

Intelligent Wireless Sensor Networks for Healthcare: Bridging Biomedical Clothing to the IoT Future

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Abstract

The science of achieving a healthy mind, body, and spirit through objectives and activities is known as personal health (PH). We must be aware of our mental, bodily, and social well-being. The term "hygiene" refers to a wide variety of healthy behaviours. Individuals' healthcare costs and quality of life increased by avoiding or reducing the long-term effects of the disease through knowledge and skills. Biomedical apparel includes sutures, vascular grafts, and biodegradable clothes (BC). Biomedical clothing is anything implanted or incorporated into the human body and used near tissue, blood, or cells. Quick, dependable, and energy-efficient connectivity between wireless sensor networks is necessary (WSNs). Physical layers, media access control, networking layers, and control requirements must be co-designed. For those with lesser means, health insurance will increase in cost. There are difficulties with privacy and cyber security, a higher chance of malpractice claims, and increased time and financial expenditures for doctors and patients. In this study, wireless sensor networks-based personal health biomedical clothing (PH-BC-WSN) was utilized to increase access to high-quality healthcare, increase food production through precision agriculture, and raise the standard of human resources. More effective healthcare and medical asset monitoring systems can be developed thanks to the Internet of Things. Eavesdropping on medical data, modification, fabrication of warnings, denial of service, user tracking and location, physical interference with equipment, and electromagnetic threats were extensively discussed. The article gives several instances of current technology, discusses design challenges including energy efficiency, security, and scalability, provides various demonstrations of current technology, and provides a complete analysis of all the advantages and disadvantages. Despite their many benefits, body sensor networks have several significant obstacles and unresolved research problems, which are described along with some potential answers. As a result, the experimental findings demonstrate that PH-BC-WSN enhances accuracy and reduces response time in inpatient health monitoring.

Keywords: Personal health; Biomedical; Clothing; WSN; Cyber security; Internet of Things.

1. Introduction

Personal Health Information Management (PHIM) is the answer when it comes to keeping oneself healthy and fighting disease. Several existing patient tools might assist PHIM components, such as personal health records and condition-specific health management systems. Reduced risk of most diseases, including heart disease, stroke, and diabetes, is an advantage of leading a healthy lifestyle [1]. Range and range of motion enhance joint stability, strength, and stamina, aiding the aging body in maintaining mobility, peace, and coordination. They defined three types of self-management: medical management, behavioural management, and emotional management [2]. Preventing health issues and lowering the number of doctor's appointments and drugs required are two of the many benefits of taking care of one's health [3]. Healthcare expenditures connected with the disease can be greatly reduced if people take better care of themselves. One shouldn't have to take on the responsibility of maintaining their health. Society plays a role in health promotion and disease prevention, presuming that individuals or society are accountable for maintaining good health [4]. A few tried-and-true ideas to help feel better and live a better life: get a good sleep-in night, eat a balanced diet, get lots of sunlight, deal with stress, exercise daily, and avoid smoking and drinking [5].

Wireless sensor networks (WSNs) can potentially transform our way of life in various ways, including in healthcare, entertainment, transport, retail, and other industries, as well as independent care and emergency management [6]. Ambient intelligence is an interdisciplinary idea that combines wearable technologies and sensor technologies with computation and machine intelligence research to address everyday challenges [7]. Elderly populations in wealthy countries are one of today's most pressing issues. According to data from the population, nearly 20% of people worldwide will be 65 years old or older in the next two decades. As a result, governments and health service providers in these countries must address the dilemma of providing high-quality treatment and service to an aging population while cutting healthcare expenditures [8]. With wearable and implanted body sensor networks, people have tracked their daily lives thanks to integrating sensors and consumer electronics, which can be worn on the body [9]. Body sensor network systems can be used for various purposes, including medical monitoring, memory enhancement, home automation, and access to medical records. People with cognitive impairments will benefit from wearable and implanted sensor networks, which will help detect early signs of illness and disease in at-risk people. The elderly those with long-term health conditions, and families where both parents work can benefit from these systems [10].

Aside from limiting patient mobility, the leads and wires used in most monitoring systems can cause skin problems or infections, exacerbating already difficult health conditions. As a result, sensor networks constitute a vast advance over traditional sensors [11]. An implanted sensor system can monitor physiological parameters without a wireless connection, and many biomedical applications use wireless platforms to collect physiological data [12]. Other authors built neural prosthetic devices while describing a wireless unrespectable bladder wearable healthcare method [13]. It's possible that in the future if a single device can set up the WSN with many nodes outside and within the patient's psyche, which can be predetermined or randomly selected, standard communication protocols for sensor networks are required to implement this vision [14]. The next generation of medical systems will use standardized hardware and software designs to accommodate interoperable devices. The wireless body area network (WBAN) can then use some of these devices to monitor health status in a new and innovative way [15].

Major societal shifts, technological advancements, and increased medical knowledge are all contributing causes to the rapid changes in healthcare and health delivery [16]. Countries worldwide deal with an aging population, the rising inclusion of the impaired, and an increase in chronic diseases [17]. There are new challenges for citizens, consumers, and healthcare professionals to improve health quality and affordability. Read more. "Health-conscious" people are willing to assume greater responsibility for their health. Patients are becoming "health consumers," expecting better nutrition, exercise, and sports management and a greater say in managing and maintaining their health and well-being [18]. For the first time, scientific developments, such as modules and nanostructures, offer many possibilities and solutions, including AI technologies, reduction, consumption of less power, and manufacturing techniques at low cost. Mobile and wireless telecommunications and human-computer interaction, navigation tools, and signal processing for management and information retrieval have been made recently [19].

Recent advances in science and technology have occurred fast and what was previously unimaginable is now a reality and an integral part of our daily lives. A sensor is a small electronic device that can observe various factors, such as object motion, light intensity, temperatures, and magnetic and seismic activity. Many of these sensors have built-in communication capabilities, allowing them to collect and store data for later processing if necessary. This type of communication can be carried out in both wired and wireless modes, allowing the sensors in a given system or network to grow in number [20]. Micro-electro-mechanical systems (MEMS)

technology has seen tremendous advances in recent years. MEAS has enabled the development of compact, low-power sensor nodes that might be utilized to create a wireless sensor network (WSN). WSNs can have sensor nodes that range from a few tens to hundreds in number. These sensors can monitor the web with little to no additional equipment [21].

Current healthcare systems, designed to respond to crises and manage illness, face new challenges: an aging population and rising healthcare costs. The number of people aged 65 to 84 in the United States is predicted to rise from 24 billion to roughly 70 million by 2025 when the eldest members of the Baby Boom generation retire. There will be 761 million years of age 65 in the world by 2025, up from 357 million in 1990, resulting from this global trend. In addition, the total cost of well-being care in the United States was \$1.8 billion in 2004, and about a 45 billion people in the country lacked health insurance. Another survey indicated that about a third of working-age Americans, most of whom have full-time jobs, provide unpaid care to an older parent or another family member. In less than a decade, healthcare costs are expected to account for about 20% of GDP, endangering the health and well-being economy [22]. According to these figures, healthcare needs a big change toward more scaled and affordable alternatives. Healthcare organizations need to be restructured to focus on wellness management rather than illness management, and early identification and prevention of disease emerge as a solution to these issues. One of the most important pieces of technology in moving toward more proactive and less expensive healthcare is continuous health monitoring via wearable systems. Using a wearable health monitoring system, individuals keep a close eye on their acquired real-time information on vital indicators to stay in top physical and mental shape. In a life-threatening situation, these devices can even notify medical personnel [23].

Additionally, patients can benefit from long-term surveillance as part of diagnosis treatment to obtain optimal treatment of a chronic condition or recovery from an acute event or surgical procedure. Long-term health monitoring makes it possible to record physiological signals throughout the day and night. After a myocardial infarction, for example, these alterations serve as an excellent recovery signal. As a further benefit, long-term monitoring can assist in ensuring compliance with treatment guidelines (such as a regular cardiovascular exercise regimen) or monitoring the effects of medication. In addition, monitors can aid patients recuperating from knee or hip surgery, stroke rehabilitation, and brain damage therapy, among other things [24]. The paper's main contribution is,

- ♣ This study studied wearable and implantable body monitoring systems that provide situational information and alarm systems for unusual circumstances.
- ♣ Discussing personal health care access, food production, and human resource quality has been improved using wireless sensor network-based biomedical clothing (PH-BC-WSN).
- ♣ To further enhance implantable and wearable body sensor networks to enhance living quality, this study assesses current research activity and presents concerns that must be addressed.
- ♣ We summarise the most recent advances in intelligent monitoring applications for wearable and implanted sensors. As sensor networks in healthcare grow environments, we explore the benefits gained and the pressing research questions addressed.

The following section is organised: Section 2: Analyzes and discusses the related work Section 3: Explains personal health biomedical clothing based on wireless sensor networks (PH-BC-WSS). Section 4: Compares the results with an existing method and discussion. Section 5: Conclusion.

2. Background study

Sensor communication has been implemented in numerous body area network solutions recently published. On-body WSN layer concerns are a major emphasis of some of these studies, while others are general. On-body sensor data is sent to the sink node without collisions utilising the system's slotted multipoint-to-point architecture. Beacon signals from a chosen sink node are used to synchronize transmission times. Several methods were used to get the information needed, including manually conducting a document query using key phrases, checking internet resources, and then reviewing the value of each returned part of the information. In each section, they'll go over the methods and techniques.

Albahri A. S et al. [25] discussed the academic literature by comprehensively analyzing recent developments in IoT-based telemedicine and healthcare (IoT-THA). Telemedicine classification taxonomy under the Internet of Things (IoT) was provided in this study, and studies in other domains related to that classification were reviewed. The obtained articles were sorted by the inclusion criteria that were specified. IoT-based healthcare applications have never been mapped in each context's process sequence and definition lifecycle. Researchers and practitioners can benefit from this study's findings since they offer further investigation guidance and relevant data. The ambiguity in IoT-based telemedicine trends was addressed in this study.

Cavaliere, L. P. L et al. [26] deliberated the in-depth assessment of the current techniques for countering COVID-19 is provided in this paper, along with an evaluation of the technologies employed and the limits of the technologies used. A further benefit of this assessment is that it compares various data types, including new technologies, diagnostic methods, and vaccine production platforms utilized in the COVID-19 pandemic. This paper identifies some of the difficulties and drawbacks encountered throughout the systematic review, which help researchers, devise more effective methods for containing and controlling the spread of COVID-19.

Sezer N. et al. [27] discussed the piezoelectric energy harvesting (PEH) presented in this work. They'll go over piezoelectric materials conversion principles and how piezoelectric generators function in more detail. Material advancements in piezoelectric energy harvesting materials based on natural piezoelectricity (PEHM-NP) are proposed. Peripheral applications in several domains such as transportation and structural engineering; airborne applications; water applications; smart systems; microfluidics; biomedical; wearable and implants; and tissue regeneration are discussed in this article. The piezoelectric energy technology's advances, limits, and possible enhancements are examined. This article summarises a wide range of piezoelectric materials for a clean power supply for wireless electronics.

Zhang, X. et al. [28] explored a personal health data center built on Hadoop's big-data (PHDC-HBD) platform, with data synchronization and an independent device helping to consolidate and analyze previously dispersed distributed data. The personalized health information system for stroke has been built to provide patients with individualized health management services and simplify the administration of patients by medical personnel using the capabilities of the Hadoop big data platform. This paper can improve conventional healthcare rehabilitation activities by designing a personalized health knowledge system that allows patients to understand their rehabilitation and treatment status at any time and from any location. All healthcare health data dispersed in impartial medical institutions is stored autonomously.

Salman, O. H et al. [29] deliberated that the E-triage and remote prioritization systems that use machine learning algorithms and sensors are subjected to a thorough assessment of all relevant studies in the field. E-triage and remote prioritization systems that use machine learning techniques in medical architecture (ERPS-MLT-MA) are examined in this paper. This study constructed a cross-taxonomy to uncover telemedicine categories related to machine learning algorithms. With this strategy, researchers can better understand how artificial intelligence and machine learning are being used to modernize healthcare systems. As a result, they've written this detailed analysis to highlight the benefits of current research in transdisciplinary AI, machine learning, and healthcare services projects.

Rezaee, K et al. [30] discussed the automated technique to diagnose PD from sEMG data. Traditional machine learning and deep transfer learning (DTLA-TML) models were utilized in this study. To produce the discriminative feature vectors, to begin, we used three deep pre-trained architectures: Alex Net, VGG-f, and CaffeNet, to stack the retrieved features. All deep structures are used to counteract over-fitting and enhance noise resistance, even though there are many-layered features from all three systems. The deep hybrid transfer learning-based PD classification technique has hit 99% in various analysis frameworks. Even though minimum processing was required in the feature building of sEMG signals for PD detection, the proposed model can compete with the current SVM-based pattern.

According to the survey, the current IoT-THA, PHDC-HBD, ERPS-MLT-MA, and DTLA-TML methodologies for diverse privacy and cybersecurity and an increased risk of malpractice lawsuits are flawed. Consequently, personal health biomedical clothing is based on wireless sensor networks (PH-BC-WSN). The study examined new training model techniques to address the concerns stated above.

3. Methodology

This section describes the personal health biomedical clothing based on wireless sensor networks (PH-BC-WSN). One by one, the research topics of the chosen articles were scrutinized, and reviewers aggregated and summarised similar concerns instead of writing them all individually. The structure and organization of the technique structure below provide an overview of their general characteristics.

3.1 Personal health biomedical clothing based on wireless sensor networks (PH-BC-WSN)

In the context of ambient intelligence, wireless sensor networks are frequently cited as a keystone technology. It is possible to get useful information from the environment using ultra-low-power sensor networks at a low cost. Sensor networks could be compared to the human body's sensory system in an intelligent environment. Sensor networks can share data collected with other sensor networks or data collection stations near the sensor nodes.

You can keep track of anything from ecosystems and energy generation to building maintenance and upkeep using amenity intelligence sensor networks. Therefore, every proposed application has its own set of needs and restrictions. The monitoring of people using wearable and implanted sensors will be covered as a special driver application to expand such technology in healthcare and address new health challenges given by nature. The current generation of biological sensors and actuators has endless potential for measuring, processing, communicating, and behaving intelligently. Diagnostics, ambulatory care, in-home care, and point-of-need care are possibilities for novel measurements and techniques. There is a high market need for components and nanotechnologies in portable biochips for blood analysis, clinical diagnostics, and non-invasive microsensors in the medical field. Integrating sensing, processing, actuating, and communicating into a single device is no longer "wishful thinking." Instead, it is becoming a reality. These technologies are being transformed into body sensor networks due to the rise of WSNs for medical applications.

For example, the biosensors can capture electrocardiography, myocardial infarction, and electro-dermal activity. For example, heart rate, movement, and even muscular activity can all be detected with accelerometers. Understanding the human body better requires a sensor system that constantly monitors a variety of health markers. The network consists of multiple networks and wireless devices to provide remote monitoring in various situations. When it comes to BC-WSNs, one of their primary uses is in healthcare settings, where the health of many patients is continually being monitored in real-time. WSN deployment in healthcare facilities necessitates wireless monitoring of multiple patients' vital signs simultaneously. One of the main functions of WBANs is to provide biosensor data and the capability to monitor health variables discretely and effectively, including body temperature, heart rate, and blood volume.

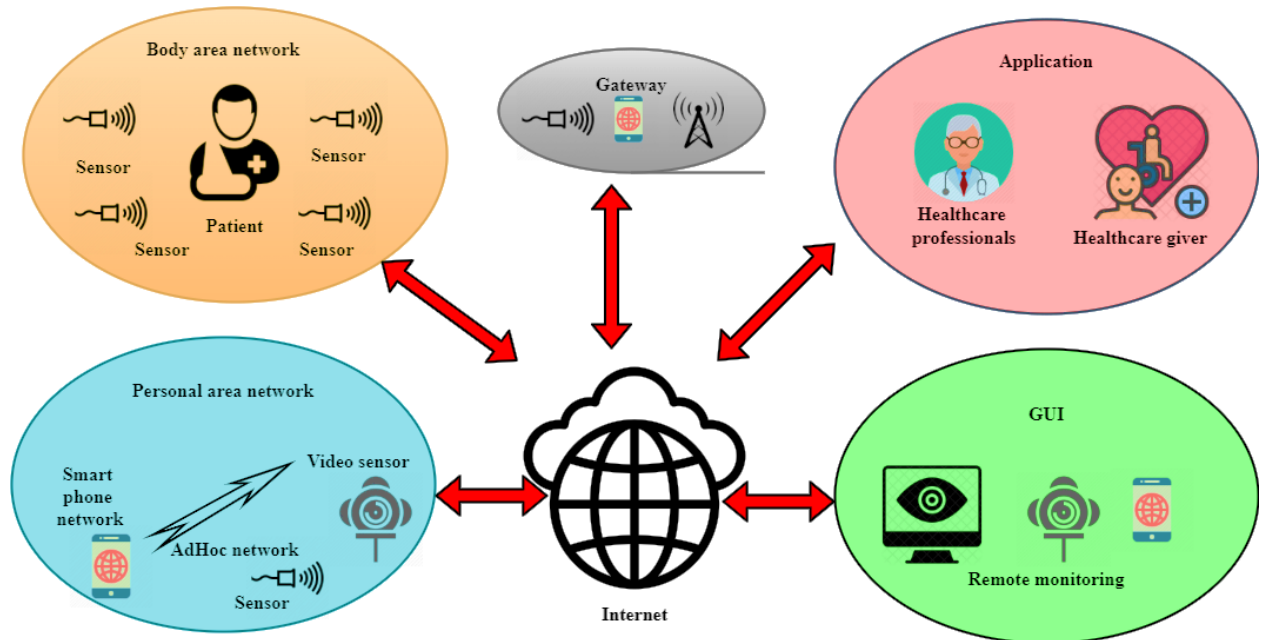


Figure 1: A basic healthcare WSN application scenario

In addition to the commercial items, there are other prototypes. When several apps are examined, it is found that they all share several characteristics. BANs and PANs are two types of sensor networks that have been proposed in the past. BANs consist of sensors carried by the patient, whereas PANs consist of sensors put in the environment (PAN). Gateway nodes connect these two to the backbone network. For healthcare practitioners or other providers, the patient's vital signs should monitor critical health data in real-time using GUI (Graphical User Interface). During an emergency, the application will generate alarm messages which, together with other health-related data, can be accessed on mobile devices such as laptops, PDAs, and smartphones. Pictured here is one possible use for a simple wireless sensor network, as shown in Figure 3. For example, four different types of persons have no power users of the system, such as developers and administrators, in a typical scenario: Children are young people who are unable to care for themselves, such as newborns, infants, and toddlers, and those who are older but still require continual supervision. It is the role of careers to provide support to those who need it most, including the elderly and chronically ill. Professional caregivers, such as doctors and other medical staff, monitor the health of the elderly and chronically sick and are prepared to respond quickly in an emergency. They are referred to as healthcare professionals.

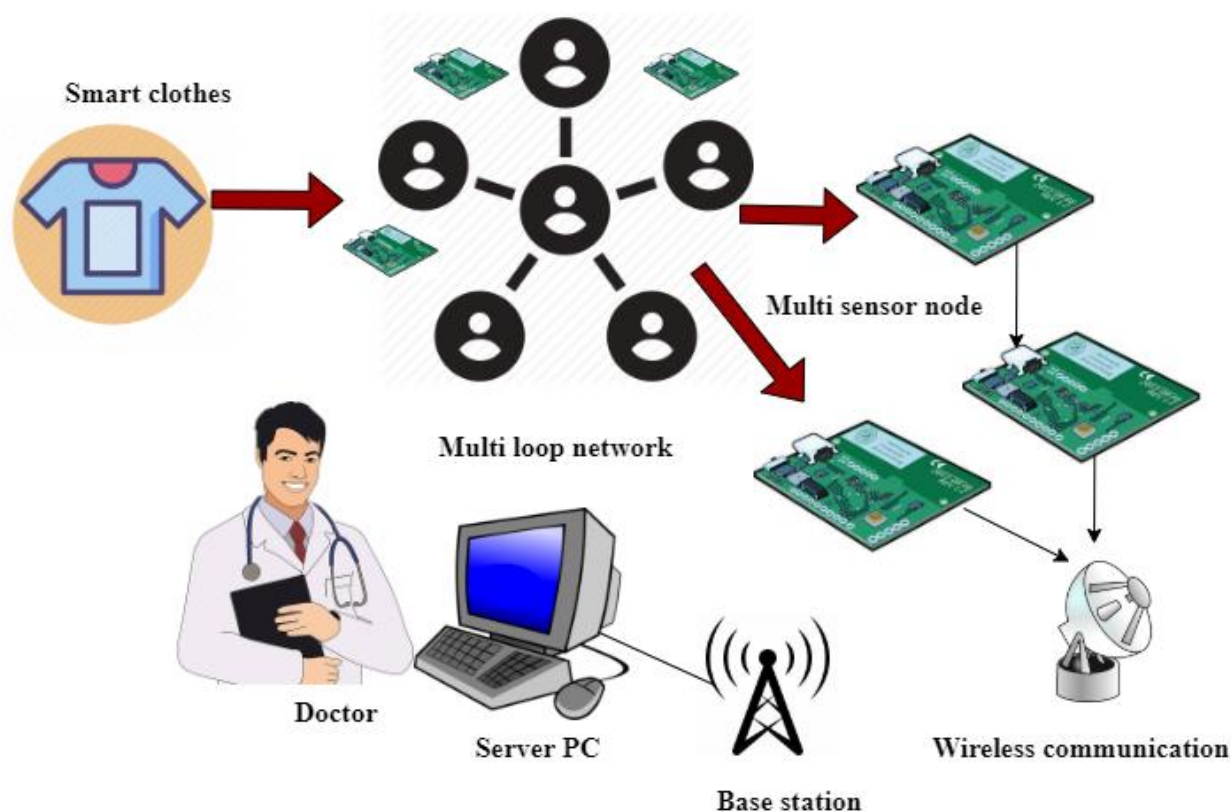
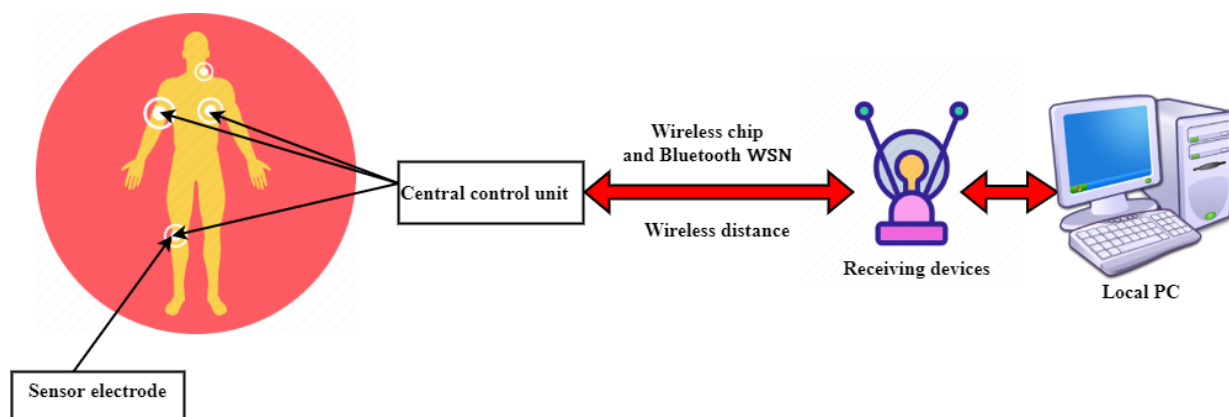
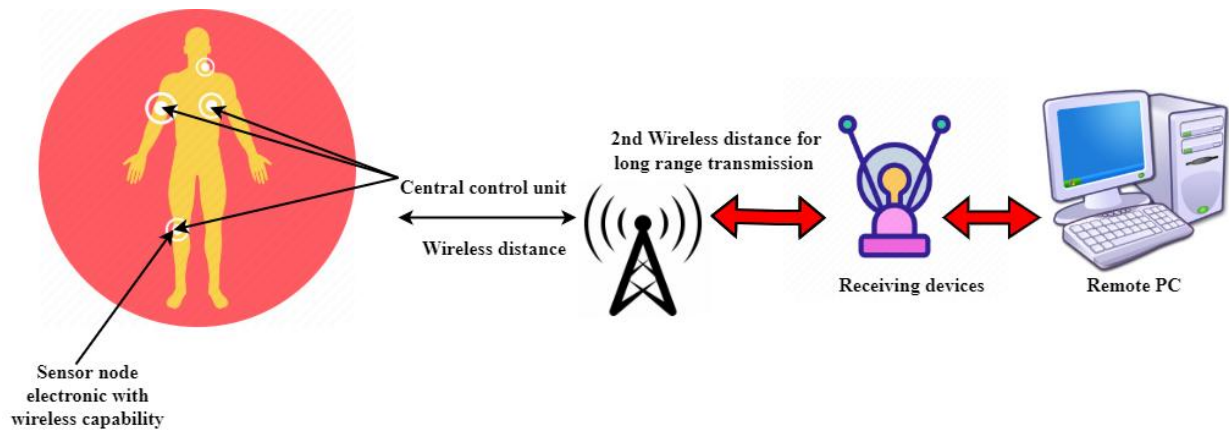


Figure 2: Wearable smart clothes are incorporated into the system's architecture

It is now possible to monitor the health of the elderly or the wearer of a smart health monitoring system. An EKG, especially having heart rate, heart rate, core temperature, and physiological signals (GSR) surveillance system termed the 'Smart Vest', has been created. There are three main components to this wearable smart shirt system: monitoring system components include a sensor network, a wireless device, and a server computer integrated into the node (Figure 2). A smart shirt was designed and created for real-time healthcare and active surveillance. The shirt's wearable sensors and conductors serve as electrodes to capture the wearer's physiological impulses. ECG and physical exercise data are sent to a server PC through an ad-hoc network for remote monitoring. Physiology data such as electrocardiography, pulse rates, heart rates, and skin temperatures can now be monitored via a wrist-worn wearable medical surveillance device.



(a) The present use of healthcare sensor networks in the healthcare sector



(b) Wireless body area networks used to target healthcare sensor networks

Figure 3: Signals from the body detected and transmitted utilizing the following typical WSN

Depending on the specific application, they might be single- or multi-point sensors. Multiple on-body sensors can be used to disperse a person's posture detection. Still, other uses, such as keeping track of patients (see Figure 3), require all sensors to route dynamic data routing to a sink node, which can then wirelessly transmit the data to an out-of-body server in Figure 3. Real-time and non-real-time data transactions are both possible. Offline processing and analysis of an athlete's physiological data are possible even while using patient monitoring programs, which require real-time packet routing. Sensors, management electronics, and wireless transceivers are components of a conventional wireless body area network. Compact, light, environmentally safe, and long-lasting power sources are required for these components and are vital to the entire system. With fewer nodes and less area covered than traditional WSNs, WBANs offer less chance for redundancy. A typical WBAN has between two and ten nodes, used in various ways. Scalability might lead to inefficiencies. If a BASN's goal is to keep its form aspect and resource utilization as small as possible, adding redundant sensors and paths to the network won't be an option. WBANs are structured hierarchically as well. Microprocessors must process large amounts of data continuously and naturally from their collected data. A hierarchical approach to data processing is important to take advantage of the imbalance of resources, preserve method competence, and confirm the volume of information, if essential.

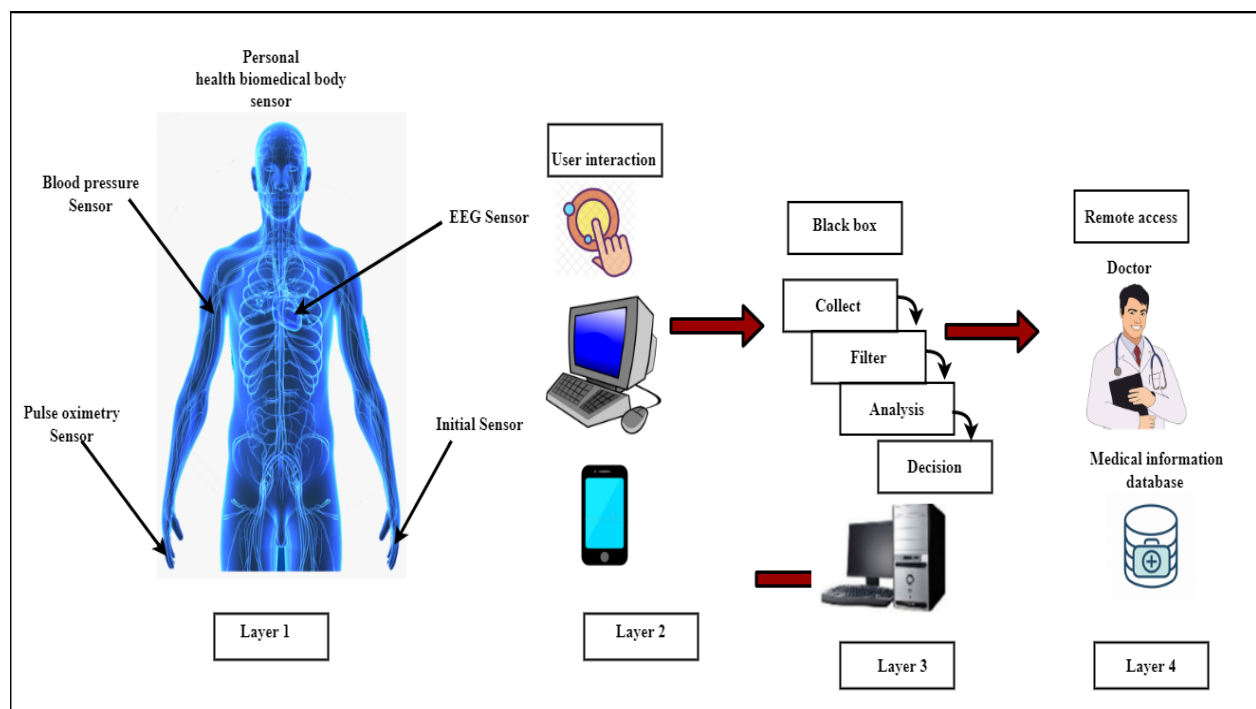


Figure 4: Healthcare systems often have four-layer architecture

Figure 4 depicts a typical healthcare system design for a home environment. Further explanations of this architecture are provided below. Layer1 is a personal health biomedical body sensor comprising several sensor nodes communicating over a wireless network. It is possible to sew sensors into clothing or have them implanted under the skin using this layer's sensor nodes, which are small enough to be applied to the body as patches (on-body sensors). Sensors of this type are constantly gathering and transmitting critical information. Nodes' capabilities and features reduce overall on-tag processing before sending data. Once analyzed, the data is either routed back down to the lower levels of the body or processed by a body coordinator. The body path loss (BPL), receive noise figure (RNF), and signal-to-noise ratio (SNR) all affect how much power a sensor node uses for an off-body transmission. For body path loss, antenna radiation patterns are extremely important. Devices affect RNF, and A unique RNF identifies each device, which is found in the datasheet. However, the overall quality of the communication channel affects SNR.

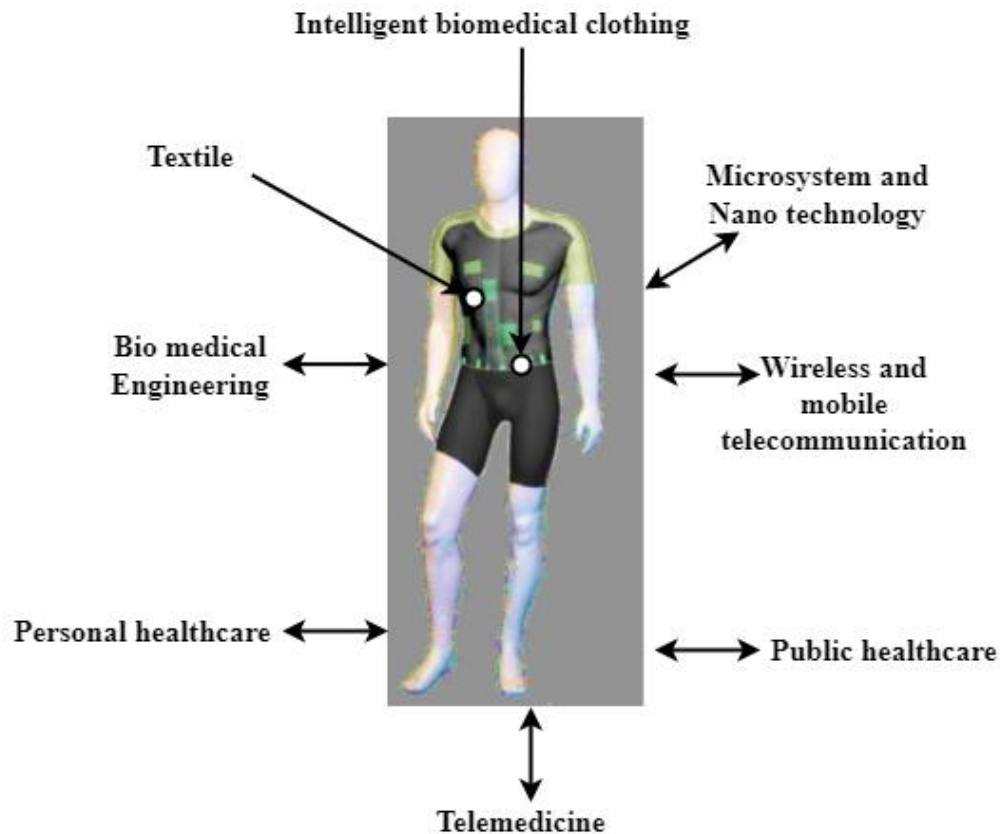


Figure 5: Develop smart biomedical clothes disciplines involved

As part of a multi-disciplinary effort, IBC is being developed by engineers and scientists from a wide range of fields, involving mobile and wireless telephony and nanotechnology as well as textiles and apparel (Figure 5). "Citizens' health clothes" are taking the place of "patients' medical apparel" in the conceptual hierarchy. A combination of currently available tools and sensors on common apparel could lead to medical gear that is disproportionately large. Pre-commercial prototypes, such as pajamas to identify Sudden Infant Death Syndrome³⁷ or products, already accomplish this today. The Life T-Shirt, for example, provides ambulatory respiratory monitoring and heart rate variability in real time. These garments are meant to be worn for medical reasons, and technology like infrared sensors and wireless networks should be incorporated. For this to happen, extensive study and experimentation would be required. A source of power is needed to integrate sensors and actuators. A person's clothing can act as a source, a processor, and a means of communication. Current generation prototypes like "medical aid" and "smartshirtTM³⁹."

Further validation work in the medical field is needed for the "VTAMN Project." a deeper dive into the issue of creating "e-textiles" is the goal of new fiber materials. There are three main components in today's world of information technology: Physiological and biomechanics signals are monitored as elements of a weaving framework. For IBC to succeed, the engagement and acceptance of healthcare providers are essential. Both the government and third-party payers are responsible for this debt. As soon as the project began, we considered all financial aspects of the services. Health experts and insurance firms are working together to establish new business models.

3.2 Personal health and illness management:

Personal health and illness management state of the art and future vision of biomedical clothing based on WSN. Compression reduces the quantity of data being transferred, and network efficiency and improved power results were achieved through reduction. Sensors such as ECG, EEG, SpO2, temperatures, and altimeter (fall detection) are the most commonly used in WSNs. Data compression technologies reduce the amount of ECG data because it consumes a lot of bandwidth. These technologies can be categorized into two major groups based on how effective or ineffective they are.

In contrast to loss compression techniques, lossless compression methods do not enable any information to be lost in the reconstructed signal. Because WSN nodes are battery-powered, lossless compression algorithms typically demand more computation and bandwidth, making them incompatible with WSNs. The ratio used to measure the effectiveness of compression is the difference between the number of bits needed to represent the original signal and the compressed signal. Calculating a mistake's root-mean-square difference (PRD) percentage is easy with Equation 1.

$$PRD = \sqrt{\sum_{j=1}^m [Y_{org}(j) - Y_{rec}(j)]^2 / \sum_{j=1}^m Y_{org}^2(j)} * 100 \quad (1)$$

Here are some examples of the reconstructed and the original data that are Y_{rec} and Y_{org} , respectively.

WSN monitoring provides statistics numerical simulations in the 430–611 MHz and UWB (3.1–10.6 GHz) bands. These statistical channel models compare the performance of several wireless technologies in WSNs in terms of path loss. Both a path loss model and a power delay profile (PDP) stochastic channel model were discussed in this paper. A vector network analyzer was used to calculate the path loss for each frequency band (Equation 2), and a transfer function among two body-worn antennas was obtained (VNA). The typical bandwidth of WSNs, excluding this band, is less than 10 Mbps, indicating that one symbol's transmission length is larger than 30 m.

$$M_{path}(e, g) = b(g) \cdot \log_{10} e + c(g) + o[eC] \quad (2)$$

For example, $M_{path}(e, g)$ Refers to the pathway cost in eC at the given distance and frequency range. The average route loss derived from the measured is used to determine coefficients $b(g)$ and $c(g)$. According to equation 3, PDP in the ultra-wideband model:

$$i(u) = \sum_{m=0}^{M-1} b_m \exp(k\varphi_m) \delta(u - u_m) \quad (3)$$

Equation 3 shows the pathway amplitude, entrance period, and stage of the M_{path} the path is denoted by b_m , u_m , and φ_m , respectively. $\delta(u)$ is the Dirac function, and m denotes the number of possible arrival pathways. It is possible to express the Cramér mathematically–Rao lower bound (CRLB) as the model-based received signal strength technique's positioning error.

$$\rho_{CRLB}^2 \geq \sum_{j=1}^o \frac{1}{e_j^2} / c(\sum_{j=1}^{o-1} \sum_{i=j+1}^o \sin^2(\varphi_j - \varphi_i) / e_j^2 e_i^2) \quad (4)$$

Equation 4 shows the $c = [10o/\rho_{CRLB}^2 \text{ in } 10]^2$. There are two ways to express this: ρ_{CRLB}^2 signifies a standard deviation of the noise, and o denotes path loss. The distance between the device in unknown locations $\sin^2(\varphi_j - \varphi_i)$ and $e_j^2 e_i^2$ the base stations at known locations (ρ_{CRLB}^2) is denoted base station's angle of an inclination concerning a reported position calculated using the following formula: $\sin \varphi = e^j - e^i$

The time of arrival placement method's CRLB is provided as follows:

$$\rho_{CRLB}^2 \geq 1/8\pi^2 \beta \alpha^2 \quad (5)$$

Equation 5 shows that β represents the receiver's signal-to-noise ratio and α the system's bandwidth. The positioning error lower bound is inversely proportional to the system bandwidth. Furthermore, the error signal is bandwidth-dependent due to a need to accurately measure the propagation time between transmitters and receivers in the face of unfavorable fading. As a result, the idea of ultra-wideband (UWB) systems for precise localisations was born.

personalization, and save costs by decreasing expensive unneeded lab tests. We investigated security, behaviour analysis, tracking, expensive, specificity, and precision as the most critical metrics. It was shown that understanding personal health biomedical clothing based on wireless sensor networks (PH-BC-WSN) has compared to earlier research.

Table 1: Comparisons of Performance metrics

Parameters	IoT-THA	PHDC-HBD	ERPS-MLT-MA	DTLA-TML	PH-BC-WSN
Security ratio (%)	45.7	55.67	65.6	47.7	92.11
Energy efficiency ratio (%)	55.6	50.5	65.4	67.8	89.9
Behaviour analysis ratio (%)	62.3	52.3	42.3	64.3	95.23
Tracking rate (%)	23.5	43.5	53.5	25.5	43.86
Specificity ratio (%)	58.5	38.5	68.5	57.5	93.51
Precision ratio (%)	58.5	38.5	68.5	57.5	96.8

An example of industry-wide comparability is seen in Table 1. The overall objectives can be better supported if the measurements used to calculate them fall within a certain range. Metrics are used to assess how well employees are performing and whether or not their goals have been met. It is possible to establish whether or not a method meets the needs of its users by analyzing metrics. When transforming client needs and operational successes into comparable data, metrics are essential. Both measures and what they signify are critical to making informed decisions. Put another way, metrics are necessary because they turn consumer and operational needs into data.

(i) Precision ratio (%) and Specificity ratio (%)

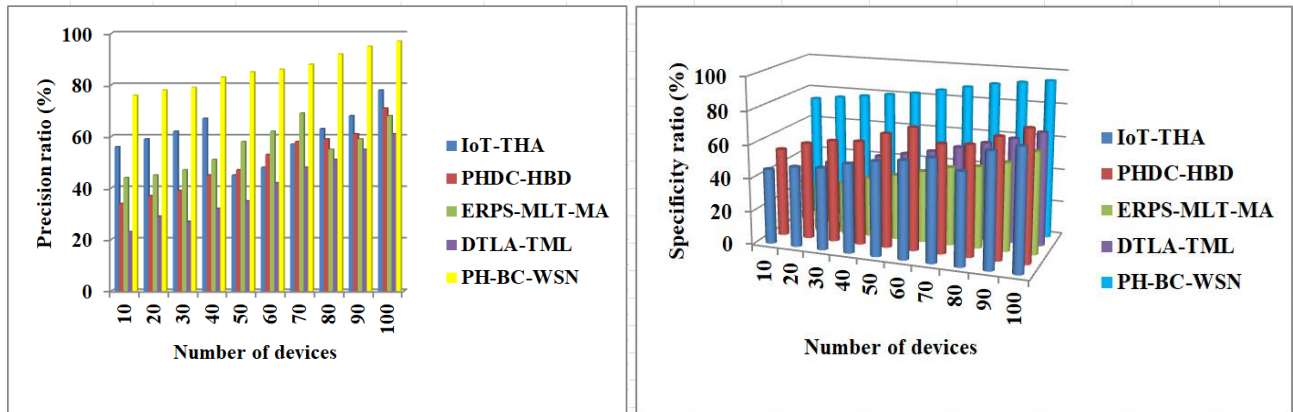


Figure 7(a) demonstrates that, compared to IoT-THA, PHDC-HBD, ERPS-MLT-MA, and DTLA-TML, which all consume precision values in the range of 96.8%, the PH-BC-WSN consumes the highest precision value (98.68%). Healthy persons have been monitored through an efficient training and analysis system. Wearable medical monitoring systems are developed using recall measures. WSN-enabled healthcare data and health monitoring-based machine learning algorithms are used in place of other classifiers that require less precision. With the PH-BC-WSN method, choosing critical health information is a breeze. The system includes PH-BC-WSN to improve the monitoring of general health.

Regarding security measures, future communication technologies are still in the early stages of development. The security and resilience of wireless networks require further study due to machine learning. A machine learning network and high performance are the most promising options for dealing with strength training data. PH-BC-WSN experimental study ensures up to 98.7% precision in testing the system's effectiveness. Figure

7(b) shows that the most critical factor in assessing physical well-being is the specificity ratio %. PH-BC-WSN methods are used to implement the WSN strategy. PH-BC-WSN enhanced the IoT-THA, PHDC-HBD, ERPS-MLT-MA, and DTLA-TML even though a comparison shows higher performance. Because it uses sequential computational approaches, the proposed solution outperforms standard algorithms in terms of accuracy over a greater number of repetitions. However, it poses several important challenges, including the cost of computation, the complexity of the method, and the declining gradient. It is expected that these issues will be addressed shortly. The healthcare industry has seen a considerable transition due to the PH-BC-WSN. Real-time analytics have necessitated greater responsiveness and accuracy in using health monitoring systems. These delays, however, result from poor network connections and the unpredictable nature of sensor data. A massive amount of data is gathered from pertinent sensors. After that, the information is sorted and archived. They used a machine learning system to classify and diagnose illnesses.

(ii) **Energy efficiency ratio (%) Security ratio (%)**

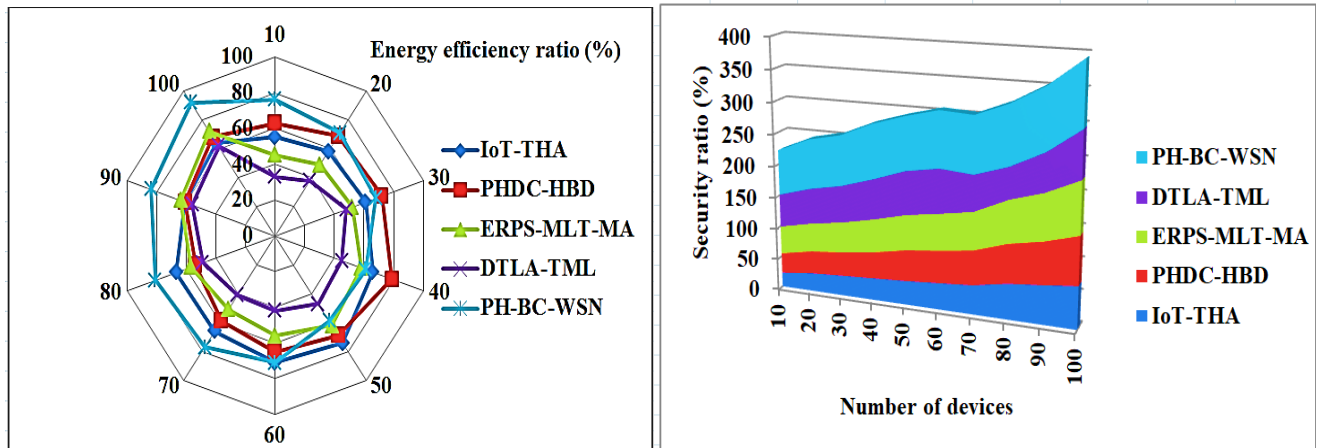


Figure 8 (a) shows the energy efficiency ratio (%). Since batteries power wireless sensor networks, they have high energy consumption. Nodes with power dissipation < 100 microwatts can operate longer on energy salvaged from the environment. Energy savings can be achieved by various network architecture trade-offs, including those between communication and sensor processors, collaborative protocols, and hierarchical networks. Battery life can be extended once the sensed data has been built using dynamic smart power techniques. For various reasons, decreasing overall power consumption is critical in WSN systems. Sensors' weight and size have mostly dictated the batteries they use. The larger the storm, the greater it is capacity. Because of this, WSN sensor nodes are particularly energy-efficient. Thus fewer batteries are used. Physiological sensors made smaller by using smaller batteries will improve user comfort. Second, long battery life is desirable since frequent battery replacements on various sensors impede user adoption. WSN operational costs were reduced as a result of increased battery life.

Figure 8(b) shows the PH-BC-WSN security ratio for a medical device. Because of the extensive implementation of the WSN algorithm, real-time monitoring has taken on new significance. Mishandling patient security and treatment procedures is increasingly commonplace in healthcare networks due to increased attack susceptibility. a PH-BC-WSN system must be built with numerous safeguards. All medical and sensor devices in a WSN network are protected by various security measures, including identity authentication and low latency. These measures include authorization management, allowing the listing of devices, and password protection. Wi-Fi, Wireless, Bluetooth, and other security mechanisms are included in secure aggregation methods and verification procedures. This security is used to generate conclusions about the health of patients. PH-BC-WSN relies heavily on health security and access because of the huge amounts of data gathered and processed from a WSN of sources. Sharing these data with healthcare professionals over the server facilitates medical security actions if necessary. Users, patients, and the communication module all work together to ensure a safe and reliable transfer of information. PH-BC-WSN systems are typically used to monitor medical caretakers on a platform that enables manipulation, visualization, and health security.

(iii) Behaviour analysis ratio (%)

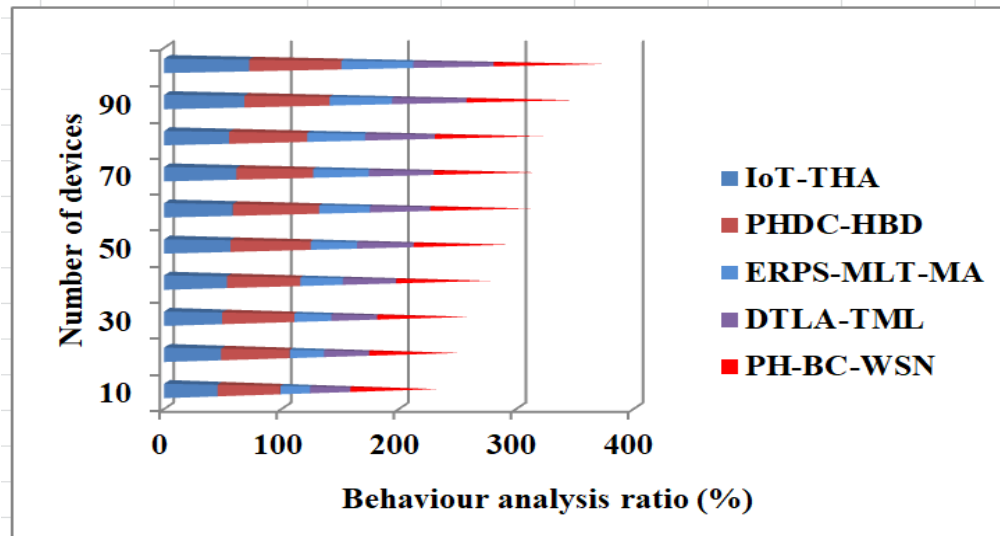


Figure 9: Behavior analysis ratio (%)

Figure 9 demonstrates that all activities done to patients who believe they are healthy to prevent or detect illness in an asymptomatic condition are referred to as preventive health behaviour analysis. The use of PH-BC-WSN to promote healthy behaviours, wellness activities, and preventative treatments has increased significantly during the past decade. Health-related behaviour includes preventing disease, maintaining health, improving health, and regaining health. To improve, restore, or preserve their health PH-BC-WSN is used. PH-BC-WSN accomplish good changes in health behaviour, understanding patients and encouraging them to change. Health behaviour theories and models have been established for this goal. An approach is composed of several interrelated concepts, definitions, and propositions that form a logical context to predict a collection of events or circumstances.

Table 2: Tracking rate (%)

Number of devices	Tracking rate (%)				
	IoT-THA	PHDC-HBD	ERPS-MLT-MA	DTLA-TML	PH-BC-WSN
10	41.8	65.9	77.8	84.2	90.6
20	42.4	66.7	77.7	84.3	91.7
30	49.0	64.6	77.4	85.6	92.3
40	48.0	64.9	78.5	86.9	93.3
50	46.8	66.3	78.7	86.5	93.7
60	47.8	72.2	79.2	87.4	94.6
70	47.7	74.2	80.3	88.6	95.7
80	45.5	63.0	81.6	89.2	95.9
90	55.5	66.1	82.8	90.5	96.3
100	55.1	64.1	83.1	90.9	96.8

Table 2 shows the tracking ratio (%). In hospitals and healthcare facilities, sensor devices and their use are prominently displayed in the medical treatment order for patients. ECG and EKG are not new technologies; they have evolved with technological advancements and medical system requirements. PH-BC-WSN is now employed in hospitals to track patients' health in real time, diagnose their conditions, and provide appropriate therapy. Enhancements to tracking and real-time medical information, confined to permitted areas, have been made as part of this project. Bounded telemonitoring systems are meant to collect real-time medical information from patients inside the medical center's boundaries, both within and outside the medical wards. Tracking the medical problems of patients in each step (or state) of the disaster was made possible by using tags, which were cost-effective because they were attached to a patient's body at any given time. The system's performance is then evaluated using experimental analysis based on PH-BC-WSN, ensuring 98.7% accuracy.

5. Conclusion

Finally, PH-BC-WSNs can be employed in various medical settings, as demonstrated in this research. This work examines PH-BC-WSNs and the significant challenges and unresolved research concerns surrounding implantable sensors. Smaller and more multifunctional sensor nodes made possible by nanotechnology enable these new reduced body networks to become as commonplace as clothing. Researchers have been looking for ways to improve healthcare for seniors, the physically disabled, and children by incorporating new technology into existing services. In this research, we looked at real-world instances of how wireless sensor technologies might enhance people's lifetime excellence and considerations to bear in mind as these systems are designed. Wireless sensor networks are widespread, and We have investigated network data systems. Wireless sensor networks can enable numerous sensors' low-cost, energy-efficient, ad hoc installation for better medical care. With the Internet of Things, healthcare and medical asset monitoring systems can be developed more effectively. There was extensive discussion of medical data eavesdropping, manipulation, fabrication of alarms, denial of service, movement and activity monitoring of users, physical manipulation with devices, and jamming assaults. Flexibility, clean energy, and safety are some of the contemporary technology problems. A comprehensive analysis of the multiple advantages and disadvantages is included. However, with so many benefits, body sensor networks face several significant challenges and unresolved research difficulties that must be addressed. The PH-BC-WSN sensors can be added to the current setup to extend this work in the future.

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