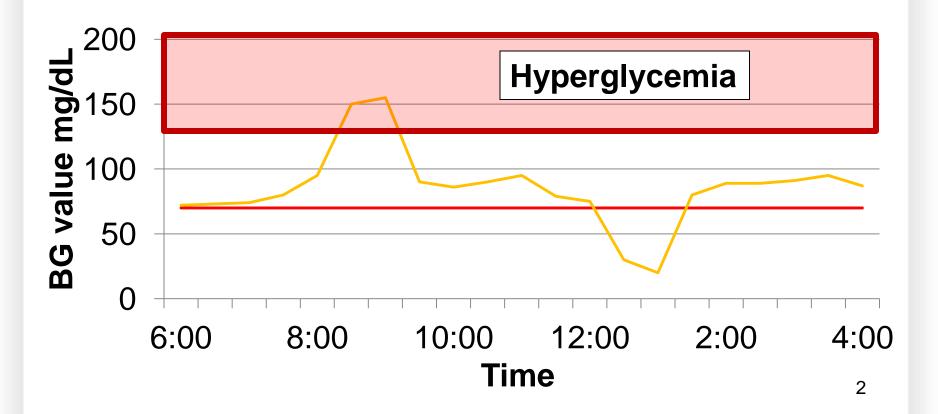
Using Bowel Sounds to Create a Forensically-aware Insulin Pump System

Nathan Henry

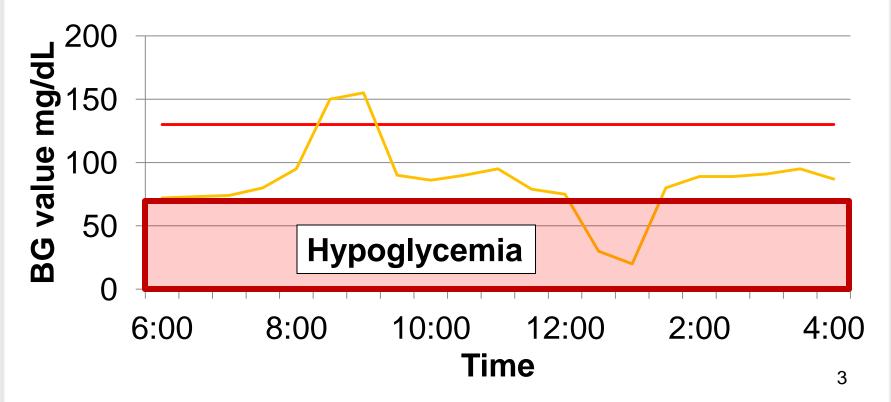
Nathanael Paul Nicole McFarlane

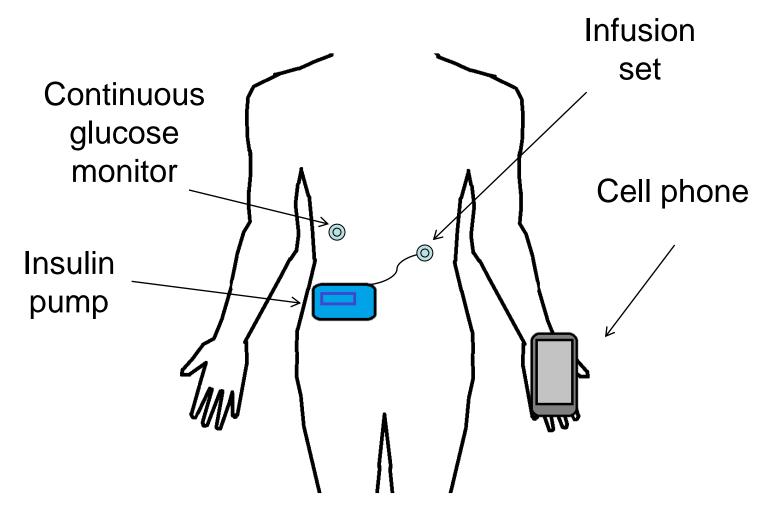
Diabetes Hyperglycemia



Diabetes

- Hyperglycemia
- Hypoglycemia
- Negative patient event





Previous work

- Encrypted communications [Li 2012, Sorber 2012]
- Bolus anomaly detection [Hei 2013]
- Communication jamming [Gollakota 2011]

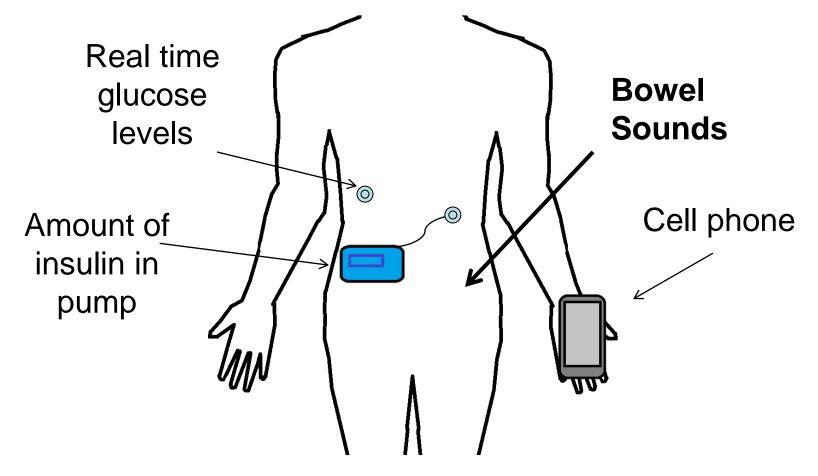
All require an operational change

Forensic Goals

Given a hypoglycemic event, determine:

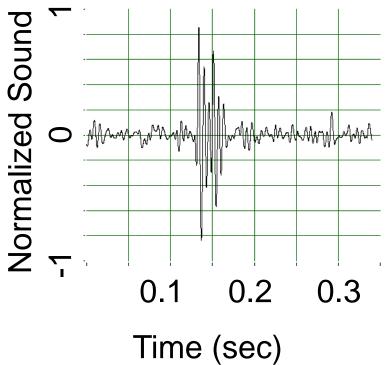
1.what steps led to hypoglycemia

- 2.the cause of the hypoglycemia
- 3.what type of negative patient event
 - whether safety or security event



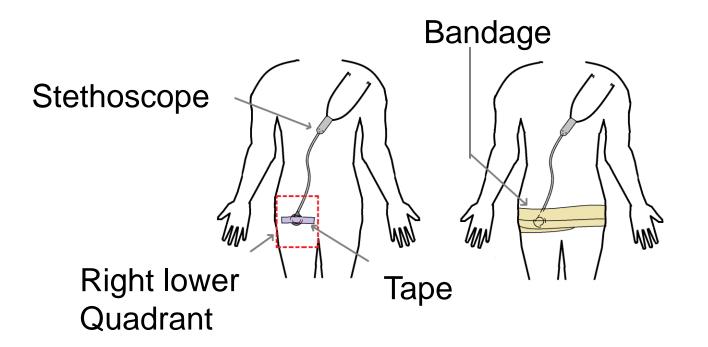
Bowel Sounds

- Amount of Bowel sounds increase after a meal [Craine 1999]
- This increase can indicate a meal



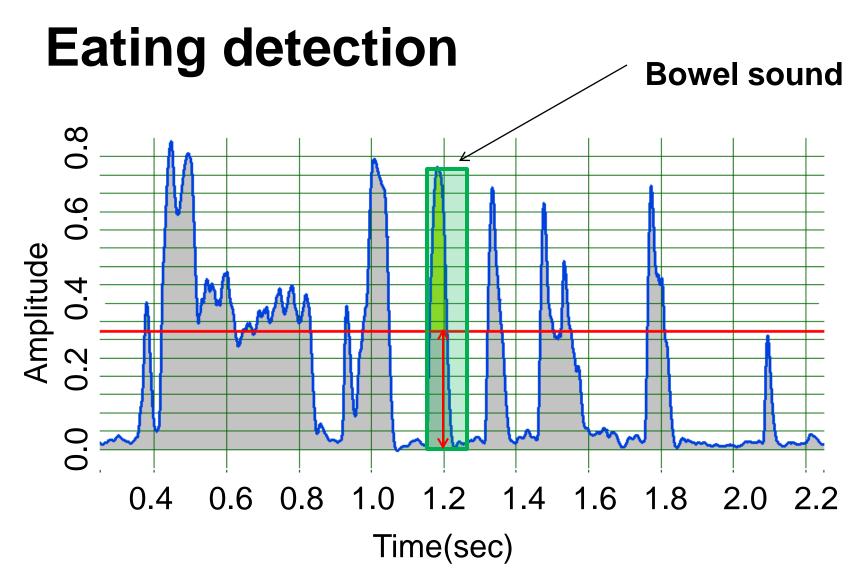
Experiment setup

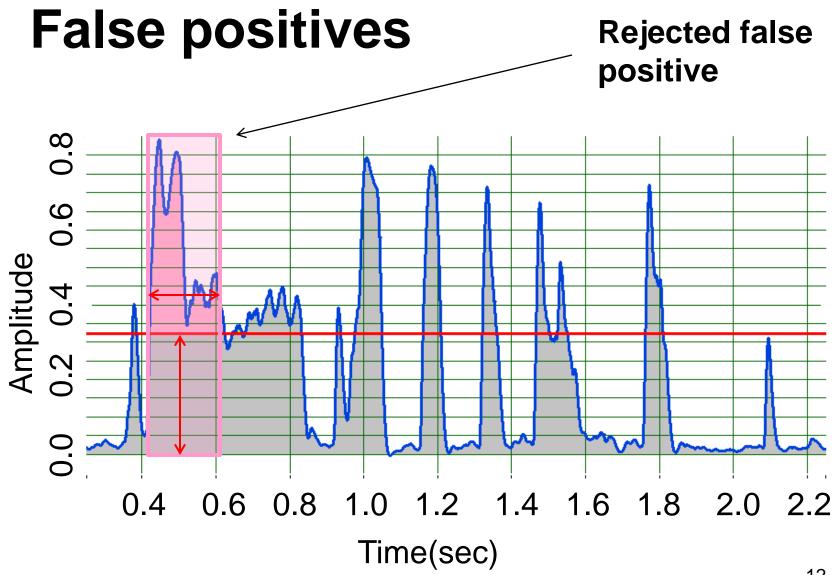
- Electronic stethoscope records bowel sounds
- Signal **processing** to find eating instances

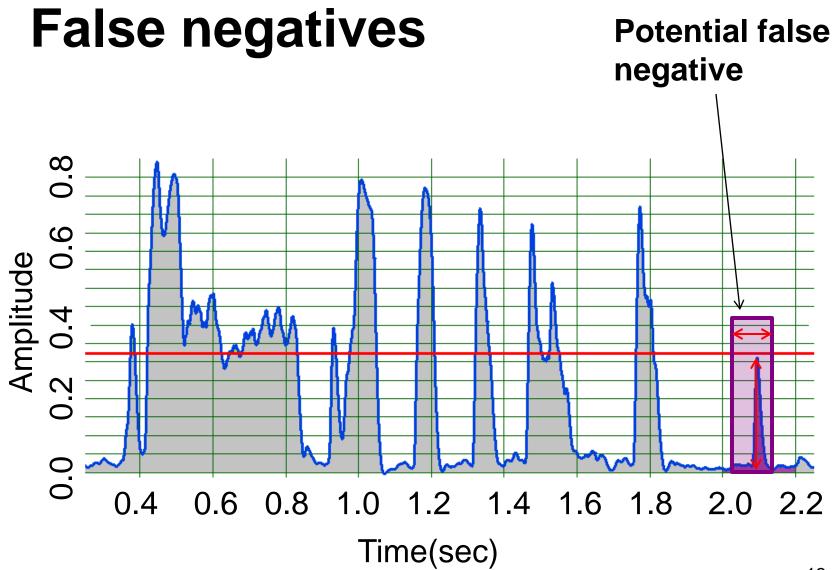


Experiment setup (cont'd)

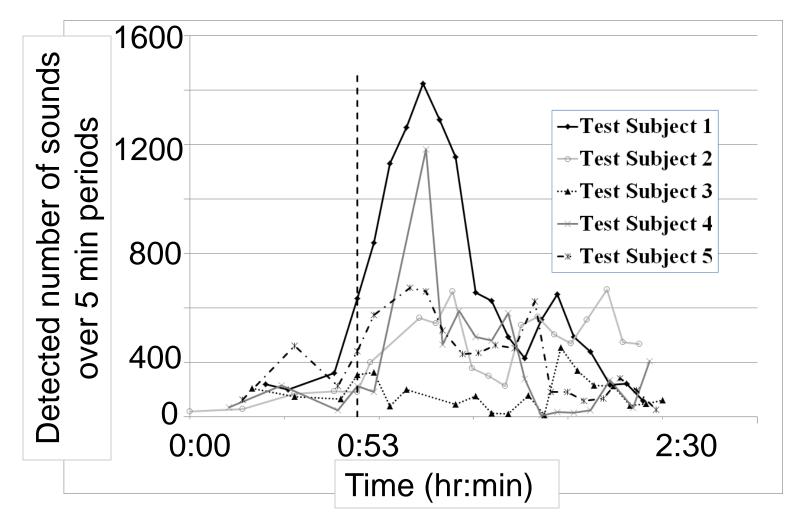
- 5 subjects gave consent and were tested
- Bowel sounds were recorded before, during, and after meal
- Subjects fasted before experiment (no food for at least 2 hours)





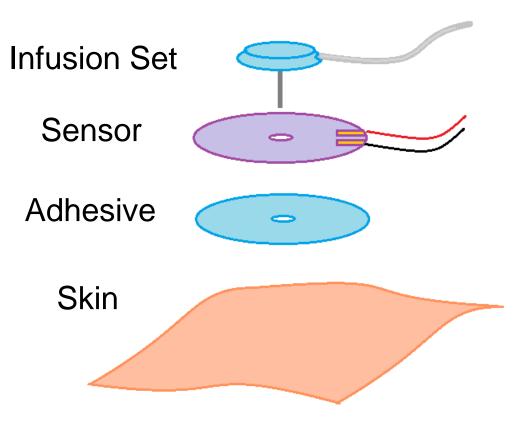


Test results

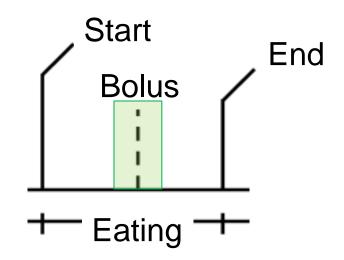




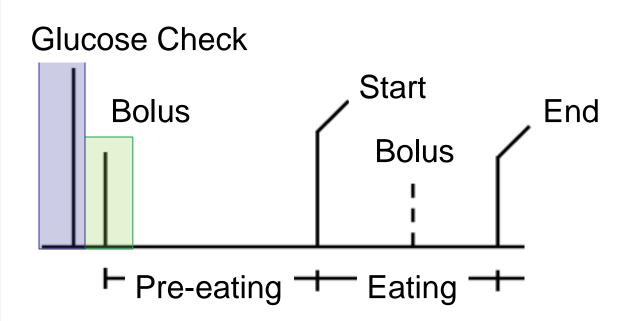
Integration



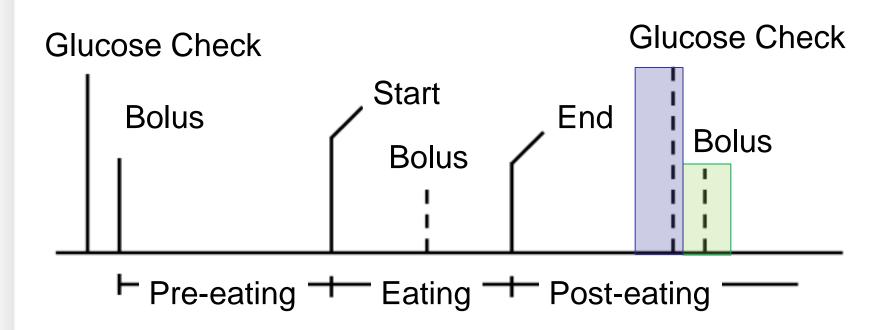
Forensic application.



Forensic application.

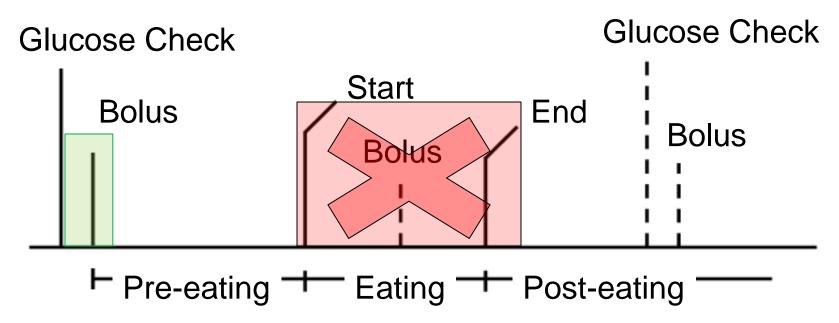


Forensic application.



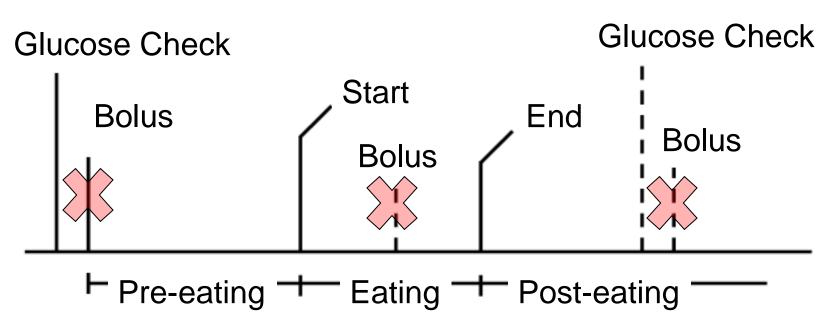
Rule 1: A bolus without a meal

An insulin bolus without a corresponding meal → possible **Hypoglycemia**



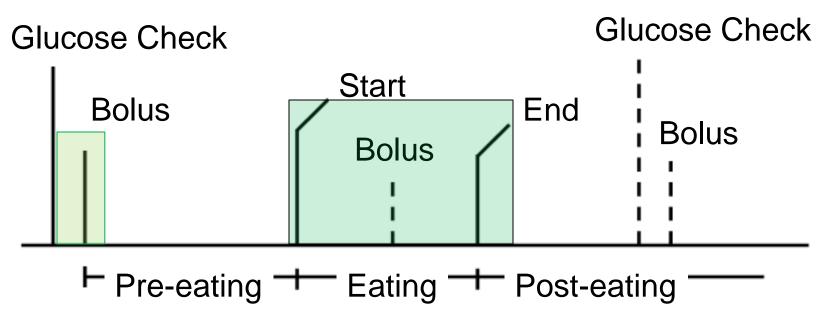
Rule 2: Eating without a bolus

If a bolus is not detected in conjunction with a meal \rightarrow possible **Hyperglycemia**



Rule 3: Normal eating

- Bolus appropriately taken with food
- Forensic investigator can **ignore** this case



Contributions

- Proof-of-concept forensics approach for electronic diabetes therapy system
- Bolus/eating forensic rules
- Seamless integration with current and future insulin pump systems/artificial pancreas

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