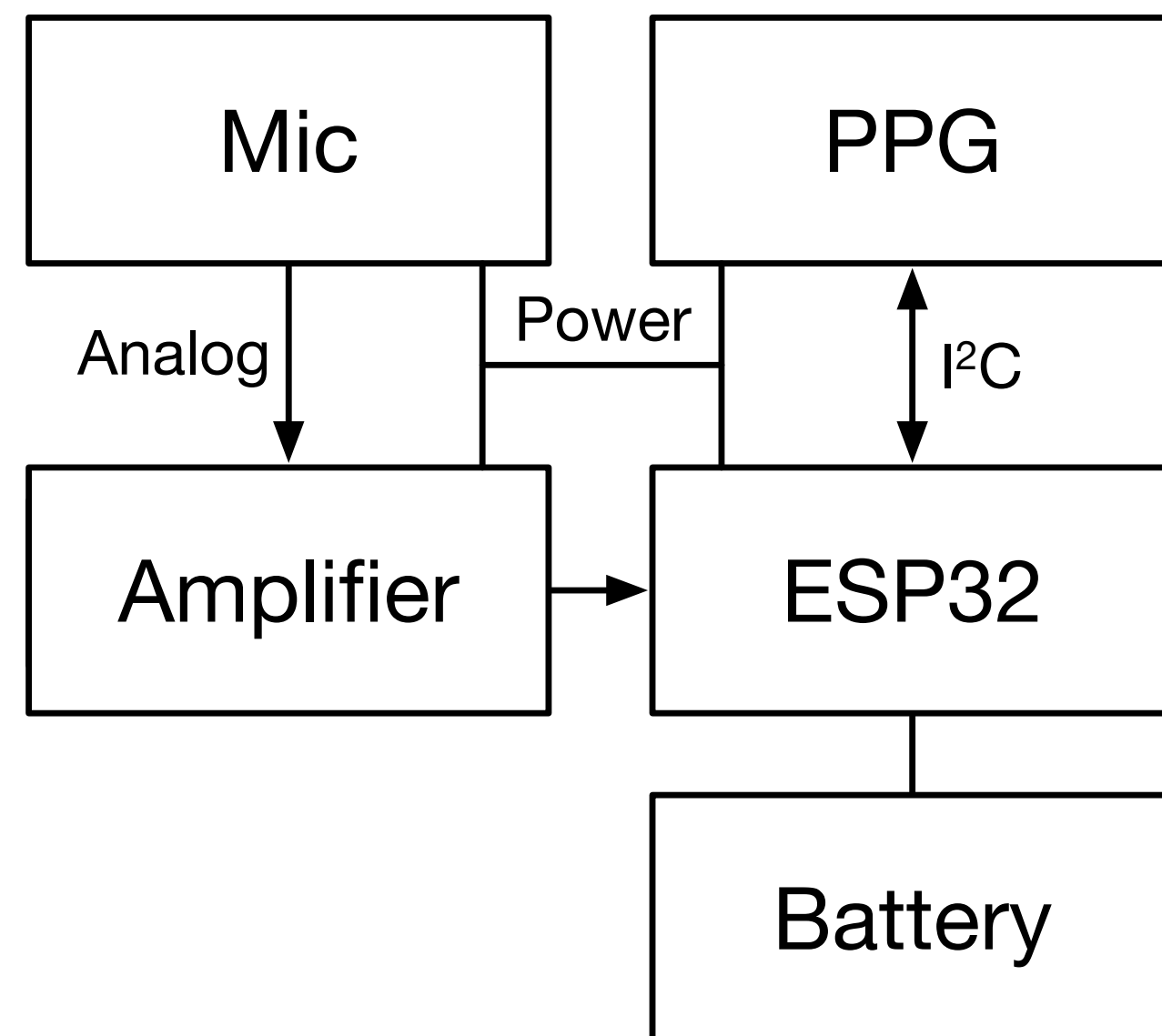
$$ET = t_{S2} - t_{S1}$$

$$VTT \propto \text{Systolic\_BP}$$

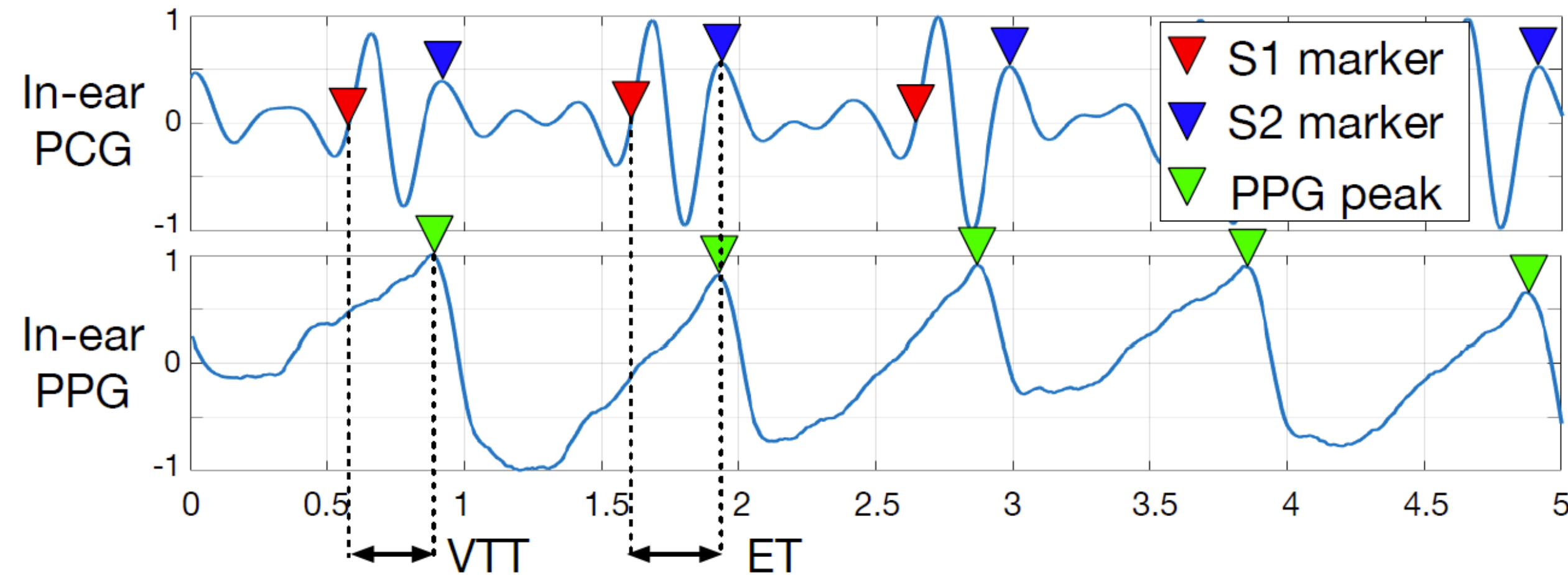
$$ET \propto \frac{1}{\text{Diastolic\_BP}}$$

# HW Prototype

- Analog microphone with extended low frequency response
- Foam ear tips for better ear canal sealing



# Sensing Pipeline



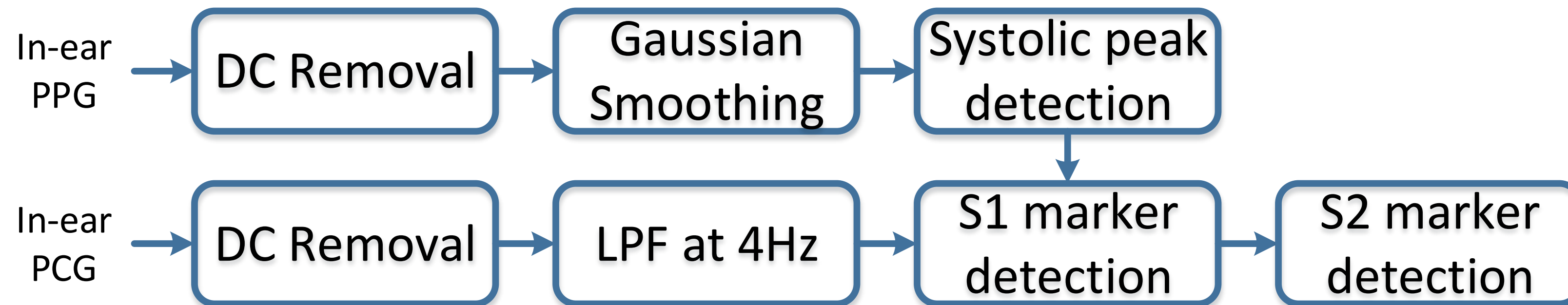
Vascular transit time:

$$VTT = t_{PPGpeak} - t_{S1}$$

Ejection time:

$$ET = t_{S2} - t_{S1}$$

- Forward-backward filter to preserve temporal features
- S1 and S2 identified searching backwards from PPG peak



# BP Estimation Models

- VTT and ET show relative changes in blood pressure
- Calibration of parameters  $\alpha$  and  $\gamma$  with a cuff-based BP monitor

$$SBP = \alpha_1 VTT + \alpha_0$$

$$DBP = SBP - PP$$

$$PP = \gamma_1 \frac{ET}{VTT^2} + \gamma_2 \frac{1}{VTT^2} + \gamma_0$$
 Pulse Pressure

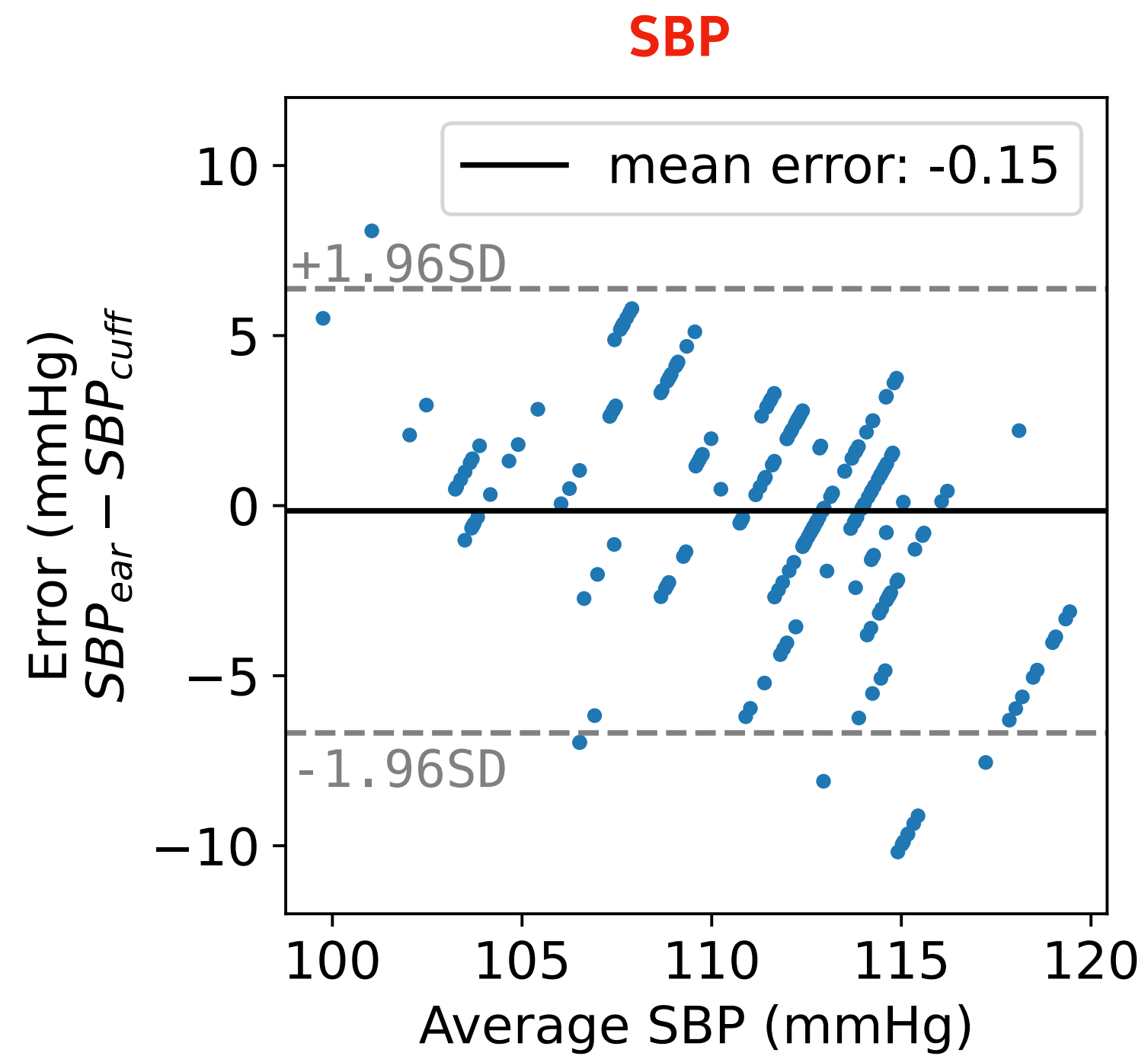


# Preliminary User Study

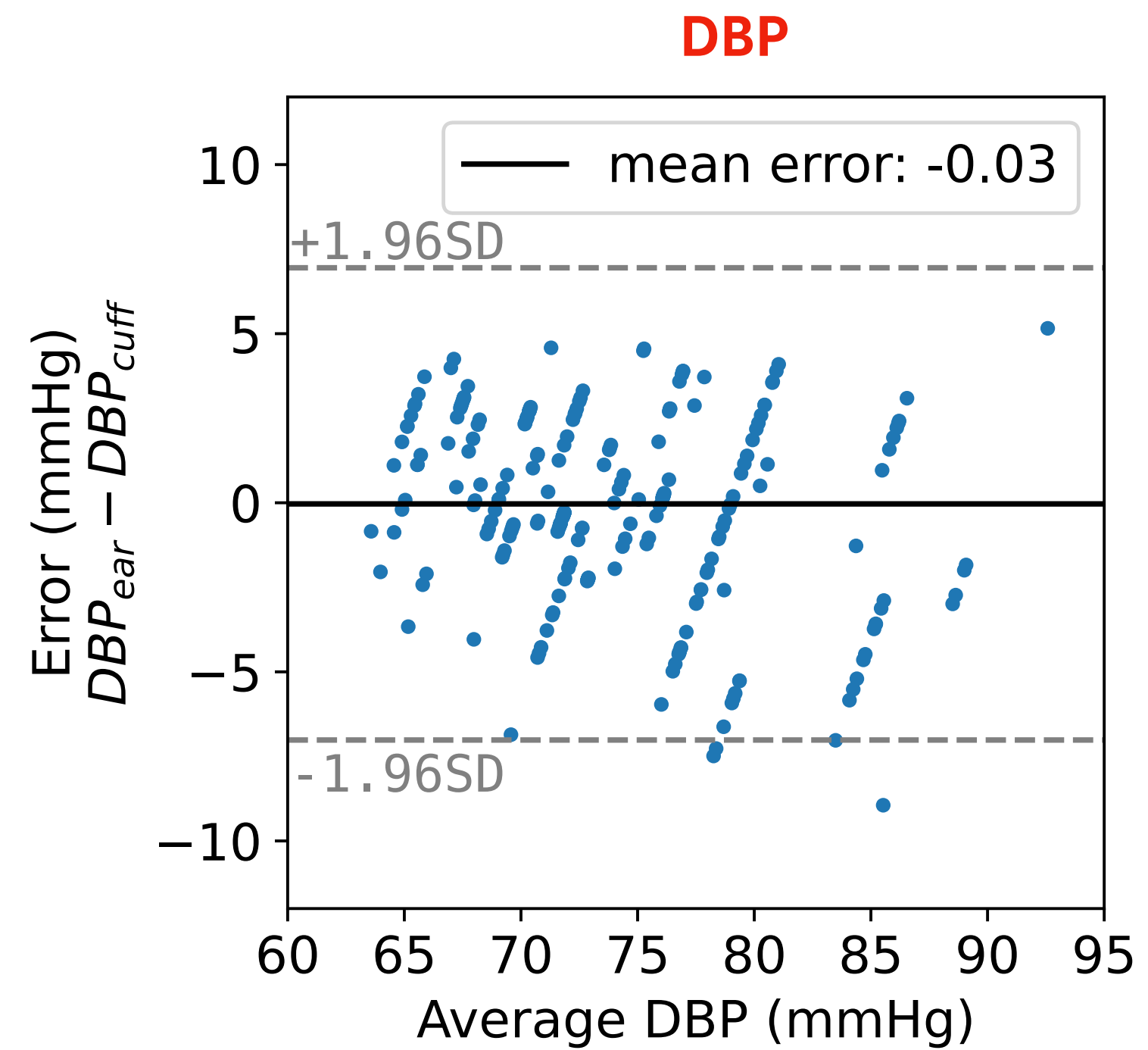


- 10 healthy participants, 2 females, mean age 29,6
- Synced mic and PPG data from the left ear
- Timestamped ground truth BP measurements taken with Omron BP monitor
- Slow/deep breathing and immersing hand in cold water to induce BP changes

# Results



**SBP MAE** =  $2.50 \pm 2.20$  mmHg



**DBP MAE** =  $2.42 \pm 2.62$  mmHg

# Take Aways

- Estimate BP from single ear-worn device
- Leverage **different propagation speed** of sound and blood
- Low-compute pipeline

## Limitations

- Requires calibration
- Limited sample size
- Small data distribution

# Conclusion

- **PPG** is a remarkably useful sensor for **in-ear** vital signs monitoring
- Other important vitals can be monitored from the ear: **breathing rate** and **breathing volumes**
- **Hearing health**
- Many challenges to overcome:
  - Ear canal sealing quality monitoring
  - Reduce the need for calibration on BP estimation
  - Better processing pipelines to improve usability (ANC, music playing)
  - Clinical trials

# References

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# Thanks to the Team



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PERVASIVE SYSTEMS

# Thank you!

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