

Intelligent Health Monitoring in Smart Homes

Akash Tiwari

20BCS1245@cuchd.in

Chandigarh University

Atul Raj

20BCS4594@cuchd.in

Chandigarh University

Manish Kr. Singh

20BCS5347@cuchd.in

Chandigarh University

Dr Bharti Sahu

Assistance Professor

Chandigarh University

Abstract— Intelligent Health Monitoring in Smart Homes is a burgeoning field that integrates advanced technologies to revolutionize healthcare delivery within residential environments. This paper explores the concept of smart homes as proactive health monitoring ecosystems, leveraging interconnected devices, sensors, and data analytics to monitor residents' health parameters and behaviors in real-time. Through a comprehensive review of existing literature and case studies, this study elucidates the potential benefits, challenges, and emerging trends in intelligent health monitoring within smart home environments. Key components of intelligent health monitoring systems, including wearable devices, ambient sensors, and machine learning algorithms, are examined in detail, highlighting their roles in detecting early signs of health deterioration, predicting health-related events, and facilitating timely interventions. Furthermore, the integration of telemedicine platforms and communication technologies enhances remote patient monitoring and enables seamless interaction between residents and healthcare providers. The paper also addresses critical considerations such as privacy, data security, and interoperability standards to ensure the ethical and responsible implementation of smart health monitoring solutions. By fostering collaboration among healthcare professionals, technology developers, and policymakers, intelligent health monitoring in smart homes has the potential to improve health outcomes, enhance quality of life, and reduce healthcare costs. The integration of artificial intelligence, Internet of Things (IoT) devices, and cloud computing enables seamless communication and coordination among various components of the smart home ecosystem. Through real-time monitoring and analysis, potential health risks can be identified early, enabling timely interventions and proactive healthcare management. Additionally, the ability to remotely access and share health data facilitates collaborative care and empowers individuals to take control of their own health and well-being. However, the widespread adoption of intelligent health monitoring in smart homes also raises important ethical, privacy, and regulatory considerations. Safeguarding the security and privacy of sensitive health data, ensuring transparency and accountability in algorithmic decision-making, and promoting equitable access to technology are essential aspects that require careful attention and proactive measures. In conclusion, Intelligent Health Monitoring in Smart Homes holds tremendous potential to revolutionize healthcare delivery, promoting preventive care, empowering individuals, and ultimately improving health outcomes. By addressing technical, ethical, and regulatory challenges, this transformative approach can pave the way for a more connected, proactive, and personalized healthcare experience. This paper studies recent state-of-the-art research on the field of IoT for health monitoring and smart homes, examines several potential use-cases of blending the technology, and proposes integration with an existing smart home test bed for further study. Challenges of adoption and future research on the topic are also discussed.

Keywords: Intelligent Health Monitoring, Smart Homes, Healthcare, IoT, Machine Learning, Data Analytics, Remote Monitoring, Proactive Healthcare, Privacy, Ethics, Regulatory Compliance.

I.

INTRODUCTION

Healthcare stands as a cornerstone of contemporary existence, and as technological advancements unfold, so do the prospects for enhanced care. The challenges confronting the current healthcare system due to an aging population and the prevalence of chronic conditions have been extensively studied and acknowledged. It's widely recognized that the relentless demands placed on the system adversely affect both patients and healthcare providers [1][2]. Integrating the medical Internet of Things (IoT) with conventional healthcare practices holds promise in easing the burden on healthcare providers. This integration offers the potential to redirect non-critical monitoring and data collection tasks to a sophisticated system capable of meticulously logging and analyzing patient data. By doing so, the system can promptly detect anomalies that may signify the necessity for professional intervention. This transition not only lightens the workload for healthcare providers but also ensures that critical issues are identified and addressed in a timely manner, ultimately improving patient care outcomes.

Significant research efforts in the realm of IoT in healthcare have predominantly centered around monitoring individuals with specific chronic conditions, particularly those that significantly affect quality of life as individuals age. Conditions like Parkinson's disease and diabetes have garnered substantial attention due to their profound impact on patients' daily lives and well-being. Parkinson's disease, characterized by progressive motor impairments, and diabetes, a metabolic disorder affecting blood sugar regulation, present ongoing challenges that necessitate continuous monitoring and management. As such, IoT technologies have been extensively explored to develop innovative solutions tailored to address the unique needs and complexities associated with these conditions, aiming to enhance patient care and quality of life.

[3]. [4]. These specific ailments become enduring aspects of an individual's life, necessitating continuous attention and management. For instance, Parkinson's disease, lacking a cure, requires ongoing symptom management and patient condition monitoring as the disease advances. Conversely, in the case of diabetes, the widespread adoption of implanted devices for continuous glucose monitoring has become standard practice and highly recommended. These devices offer real-time information on blood glucose concentration, enabling individuals to closely monitor their condition and make informed decisions about managing their diabetes effectively [4]. Moreover, implanted glucose monitors are capable of gathering data over extended periods, allowing for the observation of trends that may only become apparent over time. Nonetheless, a variety of non-invasive sensors, characterized by their lightweight and wireless nature, offer an alternative solution. These sensors can be worn by patients to

indicative of potential fall injuries, among other symptoms. Many of these devices, along with consumer electronics, are designed to seamlessly pair with user technology such as tablets and smartphones, facilitating the recording of data that can subsequently be analyzed on a cloud server. This paper explores the previous deployment of medical sensing devices and proposes innovative ways to leverage them within smart home environments to enhance user care.

To maximize the potential of wireless medical sensors, researchers are increasingly focusing on creating networks capable of addressing a wider range of health conditions. These studies utilize sensors within a wireless body area network (WBAN) framework to monitor patient health comprehensively[3]-[6]. In certain scenarios where devices support Bluetooth communication, data is transmitted to the user's smartphone for processing and storage, as detailed in [7]. The system under examination in this paper extends the WBAN concept to a smart home environment, where smartphone processing is replaced with a server capable of storing, processing, and responding to environmental cues based on user data. To delve deeper into the notion of employing medical IoT devices within the framework of a smart home to aid in patient treatment and recovery, this paper conducts simulations of several well-documented scenarios. These simulations are carried out within the context of an established smart building testbed, as introduced in a prior presentation [8]. The testbed represents a sophisticated model of a smart building, featuring multiple floors and rooms that serve as a versatile platform adaptable to diverse scenarios without the need for extensive structural changes. Within this framework, the smart home system utilized in this study is equipped with a distributed control system, allowing seamless integration of inputs derived from resident biometric data. This integration enables the customization of the home environment's response to individual occupants' requirements. With the distributed control system, adjustments can be precisely targeted to specific floors or rooms without necessitating widespread modifications, ensuring efficient operation and adaptability. This flexibility accommodates the needs of multiple occupants, irrespective of whether they utilize wearable devices. Particularly for individuals with limited mobility, this adaptability translates into enhanced resident comfort, achieved through tailored adjustments such as optimizing light intensity or temperature settings, all without compromising the functionality of spaces utilized by other residents.

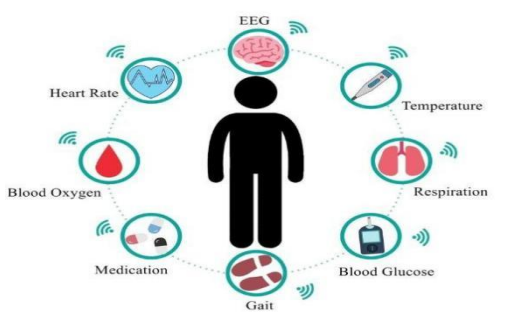


Fig: Medical IOT network

Enhancing user safety and security entails implementing mechanisms for automatic communication with caregivers or emergency services in cases of abnormal incidents where there is no response from the user. Furthermore, safety measures can be augmented by integrating machine learning algorithms into the control system to learn and adapt to the patient's routine. For instance, individuals with Alzheimer's disease may exhibit tendencies to wander and become disoriented. In such scenarios, the control system can mitigate the risk of injury or harm by alerting caregivers to unusual activities, such as leaving the home during nighttime hours outside of the established routine. This proactive approach not only ensures prompt intervention in emergencies but also enhances overall safety and peace of mind for patients and their caregivers.

II. MEDICAL INTERNET OF THINGS AND SMART HOMES

The evolution of the Internet of Things (IoT) has broadened its scope to encompass any interconnected object embedded with a device facilitating data transmission and reception. These devices can establish direct internet connectivity through access points or link to internet-enabled devices via Bluetooth. Within the realm of medical IoT, the landscape is characterized by a plethora of customized devices tailored to individual user requirements. Wearable sensors represent a common facet of medical IoT, facilitating the measurement of vital parameters such as heart rate, blood oxygen levels, blood glucose levels, body temperature, and gait dynamics (refer to Fig. 1). These sensors can establish connections either directly to the internet or indirectly through internet-enabled devices such as smartphones, laptops, or tablets, thereby facilitating seamless data transmission and accessibility. op, or tablet. Wearable body area networks (WBANs) are a crucial component of the medical IoT [7]. The influx of commercially available devices, engineered to seamlessly integrate into users' daily lives while being non-invasive, has ushered in a new era of personalized medical care without exorbitant equipment expenses. Wireless Body Area Networks (WBANs) encompass a diverse array of devices, ranging from specialized sensors like pulse oximetry sensors, measuring blood oxygen levels, to sophisticated gadgets akin to Fitbits. These advanced devices can not only track location but also log activities and monitor heart rate. For patients in stable, non-critical conditions, WBAN-based monitoring offers the possibility of recuperating at home or under the care of a family member, obviating the need for extended hospital stays post-primary treatment. Opting for home recovery is often favored due to the comforting familiarity of one's surroundings and the enhanced control it affords over daily routines. Additionally, concerns about insurance coverage may arise, as outpatient observation may not receive the same level of coverage as inpatient care under a doctor's orders. Moreover, transitioning patients out of medical facilities can alleviate bed shortages for individuals requiring more intensive care and supervision. Integrating devices such as medication reminder pill dispensers, personal emergency response systems (PERS), and gas sensors into smart homes enhances the functionality of wearable devices, creating a robust network for user care and safety.

Individuals suffering from chronic illnesses or requiring prolonged care stand to gain significant advantages from the utilization of Wireless Body Area Networks (WBANs) to compile vital health information, thus constructing a comprehensive and intricate health record. This detailed record can prove invaluable to medical professionals, offering insights and nuances that may remain obscured during standard consultation visits. By documenting abnormal conditions that manifest under specific circumstances, such as following strenuous exercise or medication intake, WBANs facilitate the early diagnosis of severe conditions before they disrupt an individual's daily routine or pose serious health risks.

The versatility of medical IoT extends to the general monitoring of an individual's well-being, even in situations where data collection isn't explicitly intended for presentation to medical providers. Elderly individuals lacking the means or inclination to reside with a caregiver or in an assisted living facility can derive significant benefits from devices capable of monitoring falls. Moreover, safeguarding users' safety can entail functionalities such as logging the location of elderly persons, particularly those in the early stages of dementia, and alerting a designated contact if the individual deviates from their regular routine or area for an extended duration.

A. Machine learning for the Medical Internet of Things

In the realm of medical technology, precision is paramount, especially in scenarios where patients are monitored outside traditional medical settings. While Wireless Body Area Networks (WBANs) offer a wealth of real-time data on an individual's physical condition, they are susceptible to potential inaccuracies stemming from faulty measurements, hardware malfunctions, software glitches, and other situational peculiarities. To mitigate these risks, the integration of machine learning algorithms for the detection of abnormalities within medical sensor networks has emerged as a promising solution, as proposed and implemented with notable success [9]. This approach, as discussed in [3], represents a proactive strategy to enhance the reliability and accuracy of medical IoT systems, thereby bolstering patient care and safety. In the realm of medical IoT, smart algorithms play a crucial role in efficiently managing device resources and sifting through vast volumes of multi-dimensional data. Much of this data lacks discernible patterns indicative of diseases, making human inspection impractical. However, deviations from a patient's typical readings, especially significant changes or spikes, can signal potential health issues. Predictive modeling techniques are employed to forecast deviations in biometric readings such as blood pressure, cholesterol, and blood sugar from both the patient's normal baseline and accepted "safe" ranges. Data mining leverages patient characteristics like age, weight, medical history, and medication usage to establish personalized baselines. Machine learning algorithms, particularly artificial neural networks (ANNs), are utilized to process medical data and aid in the diagnosis of various conditions. Furthermore, machine learning frameworks have been designed to integrate IoT MAC layer technologies, addressing the heterogeneity of different IoT devices in smart home environments. By applying machine learning to

medical IoT, early detection of anomalies before they deviate from acceptable norms becomes feasible, enabled by monitoring drift from established patient baselines. This approach also facilitates monitoring patient conditions during recovery or changes in medication routines, enabling the detection of unacceptable deviations such as low blood pressure, elevated blood glucose levels, or reduced inspired oxygen fraction.

B. Features for Healthcare in Smart Homes

Smart buildings, encompassing smart homes, epitomize sophisticated architectures leveraging the Internet of Things (IoT) and embedded technologies to optimize resident well-being while curbing operational expenses through astute resource management. These structures are endowed with on-site controllers adept at data aggregation, analysis, and subsequent modulation of environmental factors through actuators, ensuring alignment with preset or user-defined parameters. When considering the deployment of a medical IoT system coupled with Wireless Body Area Networks (WBANs) within smart homes, several core parallels with smart buildings emerge. However, the foremost emphasis is placed on safeguarding user safety, closely followed by enhancing comfort. Key features of integrating medical IoT into smart homes encompass:

1) **User Safety:** Ensuring patient safety stands as the paramount concern within a medical IoT network deployed in smart home environments. Given the potential life-threatening nature of health conditions involved, a robust system is necessitated to promptly contact caregivers or emergency services in case of atypical events or readings. Prior to alerting caregivers or emergency services, the system first attempts to solicit a response from the patient to mitigate false alarms. However, if there is no response or in critical situations such as falls or cardiac arrests, emergency services should be promptly notified. To minimize erroneous notifications, the system can discern between alarming and non-alarming sensor readings, thus reducing unnecessary calls to emergency services.

Yet, user safety extends beyond WBANs within smart homes. For instance, individuals living with dementia face heightened risks of injury, thus integrating common appliances into the IoT network can enhance safety measures. Smart home systems can detect anomalies like prolonged stove usage and alert residents or caregivers accordingly, leveraging existing sensors utilized for security purposes. Moreover, integrating medical technology into smart homes offers distinct advantages over short-term care facilities, enabling personalized care tailored to individual routines. Innovative solutions such as sensor-equipped bathtubs and chairs with built-in EKG sensors cater to specific needs, ensuring continuous monitoring of patients' well-being even during routine activities. Additionally, smart home systems can alert caregivers if dementia patients wander outside unusual hours or remain outdoors for extended periods, further enhancing safety measures and promoting peace of mind for caregivers and family members. These advanced features not only enhance patient safety but also contribute to a more comprehensive and effective healthcare delivery model within the comfort of one's home.

2) **Comfort:** In a smart building, resident comfort is contingent upon the environmental conditions surrounding them. The strategic placement of sensors and devices within a Wireless Body Area Network (WBAN) holds significant sway over comfort levels within a medical IoT network. A pivotal consideration in ensuring patient comfort lies in minimizing the effort required to interact with network devices. Continuous and direct engagement with these devices can pose inconvenience for both users and caregivers alike. Ideally, the maintenance of WBAN devices should seamlessly integrate into a user's routine, sparing them from the burden of constant engagement. The risk of device abandonment looms large when patients perceive technology as cumbersome or when the perceived hassle outweighs the ultimate benefits. For instance, medical devices like continuous positive airway pressure (CPAP) machines, which are often stationary and require consistent operation, should feature intuitive interfaces for ease of use. Patients recovering at home may prefer passive monitoring of their progress over a short duration, without the need for complex wired or constantly charging devices. Moreover, elderly patients, particularly those living with dementia, may struggle to manage, clean, or operate intricate devices. Therefore, WBANs should prioritize unobtrusiveness, aiming not to disrupt a patient's daily routine while maintaining the essential monitoring and care functionalities. By addressing these concerns, medical IoT networks can optimize patient comfort and adherence to treatment regimens, ultimately enhancing overall well-being and recovery outcomes.

3) **Patient Health:** While medical IoT networks offer valuable insights and monitoring capabilities, it's crucial to underscore that they are not intended as substitutes for professional medical advice or care. Rather, these networks are designed to complement and augment the expertise of healthcare professionals, facilitating personalized care with a level of nuance that extends beyond traditional consultations alone. In a home environment, medical IoT systems are highly customizable, allowing users and caregivers to interact with the system comfortably. If either the user or caregiver is not at ease with or unable to manage medical IoT devices, there's no detriment in resorting to traditional medical facilities. However, for those comfortable with these devices, medical IoT presents opportunities for newfound freedom and autonomy. In scenarios where insurance coverage may not extend to prolonged hospital stays for monitoring purposes, WBAN devices can collect data for later review by healthcare professionals. Machine learning algorithms can also be deployed as forecasting tools for potential diagnostics, aiding in the early identification and monitoring of conditions such as Parkinson's disease, diabetes, and Friedreich's ataxia using wearable sensors. By fostering collaboration between technology and healthcare professionals, medical IoT networks hold promise for enhancing patient care and outcomes.

4) **Design Flexibility:** The adaptable nature of smart buildings offers ample opportunity for customization. In cases where the building uses a distributed control system, a System where multiple autonomous control units work to

towards the same goal under the supervision of a coordinating controller, individual rooms or floors can be taken offline for modification without obstructing the control units in the rest of the building. This also allows the system to be more effectively customized to individual rooms while still being able to coordinate between subsystems. For example, a controller in a kitchen can control lights, heating and air, and unlit gas monitors, while a controller located in a garage can control lights and a security system. While these systems do not need to operate independently of each other, each floor or room does not need to operate in the same ways because they have different functions. In a smart home it is conceivable that only the living area of the patient needs to react to cues from a medical IoT user's data. For smart homes where medical IoT users live with a caretaker, if the user cannot access parts of a building due to mobility issues, such as elderly patients unable to navigate stairs, then generally inaccessible areas can be separately customized for caretaker's routine, or not customized at all. This can be extended to medical care facilities, including care homes or hospices, that need to balance many patients within a single building.

5) **Information and User Engagement:** Numerous devices within medical IoT networks offer user interfaces, typically in the form of applications, enabling users to access and monitor their data. However, managing device connections in traditional IoT networks often necessitates multiple apps and gateways, prompting various attempts to streamline this process. Consequently, resulting dashboards or user interfaces bear resemblance to those found in commercial smart buildings, facilitating the visualization of environmental conditions [16]. Empowering users to access their data fosters positive engagement and reduces the likelihood of technology abandonment. Patients benefit from staying informed about their care status by accessing their data anytime, enhancing their involvement in their health management.

III. INCORPORATING A NETWORK OF MEDICAL IOT DEVICES INTO A SMART BUILDING TESTBED

While tele health is not a novel concept, its significance has grown with the increasing interest in smart buildings and broader smart city ecosystems. The notion of remote patient care has long been recognized as a means to access consultations from specialists worldwide. However, recent attention has shifted towards leveraging the connectivity within users' homes to enhance quality of life. Medical-based IoT systems capitalize on this connectivity by extending it to personal sensor devices, enabling a smart home environment to prioritize resident safety and health while concurrently aiming to optimize comfort. In a previous endeavor, we conceptualized and executed the development of a testbed specifically tailored for a smart building prototype. Our focus centered on leveraging IoT solutions to effectively gather, scrutinize, and administer data originating from various building systems [8]. Our existing testbed stands as a multi-floor and multi-room physical manifestation of a smart building, meticulously designed to accommodate a spectrum of testing scenarios. It boasts an array of fully operational components including doors, windows, heating elements, fans, LED lights, PIR motion sensors, and cameras, strategically positioned throughout the setup as illustrated in Fig. 2.

The overarching goal of a smart building, conceived as a cyber-physical system, is to seamlessly adapt to residents' requirements, thereby ensuring utmost comfort while simultaneously reducing operational expenses. In this context, our focus extends beyond mere comfort to encompass the safety and well-being of the residents. Notably, this paper does not delve into the interaction of the building within the wider ambit of a smart city.

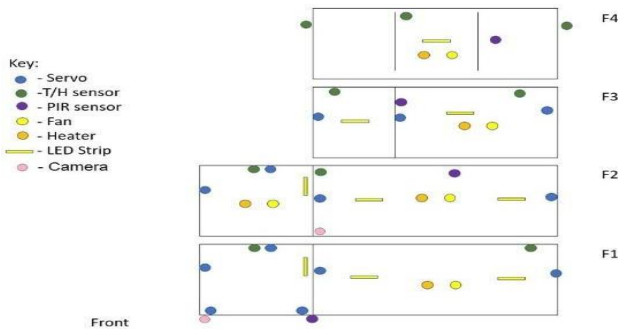


Fig: Layout of sensor and Actuator

Within the realm of healthcare applications, data acquisition is facilitated through individuals wearing medical sensors. Subsequently, this data is integrated into the control system via two possible routes: Firstly, it can be transmitted through the server to the Raspberry Pi as a recorded dataset. Alternatively, if within range, real-time data transmission can occur via the WiFi module. For sensors operating on Bluetooth and relying on an internet-enabled device as an access point, integration into the system is achieved either by incorporating a device to connect to the WiFi module or by directly integrating the sensor with a secondary module capable of communicating with the WiFi module.

Traditionally, buildings are not typically constructed with the foresight to accommodate future health considerations, even in cases where accessibility is prioritized. The concept of designing structures with built-in capabilities for seamless integration of smart technology remains relatively novel. However, the adoption of modular systems, exemplified by the sensor layout and control scheme demonstrated in previous studies [18],[19], allows for flexibility beyond the original design intent. This modularity extends to the implementation of medical technology within smart home environments. Leveraging a physical testbed during the design and initial deployment phases of a medical IoT network enables the identification and resolution of unexpected behaviors, ultimately leading to the development of a more robust design. Additionally, the modular nature of the testbed facilitates the implementation of a diverse range of flexible design scenarios for testing purposes. To facilitate controlled testing, real-time data encompassing vital signs like pulse, blood oxygen levels, respiratory rate, body temperature, and gait can be collected and archived. Introducing anomalies into this data allows for the evaluation of the controller's response to simulated health issues. By maintaining datasets that can be replayed following modifications to the controller, it becomes feasible to assess changes in response over time. Techniques such as model

predictive control and machine learning, particularly artificial neural networks (ANNs) [11], are instrumental in monitoring biometric data and identifying trends, particularly when dealing with multi-dimensional inputs. Additionally, there exists potential to integrate ANNs with controllers to influence actuators based on desired environmental outcomes.

In the absence of substantial modifications to the existing state of the testbed as outlined in [8], there are numerous simulated use cases ripe for exploration.

1) Cardiac Events: To detect cardiac events, data can be gathered from a single sensor monitoring heart rate or from a combination of sensors tracking heart rate, blood oxygen levels, and blood pressure. Upon detecting sudden abnormal spikes in activity or prompts for the user to press a button on a wearable device, akin to existing commercial products. If the user fails to respond, the controller will proceed to initiate a call to emergency services. In instances where documented conditions such as arrhythmia, murmurs, or palpitations are present, the controller can alert either the patient or a caregiver to irregular activity, refraining from alerting emergency services unless explicitly prompted to do so.

2) Unexpected tumbles: As explored in [3], significant insights can be derived from analyzing a patient's gait. Beyond tracking disease progression, the sensors employed for this purpose can also serve to identify abrupt movements that might signal a fall. Should the patient fail to respond or request assistance, the controller is programmed to alert emergency services.

3) Mobility-restricting conditions: Limited mobility can stem from various sources, including prolonged illnesses, chronic conditions, or accidents. The level of independence a patient can maintain depends on the specifics of their situation and may necessitate full-time care. In such cases, emergency intervention might not be warranted for the entirety of the care period. Instead, Wireless Body Area Networks (WBANs) integrated into smart home setups can enhance the patient's comfort. Apart from monitoring vital signs like cardiac activity, oxygen levels, and pulse rate, WBANs can also track body temperature, allowing for adjustments to the environmental temperature as required. Additionally, caretakers can access the home security system remotely, while patients themselves can utilize it to monitor the movements of other household members, such as young children.

IV. CONCLUSION AND FUTURE WORK

Many people overlook the value of good health until they experience injury, illness, or other health challenges. As smart home technology continues to advance, there's an increasing opportunity to integrate healthcare into our daily lives. The Internet of Things (IoT) offers a versatile solution, enabling routine and non-critical healthcare tasks to be conducted within the comfort of one's home. This not only eases the strain on healthcare providers but also allows patients to recover in familiar surroundings. However, challenges persist in the realm of IoT, smart buildings, and telehealth. Patient adoption of technology remains an obstacle, and there's a risk of sensors being underutilized or misused. Machine learning shows promise in addressing these issues but requires extensive data for effective analysis. Moreover, ensuring accurate context

recognition and minimizing false alarms are ongoing concerns.

Nevertheless, the field of medical IoT is evolving rapidly, transitioning from concept to practical application. With growing interest in the benefits of smart buildings and cities, there's a push to leverage home connectivity to enhance quality of life. The testbed we've developed offers numerous possibilities for refining medical device networks within smart home environments. Its modular design and distributed control system enable extensive testing and modification without altering the physical structure.

By integrating user-customized medical IoT networks alongside existing control systems, we can adapt buildings without requiring complete overhauls. Additionally, traditional non-wearable medical devices can be incorporated into our testbed, either as third-party additions or reconstructed for system interaction simulations.

REFERENCES

- [1] D. Howdon and N. Rice, "Health care expenditures, age, proximity to death and morbidity: Implications for an ageing population," *Journal of Health Economics*, vol. 57, pp. 60–74, Jan. 2018.
- [2] M. D. McHugh, A. Kutney-Lee, J. P. Cimiotti, D. M. Sloane, and L. H. Aiken, "Nurses' widespread job dissatisfaction, burnout, and frustration with health benefits signal problems for patient care," *Health Affairs*, vol. 30, no. 2, pp. 202–210, Feb. 2011.
- [3] C. Pasluosta, H. Gabner, J. Winkler, J. Klucken, and B. Eskofier, "An emerging era in the management of parkinson's disease: Wearable technologies and the internet of things," *IEEE journal of biomedical and health informatics*, vol. 19, Jul. 2015.
- [4] A. M. Gomez and G. E. Umpierrez, "Continuous glucose monitoring in insulin-treated patients in non-icu settings," *Journal of Diabetes Science and Technology*, vol. 8, no. 5, pp. 930–936, Sep. 2014.
- [5] R. LeMoyné, F. Heerinckx, T. Aranca, R. D. Jager, T. Zesiewicz, and H. J. Saal, "Wearable body and wireless inertial sensors for machine learning classification of gait for people with friedreich's ataxia," *IEEE 13th International Conference on Wearable and Implantable Body Sensor Networks (BSN)*, pp. 147–151, 2016.
- [6] Sensor Networks (BSN), pp. 147–151, 2016. [6] Q. Ni, A. B. G. Hernando, and I. P. de la Cruz, "The elderly's independent living in smart homes: A characterization of activities and sensing infrastructure survey to facilitate services development," *Sensors (Basel)*, vol. 15, no. 5, pp. 11 312–11 362, May 2015.
- [7] S. B. Baker, W. Xiang, and I. Atkinson, "Internet of things for smart healthcare: Technologies, challenges, and opportunities," *IEEE Access*, vol. 5, pp. 26 521–26 544, 2017.
- [8] R. Eini, L. Linkous, N. Zohrabi, and S. Abdelwahed, "A testbed for a smart building: design and implementation," in *Proceedings of the Fourth Workshop on International Science of Smart City Operations and Platforms Engineering*. ACM, 2019, pp. 1–6.
- [9] G. Pachauri and S. Sharma, "Anomaly detection in medical wireless sensor networks using machine learning algorithms," *Procedia Computer Science*, vol. 70, pp. 325–333, Jan. 2015.
- [10] F. Chen, P. Deng, J. Wan, D. Zhang, A. V. Vasilakos, and X. Rong, "Data mining for the internet of things: Literature review and challenges," *International Journal of Distributed Sensor Networks*, vol. 11, no. 8, p. 431047, Aug. 2015.
- [11] N. Shahid, T. Rappon, and W. Berta, "Applications of artificial neural networks in health care organizational decision-making: A scoping review," *PLOS ONE*, vol. 14, no. 2, p. e0212356, Feb. 2019.
- [12] I. Kavakiotis, O. Tsave, A. Salifoglou, N. Maglaveras, I. Vlahavas, and I. Chouvarda, "Machine learning and data mining methods in diabetes research," *Computational and Structural Biotechnology Journal*, vol. 15, pp. 104–116, Jan. 2017.
- [13] A. Bujnowski, A. Palinski, P. Kosciński, L. Skalski, A. Skurczyńska, and J. Wtorek, "Detection of person presence and its activity in the bathtub," *Journal of Physics Conference Series*, vol. 434, pp. 20–35, Apr. 2013.
- [14] A. Bujnowski, M. Kaczmarek, K. Osiski, M. Goka, and J. Wtorek, "Capacitively coupled ecg measurements - a cmrr circuit improvement," *EMBECE and NBC 2017*, pp. 1109–1112, 2018.
- [15] H. B. Pasandi and T. Nadeem, "Challenges and limitations in automating the design of mac protocols using machine-learning," in *2019 International Conference on Artificial Intelligence in Information and Communication (ICAIIIC)*. IEEE, 2019, pp. 107–112.
- [16] S. Federici, F. Meloni, and S. Borsci, "The abandonment of assistive technology in Italy: a survey of users of the national health service," *European Journal of Physical and Rehabilitation Medicine*, vol. 52, pp. 516–526, 2016.
- [17] N. Sun and P.-L. P. Rau, "The acceptance of personal health devices among patients with chronic conditions," *International Journal of Medical Informatics*, vol. 84, no. 4, pp. 288–297, Apr. 2015.
- [18] T. Zachariah, N. Klugman, B. Campbell, J. Adkins, N. Jackson, and P. Dutta, "The internet of things has a gateway problem," *Proceedings of the 16th International Workshop on Mobile Computing Systems and Applications - HotMobile '15*, pp. 27–32, 2015.
- [19] R. Eini and S. Abdelwahed, "Distributed model predictive control based on goal coordination for multi-zone building temperature," in *2019 IEEE Green Technologies Conference (GreenTech)*, Lafayette, LA, 2019.
- [20] R. H. et al., "Nonlinear model predictive control of glucose concentration in subjects with type 1 diabetes," *Physiological Measurement*, vol. 25, no. 4, p. 905920, Jul. 2004.
- [21] A. Yassine, S. Singh, and A. Alamri, "Mining human activity patterns from smart home big data for health care applications," *IEEE Access*, vol. 5, pp. 13 131–13 141, 2017.