

A SURVEY ON MACHINE LEARNING IN FUSION WITH INTERNET OF THINGS

Mrs. Ketaki Bhoyar¹, Mrs. Shivganga Gavhane², Mrs. Sandhya Gundre²

¹Department of Computer Engg., DYPIEMR, Pune, India

²Department of Computer Engg., DYPIEMR, Pune, India

²Department of Computer Engg., DYPIEMR, Pune, India

ABSTRACT

Machine learning- an application of artificial intelligence (AI). It provides systems the ability to automatically learn and improve from past experiences without any need of programming explicitly. ML (Machine Learning) focuses on the development of computer programs. Such programs which can access data and use it for themselves to learn. In the present era of rapidly growing mature technologies and their interconnection with hardware devices and software applications plays a vital role for the emergence of different sensor devices that are inter-connected through internet in order to establish interaction with the physical objects in the world. the interconnection via the Internet of computing devices embedded in everyday objects, enabling them to send and receive data is known as Internet of Things. OT generates massive amount of data with respect to various characteristics and qualities of data. Machine learning fusion with IOT ensures the pervasive development to extend the intelligence of the IOT devices and applications. The exposure of different smart IOT applications with machine learning helps in observation, systematic analysis, processing and smart usages of the large volume of data in different fields. This present paper consists of machine learning basic introduction, machine learning algorithms, reviews of different researcher's study, various sensor devices and the various applications of machine learning algorithms with IOT.

Keywords: *Machine Learning, Internet of Things, Fuzzy Logic, Fusion technique.*

I. INTRODUCTION

In view of the cutting edge innovations of Web of things (IoT), applications committed for social insurance are presented which are developing and essential. Models on applications applied for social insurance in IoT are: continuous movement checking, fall identification, variation from the norm discovery, and maladies finding. These IoT social insurance applications request the use of wide scope of heterogeneous sensors. The main sort is the body

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sensors characterized into biomedical and movement sensors. Biomedical sensors are predominantly focused to record the wellbeing and physiological imperative indications of the patient. Movement sensors are anybody worn gadgets that can help for deciding the area, stance and position of the patient. Models on body sensors are pulse, circulatory strain, Electrocardiography (ECG), Electromyography (EMG), whirligig, and so forth. The subsequent kind is the natural sensors for estimating the relevant condition around the patient. They can be mechanical, acoustic, optical, substance, power, closeness and in any event, imaging sensors. Models are temperature, mugginess, infrared, contact, cameras, and so on. Multi-sensor combination systems are the procedures that consolidate a few disconnected gadgets and wellsprings of information to be handled together for better nature of administrations. Multi-sensor information combination is exhibited to acquire better outcomes from the previously mentioned various sources. These multi-sensor combination approaches increment the dependability also, power of the health-care frameworks by diminishing undermines presented by different glitches in the sensors and condition itself, for example, the power and correspondence. Also, worldwide choices can be taken dependent on the reliability between the information sources. A few studies have been led on multi-sensor combination procedures. A review on multi-sensor combination methods in body sensor systems can be found.

The authors concentrate on fusion of the sensors mounted on the body for requirements of different applications as well as the popularity of activities and emotions, and general health. But however the multi-sensor fusion process affects the various attention applications isn't tackled like learning the influence of various techniques on the detection and diagnosing of diseases. Also survey paper discusses the info fusion mathematical ways. The authors concentrate on the probabilistic, AI and proof primarily based ways for knowledge fusion in applications including multi target following, environmental observation and remote sensing while not reviewing any techniques applied on healthcare applications. The authors mentioned environmental challenges in IoT like the distribution of the surroundings, heterogeneity and non-linearity and its heart on the method of data fusion. They propose express details of the benefits and limitations while not concerning the application wherever the fusion technique is implemented. The paper in proposes the state of the art of the info fusion techniques applied to the sensors settled in mobile devices. These techniques are distinguished to be appropriate for the different constraints on the mobile devices like the restricted processing and power capabilities and additionally distinguished for working on specific sensors equipped within the mobile devices. The work presents 10 parameters to judge device data fusion frameworks. Next, concentration on one in every proposed parameters "fusion complexity" to gauge is totally different proposed approaches for device fusion. Note that NR defines non according results. This paper presents the result of variable different factors on the standard of the aid application like totally different classes of the techniques, the level wherever the techniques are applied and also the sorts and variety of sensors united. Upcoming section provides a summary of multi-sensor fusion techniques for attention. Discussion and comparison are given in the next section. Finally, end section presents the challenges and future advancements.

II. MULTI-SENSOR DECISION-LEVEL FUSION TECHNIQUES FOR HEALTHCARE

According to authors [3], device fusion will be categorized into data-level, feature-level and decision-level. In feature-level fusion, the options of the information collected from the various sensors are first off extracted then fusion techniques are applied on the options for the aim of combining them. On the opposite hand, decision-level fusion includes applying data mining, machine learning and computer vision techniques on the various choices gathered from the process of the individual sensors for the aim of reaching a worldwide decision. Many techniques of decision-level sensor fusion class are utilized in tending systems for multi-modal sensors together with intelligent fusion primarily based models, e.g. fuzzy logic primarily based techniques, probabilistic and applied math primarily based models e.g. theorem reasoning and Markov decision method and Dempster Shafer theory. Different models like data processing based models and threshold technique primarily based models conjointly exist. The following sections concentrate on the methodologies of decision- level device fusion category.

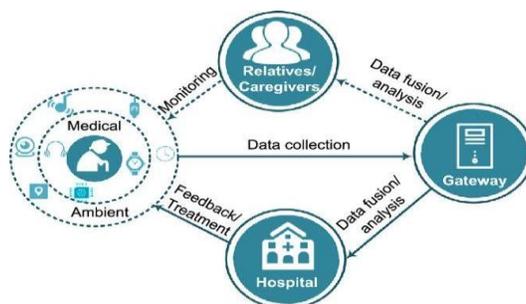


Figure 1: A system model of healthcare monitoring

A. Fuzzy Logic- based Technique

The formal logic technique was introduced by the proposal of the fuzzy pure mathematics in 1965 [8]. This system consists of 3 phases: the fuzzification for inputs, applying fuzzy rules to get the outputs and defuzzification of the outputs. When implementing the formal logic technique for aid, the inputs to the fuzzy systems are a collection of biological values or environmental sensors or each associated with the patient. The outputs are soft choices, which imply the possibilities of the classification of the condition of the patient. The fuzzy system doesn't indicate whether or not the user is classed to specific class condition or not (hard decision) like clearly having a heart attack, respiratory illness, etc, however it indicates the chance or the degree to that the patient is belonged to every of the conditions. as an example, consistent with the center rate and oxygen saturation values, the patient is also 60 minutes suffering an Anemia and 100 percent having heart issues and then on. In [3], the authors monitor the aid of the persons in home by classifying the person's state of affairs into 2 classes: normal or distress. The system consists of few subsystems according to the set of sensors consolidated. The fuzzification step is performed singly on the various subsystems. The fuzzy inference engine contained a Mam-dani fuzzy ways for an output variable localization and also an output

linguistic variable alarm.

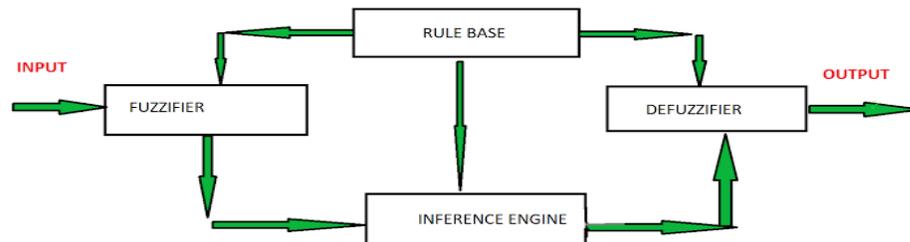


Figure 2: Fuzzy logic architecture

Fuzzy logic is employed however as a sub a part of the proposed resolution. This paper proposes a physiological detector classification approach to classify the person mental state to either relaxed or stressed categories dependent on very important signs of data collected from body sensors. The system relies on case based reasoning (CBR) technique for the classification of the individual detector signals then fuzzy logic is applied by performing the fuzzification every {for every} extracted feature from each of the sensors one by one. Defuzzification uses max technique to get the similarity between the options. Weighted average is used to get second level similarity between 2 cases primarily based on similarity of all options. The authors in [18] give a healthcare system dedicated for bronchial asthma patients to discover the unforeseen worsening of respiratory disease symptoms caused by the tightening of muscles around airways (bronchospasm). Each of the inputs are fuzzified into 3 fuzzy sets: low, normal and high. Then a Mamdani model is used for the inference engine with applying 3 rules. Defuzzification is finished by distribution an output degree to 3 fuzzy sets: bronchial asthma, normal and severe respiratory disease cough. The ultimate output is generated by applying center of area methodology.

B. Bayesian- based Technique

Bayesian primarily based fusion technique is constructed upon the Bayes' theorem. Not like fuzzy logic based technique, the Bayesian methodology makes use of previous information of the medical data and conditions of the patient to be able to classify new conditions. So, a learning section is required during this kind of fusion technique. Bayesian theorem depends upon two varieties of probability functions; the previous likelihood that is calculated based on antecedently classified conditions and therefore the chance of probability that depends upon new feature values gathered from the sensors amalgamated. Usually, the equation used for the calculation of the possibilities is:

$$p(C|A_1, \dots, A_n) = \frac{1}{Z} p(C) \prod_{i=1}^n p(A_i|C)$$

Where C is the condition to be classified, p(C) is the class prior probability and p(A_i|C) is the likelihood probability. A₁ through A_n are attributes variable values gathered from the sensors' data where n is the number of input sensors and Z is a scaling factor depends only on A₁ through A_n.

A naive Bayes formula is performed to detect the fall with use of the accelerometer price creating use of the

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abnormalities of the center rate and SpO2 within the fusion process. This result's further combined with the second part of the system to extend the responsibility of the ultimate system and exclude warning events. The second part applies DBN for observance of the activities of daily living (ADL) in accordance with the result from the primary part. Finally, the multi-sensor fusion method is completed and also the likelihood of fall alarm given any ADL is calculated using Bayes rule. It can be noticed that probabilistic models are typically utilized in health care systems that uses behaviors and actions of the patient as a part of the fusion of the information required for the appliance. Applications bestowed during this segment area unit primarily restricted to fall detection and abnormalities detection whereas observance of the daily activities.

C. Markov Process- based Technique

Hidden Markov Model(HMM) may be a generative probabilistic model used for generating hidden states from noticeable knowledge. Using data gathered from completely different sensors (usually binary sensors within the HMM domain of the health care application which means that the sensing element are often either on or off), an observable Markov model are often engineered. The model describes the sequence of the daily activities of the patient wherever every activity represents a state of the model. the thought is that the activities or locations of the patient are recorded and ordered individually by date such the end-time of one activity/location is that the begin time of successive. The model will be accustomed discover when modification happens within the sequence of daily activities and additionally predict an observation sequence supported the current scenario. This detection and prediction of the daily activity sequences may be an immense issue once combined with different vital sign sensors and different environmental data for the purpose of emergency and abnormality detection case. The aim of the system in [28] is to discover behavioral and health related changes of an individual in assisted life living surroundings by detection of the abnormalities in daily activities. Detecting abnormalities helps to create diseases additional certain and predictable. The full approach relies on hidden Markov model and fuzzy rule. The system consists of some domains: daily activities, locations and very important signs. Daily activities and locations are consolidated using HMM. Important signs domain's abnormality checking result is combined with the same results using fuzzy rule-based model keep within the cloud information. This helps to form a high level conclusion decision for the detection of worldwide abnormalities.

D. Dempster-Shafer Theory based Technique

Dempster-Shafer theory (DST) may be a probabilistic technique that deals with uncertainties in applied math models [29]. Applying DST as a fusion technique for IoT in health care will result in an honest decision or conclusion with restricted variety of sensors knowledge whereas having the ability to fuse heterogeneous knowledge. Although it has high machine complexness, it's a versatile method. During this technique, the values of the input detector is converted to a vector of the form

$$m\theta A = [m(\bar{A}), m(A), m(\bar{A}, A)]$$

Where, A represents the sensor being active, A non-active and (A,A) imprecise. This is called belief mass function vector. After the value is multiplied by reliability factor resulting in probability value, a compatibility relationship

between different vectors (sources of data) is searched e.g. the vectors corresponding to the same posture are fused. Finally, the global known Dempster's rule of combination is applied and a decision is taken according to the method used. So, nearly Dempster-Shafer is taken into account as a generalization of Bayesian technique. In health care, one technique of them is chosen according to the probabilistic data offered concerning the input file. Noting that the overhead of the Dempster-Shafer may be a limiting factor.

E. Thresholding Techniques and Others

Other sensing element fusion ways believe threshold computations rather than model primarily based techniques. Though these proposed papers are case and situation primarily based, they need to be thought of under consideration once reviewing all the fusion techniques of the attention applications. In, the authors strive to distinguish a fall of the patient from the activities of daily living (ADL). Centralized process is performed once knowledge is sent from wearable sensing element and mesh network of sensing element nodes in the home to a base station. The wearable nodes imply a possible fall to the ratiocinator layer through applying a threshold algorithm.

An approach is conferred in for observation of the aged suffering Alzheimer. The system will notice abnormal things, potential falls and obtaining location. For the fall detection, associate degree analytical technique is employed for deciding the warning thresholds of the measuring instrument by trial and error in a very laboratory. Another algorithmic program is enforced and represented for deciding the location.

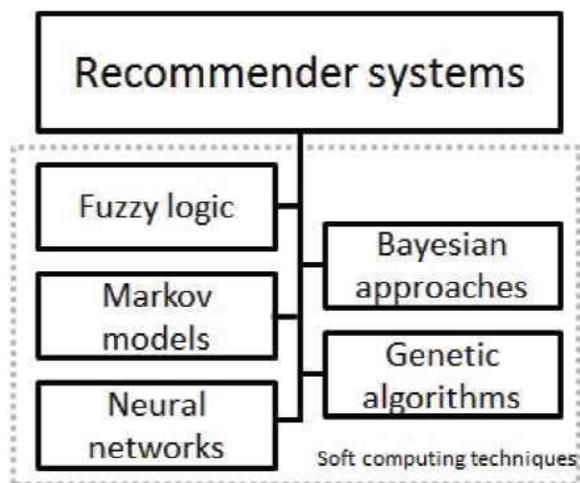


Figure 3: Recommender systems a survey.

III. COMPARISON OF DECISION-LEVEL FUSION TECHNIQUES FOR HEALTHCARE

The main metrics authors used for measuring the performance of the decision-level fusion techniques are: sensitivity, specificity, error rate and excellent classification. Sensitivity measures the proportion of positives that are properly known. In the tending domain, sensitivity suggests that the flexibility of a test to properly determine the state of the patient like correctly mentioning a sickness, health condition, or falling in case of fall detection applications, etc.

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Whereas specificity measures the proportion of negatives that are properly identified. Severally in tending domain, it's the flexibility of the check to properly determine those while not the sickness or not having specific health condition or not falling just in case of fall detection applications. Good classification is one among the parameters that are used to validate a classifier and is defined because the variety of properly classified samples to the total variety of samples. Whereas error rate is that the variety of incorrectly classified samples to the entire variety of samples. The choice of the sensors differs consistent with the sort of the illness and the kind of application. Most of applications that perform health observance use all the important signs sensors, whereas applications that perform fall detection mainly depend upon the posture sensors like the tri-axial wearable measuring system. On the opposite aspect, activity watching applications admit environmental sensors like optical and mechanical. The process is principally centralized in the majority of the planned techniques wherever the information from the sensors are sent to the process unit. The performance metrics shown in the table are guiding factors to match the standard of various decision-level techniques.

IV. CONCLUSION AND FUTURE ADVANCEMENTS

A Survey is conducted providing a full study and analysis of the various multi-sensor fusion techniques in IoT dedicated to attention, their necessities and best applications. Multiple techniques square measure mentioned and classified as fuzzy logic-based, Bayesian-based, Markoff process-based, Dempster- Shafer theoretical, and thresholding and different techniques. Usually, totally different sets of medical cases may be mapped to each of the higher than fusion techniques. The fundamental theory of each technique is explained in conjunction with examples on every implementation. Finally, associate observation is conducted on every technique on an individual basis and on the mutual properties of combined techniques once exists. Multiple comparisons square measure projected covering totally different aspects of the implementations. Examples are the sensors data, medical application, accuracy and the properties of the techniques.

The challenges arise from the character of the attention domain in IoT. The material limits embrace battery shortage and restricted wireless ranges. Technical limits like the uncertainty of the info also exist. The uncertainty happens thanks to multiple reasons such as the sensing element malfunction, corrupted knowledge or misreading which causes the anomaly of the discourse data. So, the system hardiness and dependableness represented as quality of service (QoS) just in case of those completely different limitations is of a good challenge. Specific challenges are the procedure and communication prices of the technique deployed. Additionally, the choice of the proper sensors to scale back energy consumption and computational quality, and to scale back the false alarms or false results. So, providing associate degree economical sensing element fusion technique that enhances quality of service whereas taking into thought the aforesaid challenges is of a good importance.

One possible answer is optimum exploiting of information needed for the fusion technique by adapting the sleep cycles of the detector nodes. The medical standing of the patient will be prominent factor when planning that sort of fusion technique. Finally, proposing hybrid fusion approaches that mix quite one technique that provide sensible performance measures.

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