

Epileptic seizure detection and Prediction using Deep learning

Syra S Shaji¹, Goutham Krishna L U²

Student, MSc Computer Science, Christ Nagar College, Maranalloor, Thiruvananthapuram, Kerala, India¹

Assistant Professor, Department of Computer Science, Christ Nagar College, Maranalloor, Thiruvananthapuram, Kerala, India²

Abstract: Numerous methods, including electroencephalography (EEG) and magnetic resonance imaging (MRI), have been proposed to diagnose epileptic seizures. Deep knowledge (DL) is one of the many subfields of artificial intelligence. Conventional machine learning algorithms involving point birth were used prior to the emergence of DL. As a result, their performance was restricted to what the people creating the features by hand could do. However, in DL, the creation of features and type is completely automated. Similar to how the theory of epileptic seizures has advanced significantly, these methods have appeared in numerous medical fields. This study presents a thorough overview of a factory focused on automated epileptic seizure discovery using neuroimaging modalities and DL methods. Different approaches have been suggested to diagnose epilepsy.

Keywords: LSTM, EEG modalities, MRI modalities.

I. INTRODUCTION

Millions of people worldwide suffer from epilepsy, a neurological condition marked by frequent, unprovoked seizures. The frequency, duration, and severity of seizures, which are caused by aberrant electrical activity in the brain, can vary greatly. Because seizures can happen suddenly and without warning, epilepsy is still a difficult condition to manage. For this reason, early seizure detection and prediction are essential for efficient treatment and averting possible harm. Although there are conventional techniques for seizure detection, their efficiency, timeliness, and accuracy are frequently limited. Both seizure prediction and detection have advanced significantly in recent years with the introduction of deep learning techniques. These techniques, which provide more reliable, automated, and real-time solutions, are revolutionizing the way we monitor epilepsy. Unusual electrical discharges cause seizures.



Fig 1. Nueral System of Epileptic^[32]

II. BACKGROUND CONTEXT

A. RELATED WORKS

Data collection, preprocessing, model selection, training, and evaluation are some of the crucial steps in deep learning-based epileptic seizure detection and prediction. In order to capture past and future dependencies in EEG signals and improve the model's capacity to identify intricate temporal patterns for increased accuracy and early seizure prediction, epileptic seizure detection and prediction employ Bidirectional Long Short-Term Memory (BiLSTM) networks. Patients' EEG signals are first gathered, and noise and artifacts are eliminated through processing. After that, these signals are converted into formats that are appropriate for deep learning models, like spectrogram images or time-series data. While recurrent neural networks (RNNs) or long short-term memory (LSTM) networks capture temporal dependencies in seizure patterns, convolutional neural networks (CNNs) are frequently used for feature extraction. Models use pre-seizure data to make predictions.

B. INTRODUCTION TO DEEPLARNING

In an epileptic seizure discovery and vaticination using deep literacy, Deep literacy is a technical subfield of machine literacy inspired by the structure and functioning of the mortal brain. It focuses on algorithms called artificial neural networks, especially those with numerous retired layers(deep neural networks). These networks are able of learning hierarchical representations of data, where each consecutive subcaste captures decreasingly abstract features. Deep literacy models exceed at automatically discovering patterns from large and complex datasets without the need for homemade point engineering. This capability makes them largely effective in fields like computer vision(image bracket, object discovery), natural language processing(language restatement, sentiment analysis), speech recognition, medical opinion, and more. One of the crucial advantages of deep literacy is its scalability its performance generally improves as further data and computational power come available. Ways similar as convolutional neural networks(CNNs) for image data and intermittent neural networks(RNNs) for successional data help capture spatial and temporal dependences , independently. More advanced infrastructures like mills have further expanded deep literacy's success, particularly in language understanding. Despite its power, deep literacy also has challenges, including the need for large annotated datasets, high computational coffers, and difficulties in interpreting model opinions. Nevertheless, deep literacy has unnaturally converted AI exploration and operations, making it a foundation of ultramodern artificial intelligence.

C. EXISTING SYSTEM

In the being systems, deep literacy models play a major part in perfecting the delicacy and trustability of seizurediscovery and vaticination. These systems generally follow a channel that starts with EEG signal accession and preprocessing —noise and vestiges are removed using pollutants like notch pollutants and bandpass pollutants to retain the applicable brainwave frequentness. Next, rather of counting on homemade point birth like traditional styles, deep literacy models similar as Convolutional Neural Networks(CNNs), intermittent Neural Networks(RNNs), Long Short- Term Memory(LSTM)networks, or their cold-blooded combinations are used. These models automatically learn important spatial and temporal features from raw EEG data, landing complex patterns that gesture seizure onset. The gutted EEG data is generally resolve into training and testing sets to make and validate the model. During training, the model learns to classify EEG parts into seizure or non- seizure countries(discovery) or to prognosticate an forthcoming seizure by assaying preictal patterns (vaticination). Numerous being systems use patient-specific orcross-patient models depending on the available data. State- of- the- art systems frequently include real- time processing capability, high delicacy, and occasionally pall- grounded deployment for remote monitoring. Despite advancements, being systems still face challenges like limited large- scale labeled datasets, variability in seizure patterns among cases, and the need for featherlight models for practical, wearable operations.

III. PROPOSED SYSTEM

The proposed exploration focuses on developing an epileptic seizure discovery and vaticination exercising advanced deep literacy ways. By using dataset of 54K samples of(23, 256)- shaped input representing signals from EEG cases. Both confirmation and test are 8072 samples long. The balanced confirmation has 11 rate, is a subset of the normal confirmation. and the Recordings, grouped into 23 cases, and were collected from 22 subjects(5 males, periods 3 – 22; and 17 ladies, periods 1.5 – 19).(Case chb21 was attained 1.5 times after case chb01, from the same womanish subject.) All signals were tried at 256 samples per second with 16- bit resolution. The dataset contain 23 EEG signals. In all, these records include 198 seizures(182 in the original set of 23 cases). The seizures were uprooted and mixed with somenon-seizure samples for this double bracket task and achieving an delicacy of 85. Epileptic seizure discovery

and vaticination using deep literacy generally follows a structured channel to ameliorate delicacy and trustability. First, in the preprocessing stage, EEG signals prone to colorful vestiges and noise — are filtered to enhance signal quality. A notch sludge is generally applied to remove power line hindrance(generally at 50 Hz or 60 Hz), which helps maintain the true sample frequency and save the applicable EEG factors critical for analysis. Next, in the point discovery stage, deep literacy models like Convolutional Neural Networks (CNNs) automatically prize spatial and temporal features from the EEG data. These models learn complex,non-linear patterns that might be missed by homemade point engineering, landing both original signal changes and broader temporal dependences important for prognosticating seizures. The gutted and point- enhanced data is also resolve into training and testing datasets generally using a rate similar as 70 for training and 30 for testing — to estimate model performance on unseen data. During training, the model learns to collude EEG patterns to seizure ornon-seizure events, conforming itsinternal parameters to minimize vaticination crimes. Testing ensures the model 18 EpillepticSeizure Discovery and vaticination using Deep literacy generalizes well and is n't overfitting. In the bracket step, the trained model predicts the presence or onset of a seizure. Eventually, data separation refers to icing that data from the same seizure occasion or case does not appear contemporaneously in both training and testing sets, precluding data leakage and icing realistic evaluation. Overall, using a notch sludge to clean data, combined with automatic point discovery and proper data running, helps deep literacy models achieve advanced delicacy and robustness in seizure discovery and vaticination systems. Before deep literacy, traditional seizure discovery and vaticination reckoned heavily on homemade point birth and classical machine learning algorithms. First, EEG signals were preprocessed to remove noise, and also handcrafted features similar as frequency bands(delta, theta, nascence, beta, gamma), entropy, energy, and statistical measures were uprooted to represent brain activity.These features were also fed into machine literacy classifiers like Support Vector Machines(SVM), k- Nearest Neighbors(k- NN), Decision Trees, or Random timbers to distinguish between seizure andnon-seizure countries. In some systems, threshold- grounded or rule- grounded styles were also used to descry abnormal patterns. Before deep literacy, traditional seizure discovery and vaticination reckoned heavily on homemade point birth and classical machine learning algorithms. First, EEG signals were preprocessed to remove noise, and also handcrafted features similar as frequency bands(delta, theta, nascence, beta, gamma), entropy, energy, and statistical measures were uprooted to represent brain activity.These features were also fed into machine literacy classifiers like Support Vector Machines(SVM), k- Nearest Neighbors(k- NN), Decision Trees, or Random timbers to distinguish between seizure andnon-seizure countries. In some systems, threshold- grounded or rule- grounded styles were also used to descry abnormal patterns.

A. PROPOSED SYSTEM ARCHITECTURE

The proposed armature for epileptic seizure discovery using deep literacy is a methodical and modular approach designed to directly identify seizure events from EEG (electroencephalogram) data. This armature consists of several well- defined stages preprocessing, point birth, data splitting, deep literacy- grounded bracket, decision- timber, and affair visualization. originally, the preprocessing stage aims to enhance the quality of raw EEG signals by removing colorful types of noise vestiges, similar as eye blinks and muscle movements. Common ways include band- pass filtering to retain applicable frequency factors and notch filtering to exclude power- line hindrance. Proper preprocessing ensures the trustability of posterior analysis. The coming stage, point birth, transforms the gutted EEG signals into a set of meaningful representations that can punctuate seizure- related patterns. This may involve rooting time- sphere features like mean and friction, frequency- sphere features similar as power spectral viscosity(PSD), or time- frequency features using styles like the Discrete Wavelet transfigure (DWT). In ultramodern deep literacy systems, raw EEG signals or their spectrograms can also be fed directly into neural networks, allowing the model to learn discriminational features automatically. Following point birth, the data issplit into training, confirmation, and testing sets. This step is critical for erecting a robust model by precluding overfitting and icing fair evaluation. generally, the largest portion is used for training the deep literacy model, while lower portions are reserved for validating the model during training and testing its final performance.

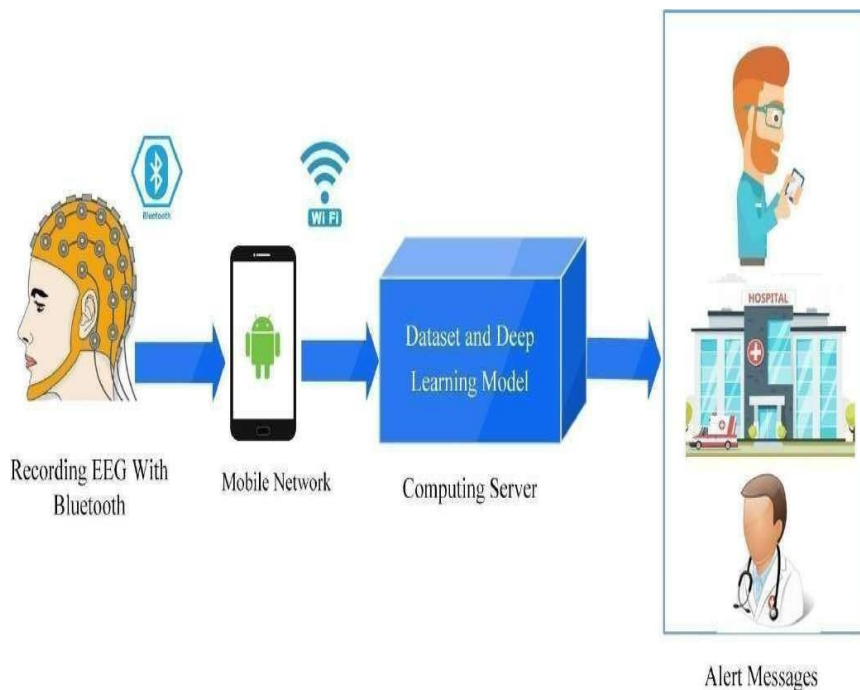


Fig 2 : Proposed Architecture Of Epileptic Seizure Detection and Prediction Using Deep Learning [33]

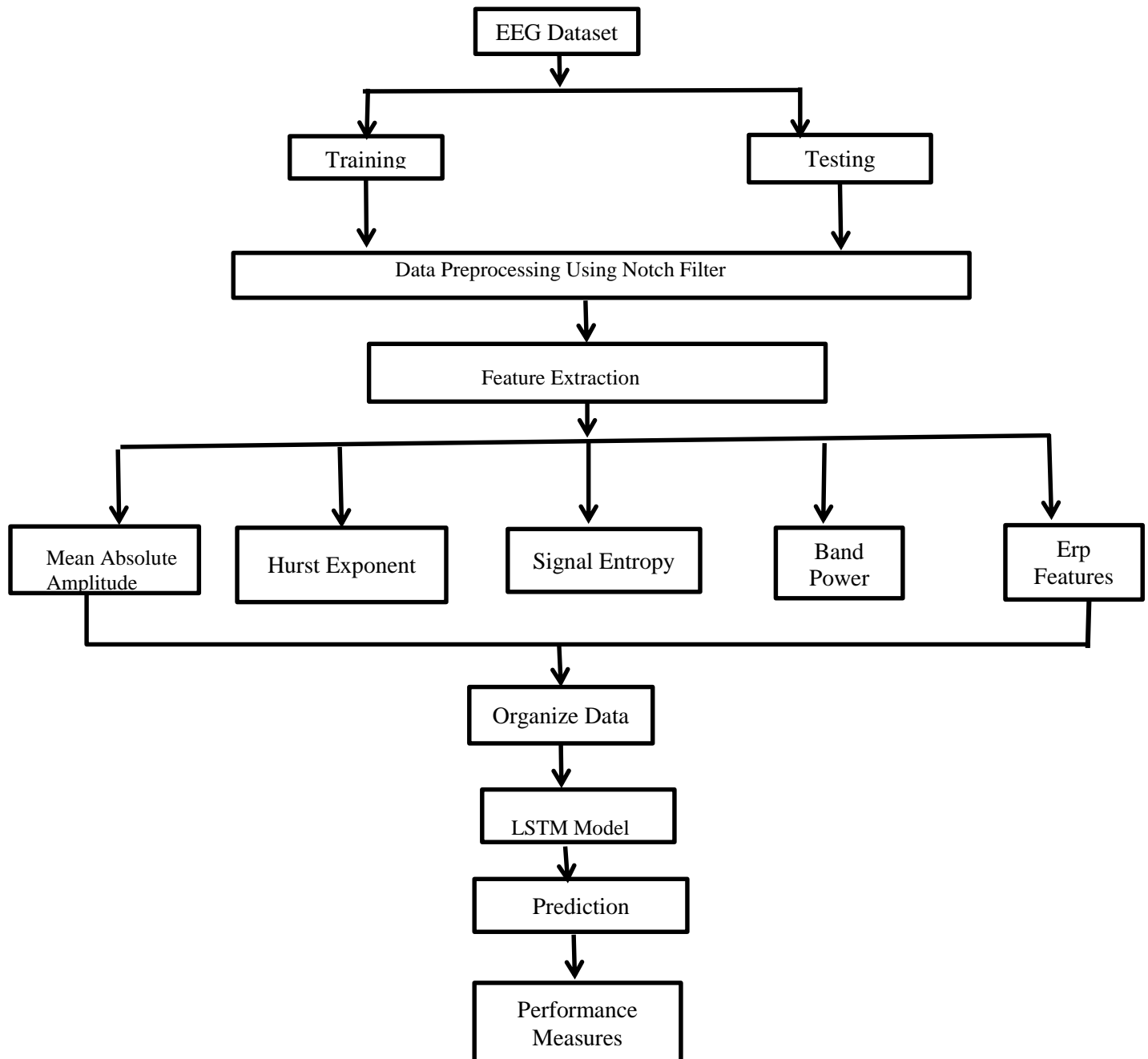


Fig 3 : Flow chart of the system

B. MODULE DESCRIPTION

In the proposed epileptic seizure detection and prediction using deep learning, several modules work in tandem to deliver accurate and efficient recommendations. Each module is designed to handle a specific aspect of the system's functionality. The key modules include Preprocessing, Feature extraction, data split training and testing, classification and data separation.

Pre-Processing: In the preprocessing stage of epileptic seizure detection and prediction using deep learning, raw EEG signals are carefully prepared to improve data quality and consistency before analysis. This process typically includes filtering to remove noise and unwanted frequencies (such as eye blink and muscle artifacts), and applying band-pass or notch filters to focus on relevant EEG frequency bands. The data is then normalized or scaled to bring all values into a consistent range, making it easier for the deep learning model to learn patterns effectively. Segmentation is also performed, where the continuous EEG signals are divided into fixed-length windows or epochs, which helps in systematic feature extraction and model training. Together, these steps transform messy, real-world EEG recordings into clean, structured data suitable for accurate seizure detection and prediction.

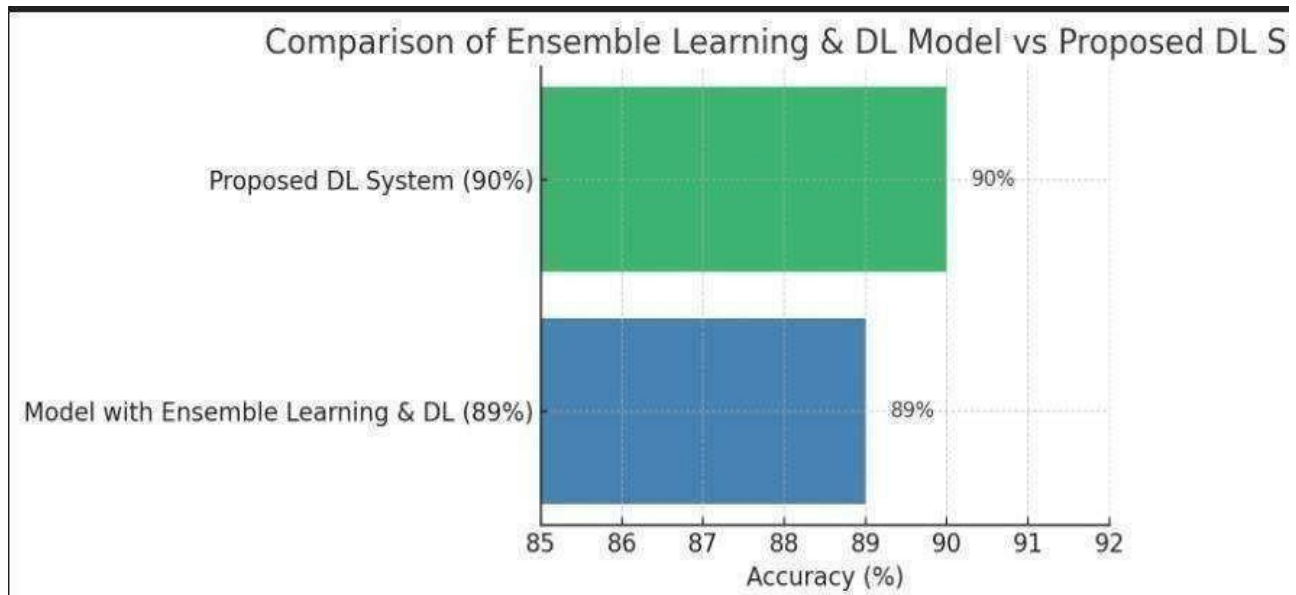
Feature Extraction: The characteristics are derived from the preprocessed EEG signals to help the model distinguish between seizure and non-seizure states. This involves calculating various statistical, time-domain, and frequency-domain features, such as mean, variance, energy, entropy, power spectral density, and band power across standard EEG frequency bands (delta, theta, alpha, beta, and gamma). Additionally, advanced techniques like wavelet transforms or short-time Fourier transforms are often used to capture time-frequency patterns that reflect dynamic changes in brain activity. These extracted features effectively summarize complex EEG data into informative representations, making it easier for deep learning models to learn the hidden patterns associated with seizure onset and prediction. 23 EpilepticSeizure Detection and Prediction using Deep Learning

Data Split Training and Testing: The prepared dataset is divided into separate subsets—typically training, validation, and testing sets—to build and evaluate the model effectively. The training set is used to teach the deep learning model to recognize patterns related to seizure and non-seizure events by adjusting its internal weights through multiple iterations. The validation set helps fine-tune model parameters, preventing overfitting by ensuring that the model generalizes well to unseen data. Finally, the testing set—comprising data the model has never seen—is used to objectively measure the model's real-world performance in detecting or predicting seizures. This structured approach ensures that the model learns robust and reliable patterns rather than simply memorizing the training data.

Classification and Data Separation: The trained model applies what it has learned to classify new EEG segments into categories such as seizure, preictal (before seizure), or non-seizure. Based on the model's output, the EEG data is then automatically separated and organized according to these labels. This step transforms raw predictions into actionable results: detected seizure segments can be flagged for immediate review, preictal segments can trigger alerts for potential upcoming seizures, and non-seizure segments can be archived separately. By systematically classifying and separating the data, this stage supports both real-time monitoring and retrospective clinical analysis, ultimately helping clinicians focus on the most critical parts of long EEG recordings.

IV. RESULT AND DISCUSSION

The result analysis of the epileptic seizure discovery and vaticination using deep literacy system provides a comprehensive evaluation of the system's performance, pressing its delicacy, effectiveness, and overall impact. In our design, we enforced the Drop Out LSTM algorithm to descry and prognosticate the seizure and non seizure cases. The evaluation criteria and the high delicacy score demonstrate the robustness and trustability of our system. The Drop Out LSTM algorithm was trained on a substantial dataset comprising around data points, shaped input representing signals from EEG cases. Both confirmation and test are 8072 samples long The balanced confirmation has 11 rate, is a subset of the normal confirmation. Recordings, grouped into 23 cases, and were collected from 22 subjects(5 males, periods 3 – 22; and 17 ladies, periods 1.5 – 19).(Case chb21 was attained 1.5 times after case chb01, from the same womanish subject.) All signals were tried at 256 samples per alternate with 16- bit resolution. The dataset contain 23 EEG signals. In all, these records include 198 seizures(182 in the original set of 23 cases). The seizures were uprooted and mixed with somenon-seizure samples for this double bracket task. Through rigorous training and confirmation, our model achieved an delicate delicacy score of 85. In the advanced system for epileptic seizure discovery and vaticination using deep literacy, multiple stages were totally integrated to enhance delicacy and trustability. The process began with preprocessing, where filtering ways were applied to the EEG signals, performing in a success rate for noise junking and clean vaticination signal birth. This assured the data quality before it entered posterior stages. EpillepticSeizure Discovery and vaticination using Deep literacy Following this, the point birth stage concentrated on rooting both prophetic and seizure related features, each achieving 100 birth success. This indicates that the system efficiently captured applicable temporal, spectral, and statistical characteristics of the EEG signals critical for vaticination and discovery tasks.



V. CONCLUSION

Epileptic seizure detection and prediction using deep learning has shown significant potential in improving the accuracy and timeliness of seizure diagnosis and forecasting. Deep learning models, particularly convolutional neural networks (CNNs), recurrent neural networks (RNNs), long short-term memory (LSTM) networks, and transformer-based architectures, have demonstrated superior performance in analysing electroencephalogram (EEG) signals. These models effectively capture spatial and temporal dependencies in EEG data, enhancing seizure detection and prediction capabilities. Despite their success, challenges remain, including data scarcity, variability in EEG patterns across individuals, and the need for real-time implementation in clinical settings. Addressing these issues requires improved dataset quality, advanced model architectures, and integration with edge computing for real-time applications. Future research should focus on explainability, robustness, and personalized seizure prediction to enhance patient outcomes. In conclusion, deep learning-based epileptic seizure detection and prediction systems offer promising advancements in epilepsy management, potentially leading to earlier interventions and improved quality of life for patients.

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