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A Joint Resource-Aware and Medical Lata Security Framework for Wearable Healthcare Systems

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Abstract

Internet of Medical Things (IoMTs) is a building block for nodern healthcare having enormously stringent resource constraints thus lightweight health data security and privacy are crucial requirements. A critical issue in implementing security for the streaming health model is to offer data privacy and validation of a patient's information over networking environment in a source efficient manner. Therefore, we developed a biometric-based security framework for resource-constrained wearable health monitoring systems by extracting heartbeats from ECG signals. It is an is readical applications. Moreover, resource optimization model based on utility function is proposed for comprising lab environment and publicly available database i-e-physionet. The experimental results is and that proposed framework requires less processing time and energy consumption (0.0068ms for d. 1.5 microJoule/Byte) then Alarm-net (0.0128ms and 0.351 microJoule/Byte) and BSN-care (C.01.5 ms and 0.53 microJoule/Byte). Moreover, from the results, it is also observed that biometric key generation mechanism not only provide random and unique keys but it also offer a trade-off between security and resource optimization. Thus, it can be concluded that the proposed framework has got both social indication.

Keywords: Healthcare, Data Security, Privacy, Resource-Efficient, Internet of Medical Things

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1. Introduction

The Internet of Things (IoT) is a transformative and evolving paradigm which has get a vention in several application domains including smart homes, smart environment, personal, and repote lealthcare among others [1-5]. In IoT, there are various intelligent nodes which can be interconnected and converted with each other for information visualization and acquisition, without the requirement for human . volvement [6]. The IoT has been expressed as a technology development that would transform life, tr.de, and the economy of the world at large [7]. One of the essential domains that will be intensely influenced by the IoT is health monitoring applications [8]. The primary usage of the IoT in the medical area is rown as the Internet of Medical Things (IoMT) [9][10]. The IoMT is a system of associated medical nodes and applications whose aim is to offer better and more healthcare services. The IoMT is receiving ttention by the occurrence of state-of-the-art products including magnetic resonance imaging (MPI), in 2, ultrasound devices, and wearable devices which will facilitate the streamlining of health procedures i ... using tele-tracking of patients and disease diagnosis among others. In IoMT, wireless medium is ... d to ransfer medical information between entities, so there is a possibility that unauthorized person can avesuop on the communication using several attacks. Therefore, security is paramount for IoMT based healthc. e systems [11-13]. It is stated by Health Insurance Portability and Accountability Act (HIPAA) that recur communication must be brought into the network so valuable information should not be acquired v illegal users[14]. Moreover, IoMT is a collection of several resource-constrained devices hence it is highly gnificant to deliver a balance between secure communication and resource utilization.



1. g.1. Architecture of Internet of Medical Things based Remote Healthcare Systems

In general, the IoMT structure is constituted of three layers (perception, network, and ap⁻¹ ration) [9]. The main responsibility of the perception layer is to accumulate medical information with several a vices. The network layer is comprised of wired/wireless system and middleware, which processes *e* at communicates the input acquired by the perception layer provisioned by technical stages. Well-designed ransportation rules not only increase transmission proficiency and decrease energy intake but also guarantee data confidentiality and security. The application layer incorporates the health data resources to offer medical tacilities and fulfill the final individual's needs, due to the real circumstances of the target residents and the sorvice requirement. The data privacy and security of patient associated data are two essential conceptions of 10M r. In the context of patient's information safety and privacy, it needs to be acquired, accumulated and security to the authorized person [15]. More reasonable protection strategies could be reveloped according to different purposes and requirements. The widespread use of IoMT devices provide a better guarantee for people's health [16]; however, it also puts much pressure on information security and privacy protection. How to ensure the security of such data has always been the focus of academic research.

The development of remote healthcare framework based on IoMT is may y challenges, such as power management, secure node-node communication, timely delivery of a construction and device's movement sustenance among others. Moreover, by the real-time implementation of IoMT with ut bearing in mind patient's data confidentiality and security will allow unauthorized people to exceeded people to exceede a more device in the privacy of the real-time implementation of the privacy of the real-time implementation during its transmission between wireless devices. As a result, the privacy of the privacy of the social network, it can be utilized in several wicked ways such as:

a) Some treatments may be costly, in case fraudsters <u>information</u> on physician services, can damage a victim's financial well-being.

b) Attackers, who are not ill and don't require tre ment, an obtain a reasonable income ordering some expensive drugs by using medical cardholder so that the ca. eet resale medicines.

c) If criminals manage to get in touch with a <u>toyious</u> clinic, an insurance company may be billed for services that have never been rendered, and the money will be distributed among clinic and fraudsters.

Since, there are many ways that attackers can compromise the source data and use it for not legal purposes. Therefore, this study aims to develop a form resource-aware security model for IoMT based remote healthcare. In the proposed model, medical oformation will be encrypted before transmitting to its destination node in order to guarantee privacy and security M reover, bio-key generation mechanism developed in this study will make it difficult for hacker to i se the previous session information to decrypt current session message. The proposed framework on the decified between security and resource consumption for the medical data transmission in the host stals. This research will not only reduce the economic cost in the medical market across the globe with economic and healthcare facilities but also guarantee the security of real-time health data transmission between patients and doctors. Thus, this study has got both social and economic significance.

The rest of the paper is org. iz d as follows. In Section 2, a literature review is discussed. The Section 3 and Section 4 include methods and materials, experimental results and discussion, respectively. Finally, the paper is concluded in Sect on 5

2. Literature Review

In the modern era, MT *i* widely utilized for tele-healthcare [17][18]. In, IoMT, the medical cloud can distribute data to several nodes via wireless medium [19]. Though IoMTs, are the best method of healthcare, but medical IoT levices curry highly critical patient's data, so it is mandatory to offer secure communication in IoMT [20][21]. Authors in [22], developed lightweight identity-based cryptography (IBE-Lite) method, it

claims to offer security and confidentiality with accessibility. However, their method rec' sizes numerous safety and privacy concerns as well as efficiency problems. Wood et al. [23] have developed A., "m-net for smart home automation based on query protocol. This approach was not only susceptible to the adversarial privacy attacks, which may reveal the locality of the inhabitant. On the other hand, it also onsumes a lot of resources, hence requires more execution time for applying security. The BSN-care method [24], provides modern healthcare technique for health monitoring. Due to the utilization of external K. 's, it requires more cycles to generate random keys. In the above discussed methods for IoMT, external K. 's, for securing medical data are used. It is well-known fact that different humans have distinct biolog' al *e* tivities and features, so they may be applied for securing IoMT. Hence, it will not be easy for an assault of to attack the medical information. Consequently, physiological based security is a more reliable way to ansure communication in healthcare systems since it offers fast action and resources efficient safety soli ions than conventional methods. In this research, we are focusing on developing ECG based security on the also increases secret key strength so an attacker should not compromise either key or medical information.



i. 2. Jecurity and Privacy Risks for Tele-Healthcare Systems

In recent studies, sever 1 re earchers have revealed that ECG based secret keys are vital for securing medical applications $[24-5^{-1}]$, hou the chief concern of resource-constrained IoMT devices is that it ought to be functioning under evere distributes. Time-domain features of ECG i-e inter-pulse intervals (IPIs) are recently used to offer a trade-off between resource efficient and secure communication in healthcare systems. One of the critical factors to so art data transmission between IoMT devices is time synchronization. Owing to the construction f, the circulation system of individuals, QRS-complex necessities recognition of a beat. Firstly, device that collects ECG sends the synchronization indicator, which specifies that biometric trait is generated, it is estimated to assure that the IPIs collected by other devices. If synchronization pointer generated by means of the does not include adequate data then the communication between nodes will not

be started [31-35]. Hence, the Hamming distance can be useful to quantity distinctiveness $\frac{1}{2}$ ween IPI based secret keys; this factor would be useful to clarify that these keys can be used for security aspects $\frac{1}{2}$ MT.

In modern health monitoring systems, it is noteworthy for providing a trade-of ι tween protected communication and energy-efficiency due to several restrictions of IoMT systems. The main motivation of this study is related to provide stability in IoMT by presenting effective bio-key based seculity mechanism for secure data transmission. Consequently, this study developed patient-centered information security framework using IPIs for IoMT based healthcare applications which can acquire a more *lats* from each heartbeat of individuals. The main goal of our study is to present secure and low power IoM $\frac{1}{2}$ system for the medical data transmission in the hospitals, due to the emerging big data notion, reliable and safe $\frac{1}{2}$ thcare is very vital.

3. Applications of Wearable Healthcare Systems

There are various applications of the remote healthcare, but few of them a consistence below:

3.1. Adaptive-care Provisioning

Machine learning and artificial intelligence based healthcare applications are playing the key role to revolutionize the healthcare domain with more focus on the automatic and adaptive care provisioning. Generally, numerous statistical and intelligent systems are developed to present linear/ non-linear models for neural networks [36]. The medical data obtained from these systems are vital and its secure transmission for remote healthcare in also mandatory.

3.2. Remote Health Monitoring

The mobile-based patient's health monitoring has the good connection and features sharing capability with the state of the art wireless technologies for the discrement at continuous event management [37]. There are various platforms in the medical domain such as operation theatres, military operations, fields, and farms, where this application is suitable.

3.3. Stroke Restoration

Several patients can use the feature of video conferencing for sending the medical information to the remote physicians; it will increase the viability, offectiveness, and level of recognition of telerehabilitation for stroke individuals [38].

3.4. Wireless Capsule Endoscopy

This is a subset of the Tele-n only oring and Tele-healthcare for the patient monitoring in the medical market. For the healthcare system, it is important to transfer all the information such as physiological signals, video and image signals. Wireless apsule endoscopy is one of the paradigm shift in the medical market to facilitate the physicians and patients by providing the state of the art facilities. The major point of this application is the high and clear visibility with a bright and big picture of the critical scene. High-quality camera sensors are the signal first to be enhanced and amended for these technologies [39].

3.5. Emergency Health ... e

The fundamental 1 urpose c^{c} this section is to facilitate the patients and medical doctors by providing the efficient treatment of c^{c} card ovascular diseases especially, the heart attack of the emergency patients [40]. For this reason, mere is a need for intelligent sensor-based devices to manage the overall process and mechanism of the person 1 medical healthcare. For example, several physicians monitor the old age patients remotely at their to pectic e homes via the emerging technology.

3.6. Healthcare Management

Tele-presence is the key factor in the neuro-computing healthcare system management in $\frac{1}{2}$ medical market. Besides, there are several components for facilitating the physicians and proven in the hospital theatres and medical centers to give the medications and precautions to the emergency (stier is [41]).

3.7. Smart Homes

An efficient and smart home automation system for controlling medical equipment's or wearable/ implantable devices distantly using smartphone plays a vital role in modern heal bcar. [42]. This is the critical role player application because most of the human bodies symptoms are covered where clear understanding of the disease, then precautions are suggested with specified dosages to get r train from it. These days human body feature based sensor deployment methods are getting too much attention due to the coverage of the overall body characteristics and health monitoring.

3.8. Clinical Decision Support Systems

The gap between superlative indication from organized trials and a 'val world proof in healthcare research has encouraged the global organizations to contemplate the use of original redical information to enhance the understanding securely as well as efficiently [43]. Therefore, a 'amor toring will renovate wound care research and increase the standards of healthcare while assisting a 'tors to provide a better life to patients.

3.9. Telemedicine Systems

Telemedicine is one of the critical parameters for the balthcare monitoring in the various departments of the medical market. There are significant benefits of the system advancement for the healthcare. To efficiently and effectively manage the entire healthcare environment it is vital to maintain the Telemedicine and make it more autonomous and intellectual. In this application, the point Low Energy (BLE) is the key component to handle and maintain the health issues. Since, PLE has the flexible and tight integration with the 5G technologies and has changed the size of the medic.¹ sensor nodes entirely, due to these advantages it has caught the attention of both medical world and the health departments [44].

3.10. Monitoring of Old-age Patients

This application focuses on the caregiving 'aci' dies of the old age and elderly patients in the near and remote location. This is the most emers .ng ' ealthcare domain in every corner of the world, and most of the developing countries are focusing at the 'rev poir's to entertain the critical aspects of the medical health corner [45].

4. Security and Privacy Requirements it. IoMT based Healthcare

In IoMT, destroying the security of the medical system or network could cause disastrous consequences [46]. Meanwhile, the patient's print information exists at all stages of data collection, data transmission, cloud storage, and data republication. In developing secure healthcare system, the following requirements should be considered.

4.1. Data Confidentia ity

In IoMTs, it is en yiled t, defend the original medical data from any disclosure. In modern health monitoring syster, the wearable devices accumulate and forwards specific medical data to the sever. An attacker can eav sdrop n idical information and can overhear during data transmission. This eavesdropping process can result in sev re challenges to the patients since the hacker can utilize the collected medical data

for numerous illegal purposes.

4.2. Data Integrity

Alongside confidentiality, the integrity of medical data is also a significant factor or i's transmission in WBSNs. Attackers could modify the data by introducing some fake fragments within a original data to change the original meaning. Then, duplicate data will be delivered to the destination and the change the very prominent solution for protecting original data from external attacks.

4.3. Data Availability

This property verifies that accurate data must be available to the legitime e user: so that reliable access of the network resources is given to appropriate nodes promptly. In the context of IoN T, it is very crucial that network resources and medical data be available to the authenticated nodes/use.

4.4. Data Freshness

An attacker can passively perceive the medical data during its tran. pission from patients to the concerned doctor, and can subsequently replay it by applying old keys to perplex the coordinator. Data freshness assures that the data is fresh and nobody can replay old data.

4.5. Scalability

As the network increase and the number of managers and culomers turn out to be more, so it is significant to reduce latency, so the computational and storing overheads need to be controlled.

4.6 Secure key distribution

It is crucial to allow encryption and decryption operation for accomplishing the estimated security and confidentiality. The controller must have the capibility to accomplish stable implication and detachment of devices.

5. Method and Material

This section comprises details of physiolog. all based key generation mechanism and details about the proposed joint resource aware and securily model for wearable healthcare systems.

5.1. Wearable System for ECG Meas .remen.

In this study, a wearable syste n for ECG measurement is designed as shown in Fig.3. The flexible electrodes and wearable platform are incorrated to simplify the ECG signal acquisition task and as well ensuring guarantee the quality ($t \in G$ the recorded signals with low power consumption of the system, and higher reliability and precision.

The medical devices collect consignals from individuals, these signals are associated with some undesirable noise. It could affer the feature extraction procedure from the collected signals to generate EI for securing WBSNs. For that means any mean any mean of the feature extraction procedure from the collected signals to generate EI for securing WBSNs. For that means any mean any means from bio-signals needs to be removed so that neat signals can be acquired and any means the monitoring applications. There are numerous kinds of noises that can be mixed with the obtained physiological signals from the subjects because hardware system may not entirely filter all noise. In this context, it is essential to utilize appropriate filters for eradicating undesirable information from means the major restraint for completely removing unwanted noise, their association cannels be explained well both in the manufacturing and in demonstrative deployment. Meanwhile, software filtering depends typically on cut-off frequencies which may be controlled explicitly by operation of

state-of-the-art filtering approaches. The signal levels are immensely low such as 1 mV. " physiological signals including ECG recordings. Given that, it is vital to put on filtering for eradicatine extensive undesirable noises [50-54]. The noise in ECG waveform is mostly owing to not steady and ct current offset between the human body and electrode interface, power line noise, construction of the redical device, muscle noise, and electrical instrumental noise in the environment [52].



Fig .3. Wearable Sys. m for LCG Measurement

5.2. Proposed Security Framework for Health

This research aims to provide resource efficient security framework, so physiological based keys are generated for securing IoMT. Once the ECG signals are filtered, next step is to calculate time domain features for creating random secret keys for healt' care systems as shown in Fig.4.

We have used IPIs obtained from 'CG to produce bio-keys for implementing security in IoMT because this process can preserve memory us ge as ve', as require less computation since they can be acquired from several cardiac signals. If the 128-7, bio-key (Kb) based on IPIs are satisfactorily arbitrary, then they may be applied as security keys for securing com. unication between medical devices in IoMT systems.

In this research, the initial stage of physiological based key generation mechanism is the detection of R peaks from heartbeats. Moreover, this to obtaining more bits from IPIs, bounded increasing sequences are generated from IPIs which could entract multiple bits. There are numerous approaches to encode decimal IPIs into binary values; we used 'lock encoding for generating binary bits. It has advantages of reducing measurement errors, also 'no easing the tolerance of the produced binary sequences. Furthermore, binary features (BF) are extra indicating encoded bits from the ith heartbeat, which are further concatenated to generate bio-keys as demonstrated in eq.(1).

$$Kb(i) = BF_1 \parallel BF_2 \parallel BF_3.$$

(1)

whereas Kb(i) s secret key produced from the ith heartbeat and || characterizes concatenation procedure.

For generating y- it Kb, b_i constructed from k succeeding heartbeats are concatenated as shown in eq.(2).



Fig.4. Physiological based key generation mechanism 'or ecurity aspects in medical applications



It is necessar / to chec's that bio-keys generated from ECG signals must possess properties of randomness and uniqueness. Firstly the 128-bit Kb should be sufficiently random to apply for security aspects of healthcare ar lications. Secondly, it also needs to be validated that different persons will produce distinctive Kb. In the section, we have presented a complete mode for providing secure communic in between the source and destination nodes as shown in Fig.5. Once the source node collects the medical inform. tion using wearable devices, ciphertext will be generated by means of applying logical operations or veen 128-bit Kb and plain text. In case any user wants to get medical data, the main step will be to chec' eith r secret key (Kb) matches or not. If the Kb matches then data can be transmitted between the source and a stination devices. Generally, communication between medical devices in IoMT via wireless medium has two security phases. At the initial phase, secret keys are exchanged between nodes for that purpose T usted Third Party (TTP) is widely used. At the second stage, utilization of generated secret keys for ocur ng IoMT is done. The proposed framework has high significance at the second phase for implementing courity in remote health monitoring, and the block diagram for patient's data confidentiality and s curity by utilizing the proposed framework is demonstrated in Fig.5. Initially, every medical device will pro 'uce bio keys, further, these keys will be used to generate ciphertext and then accumulated at the medical databation erver using TTP protocol. When a receiver request for patients information from the remote ser er, t' ecret key will be checked so that to main data privacy and security. If the Kb is matched, then ciph, will b, sent to the receiver. At last, the receiver will decrypt the ciphertext to acquire the original information. The chief benefits of the proposed framework are that it provides end-end health information security and a. > require less energy for securing IoMT.

5.3 Resource Optimization Model

The crucial issue of constructing joint energy and sec imposed for medical data transmission over the internet of medical things (IoMT) networks is resource optimilation. In this central model, the relationship is established between the length of the security key and the energy depletion. The energy-security coordination is a utility function f_{ut} that defines a relationship between elergy consumption EC and security (Sect) as an aggregate objective function as depicted in eq.(3)

$$f_{int} = \alpha EC + (1 - \alpha)Sect \tag{3}$$

Whereas, α is the priority factor to prioritize u. security or energy according to the need of the user and system.

It is observed and examined that as the lenge of the security key and energy drain increases than battery charge consumption will be increased and lence the shorter lifetime of the IoMT system, that is why the relationship as shown in eq.(4)

$$h \arg e = a \times m \times k^b + \zeta \tag{4}$$

Whereas, a and b are the coefficients, nd m, k, ζ are the message size, key size and difference error between energy and security, respecively.

Suppose, that difference err r ζ is n. nimal and can be neglected, then eq.(2) will be re-written as

$$\frac{Ch \arg e}{m \times k^b} = K \tag{5}$$

Whereby, K in eq.(5 is the c nstant

At given values of different security keys, further energy drain and the security level are calculated then coefficients are computed for overall performance optimization in IoMT system.

$$a = \frac{Ch \arg e}{m \times k^{b}}$$

$$b = \min_{k} \left[\sigma(\frac{Ch \arg e}{m \times k^{b}}) \right]$$
(6)
(7)

Whereas, σ shows the standard deviation between battery charge, security key and energy dissipation.

$$EC = e^{b \times k} \times a^m \tag{8}$$

Whereas, e is exponential, k is the length of the key, m is the message length v ith energy drain EC as represented in Eq. (6). Similarly, security analysis in association with energy a represented in eq.(9).

$$Sect = \left[\log_2 \left(\frac{EC}{a^m} \right)^{1/b} \right]$$
(9)

Eq.(9) depicts the logarithmic relationship between energy drain and the socurity for the IoMT system at the given value of the security key.

6. Experimental Results and Discussion

This section describes the performance results of the proposed joint resource-efficient and security approach for securing health information in IoMT. The forem st step is to estimate the quality of created biokeys by using two crucial parameters including random. so and uniqueness. It is an essential requirement that physiologically based keys must not merely be sufficiently random but also retain anticipated individuality to ensure that the distinct human will yield totally different keys. Therefore, it is not easy for attackers to attain any valuable information regarding keying material or patient's data by capturing the ECG of any subject. In this study, ECG signals from 40 healthy labele de abase physionet. Furthermore, IPIs are calculated from ECG to generate 128-bit bio-keys. The protected for this research was approved by the Clinical Ethics Committee of the Xili People Hospita' of finenzhen, China. Written informed consent was obtained from subjects before the experiment.

6.1 Performance Evaluation of Bic ke,

The randomness of the generate keys is one of the primary constraints for remote healthcare security. Entropy (E) is usually utilized for ineasuring the randomness by demonstrating the degree of uncertainty of the produced bio-keys as eleptorated in equation (10).

$$E(\mathbf{x}) = \sum_{i=1}^{n} P(\mathbf{x}_i)^{\mathsf{x}} \wedge (\mathsf{x}_i)$$

(10)

Fig.6 presents that ' ie entropy of the generated keys is approximately 1, with the mean value of 0.9704. As a result, the yielded k vs from lifferent subjects elaborates the features of randomness.

To analyze the unique $rac{1}{2}$ of the produced keys, Hamming distance (HD) is widely used. HD between two bio-keys of dentical sizes were applied to measure the uniqueness between them. Larger value of HD specifies that the generated 128-bit keys are efficient for securing real-time IoMT systems. The average HD of z-bit of biometr. ¹² ys is estimated to be nearly z/2. Fig.7 demonstrates that the average HD value of



yielded keys is 47.25%, which is approximately equal to 50%, so different subject's ECG : distinctive and have potential to be applied for IoMT based healthcare applications.



Fig.8 Relationship between number of security kourse d Resource optimization



ig.9 Tra te-of between Message Length and Resource optimization



In Fig.8 we precent the trade-off between a number of keys and resource (i.e., energy consumption, charge dissipation and cost). It is examined that cost is minimized significantly while energy and charge drains are

exponentially decreasing with the increasing number of keys.

Fig.9, reveals the trade-off between message length and the resource optimization. It is our erved that energy, charge drain, and cost linearly increases with the message length. Cost is optimized ' at a remarkable level, while energy and charge are drained at more level. Fig.10 shows the relationship bet veen a number of rounds and the resource optimization, it is interpreted that energy consumption is less w. The charge drain is high with the increase of the number of rounds. Moreover, it is observed that resources are optimized efficiently.



Fig.10 The relationship bet veen . umber of rounds and resource optimization

6.3 Resource Consumption Comparison

Fig.11 (a) illustrates that the total $p_{n} \sim ssin'$ time consumption for the proposed framework, Alarm-net, BSN-care, are 0.0068ms, 0.0128 ms and 0.0.735 ms, respectively. It can be illustrated from the experimental analysis, that the detailed analysis function proposed approach requires more processing time in comparison with existing techniques, therefore existing techniques are not cost-effective solution for securing IoMT based healthcare. In Alarm-Net, more processing cycles are needed to produce secret keys, so time is expended for the medical data encryption that the compared approaches. BSN-care uses simple practices, so it needs less encryption time for data encryption. than alarm-net, but due to the utilization of external keys, BSN-care requires more cycles to generate are dom keys than the proposed approach. Therefore, in this study biometric keys are generated for providing a valance between processing time and security for IoMT systems.

It can be observe. from F.g.11 (b) that the proposed framework consumes less energy than the conventional, traditio al secur y methods for healthcare. Since biometric key generation procedure is applied in the proposed frame 'ork.' ence less energy is utilized. Therefore, the proposed IoMT based healthcare framework provides a resource-efficient and secure model for medical information transmission between patient and remo e available doctors.





Fig.11 Resovace con variation comparison of different method

7. Conclusion and Future Research

This research aims to de op joint resource aware and security framework for IoMT based remote healthcare systems. To offer stability in IoMT, we applied bio-keys generation mechanism for medical data encryption which is beneficial or reducing resource requirement of system. The experimental results reveal that generated biometric keys inor different subjects are sufficiently random and unique thus can be used for securing IoMT. More we prove sed IoMT based healthcare framework requires less processing time and energy consumption that the oppared approaches. The proposed framework also offers a trade-off between security and resource consumption in real-time hospital scenarios. This research not only decrease the economical health care solution but also guarantee the secure transmission of medical data between patients and physicians

It is our future, we have to further conduct more experiments that would involve more number of medical devices with combility to acquire different signals including EMG, EEG, PPG and body temperature in IoMT

systems. Moreover, we also hope to develop an adaptive bio-key generation mechanism so (... t it can provide different keys based on multiple heart rate bands for real-time healthcare.

Highlights of the Manuscripts

- We developed a joint resource aware and security model for healthcare applications
- A wearable platform is developed for bio-signal collection
- Physiological based Key Generation Mechanism is also developed
- The performance comparisons of proposed security model with existing methods

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Conflicts of Interest

The authors declare no conflict of interest.

References

- [1] Lin, W. H., Wang, H., Samuel, O. W., Liu, G., Hu, o, Z., & Li, G. (2018). New photoplethysmogram indicators for improving cuffless and continuous blood pressure estimation. accuracy. Physiological measurement, 39(2), 025005.
- [2] A. H. Sodhro, A. K. Sangaiah, S. Pirphula¹ A Sekhari, and Y. Ouzrout, "Green media-aware medical IoT system," Multimedia Tools and Applications, pp. 1-20 2018.
- S. Pirbhulal, H. Zhang, M. E. E Alahi, H. Ghayvat, C. Mukhopadhyay, Y.-T. Zhang, et al., "A novel secure IoT-based [3] smart home automation system using a wireles. ansor network," Sensors, vol. 17, p. 69, 2016.
- [4] Z. Ali, M. Imran, M. Alsulaiman, M. S' saib, S. Un. 1, Chaos-based robust method of zero-watermarking for medical signals, Future Generation Computer Systems Vol. 53 (11) pp. 400-412, Nov, 2018.
- D. Lin, Y. Tang, F. Labeau, Y. Yao, M. Jr ran, / . V. Vasilakos, "Internet of Vehicles for E-health Applications: A Potential Game for Optimal Network Capacity", IEE. St. tems Journal, Vol. 11 (3), pp. 1888-1896, sept, 2017. [5]
- Pirbhulal, S., Shang, P., Wu, W. Sangaiah, A.K., Samuel, O.W. and Li, G., 2018. Fuzzy vault-based biometric security [6] method for tele-health monitori g systers. Computers & Electrical Engineering, 71, pp.546-557.
- M. M. Rodgers, V. M. Pai, and R. S. Comoy, "Recent advances in wearable sensors for health monitoring," IEEE Sensors [7] Journal, vol. 15, pp. 3119-3 26, 2 15.
- A. H. Sodhro, S. Pirbhula A. K Sangaiah, S. Lohano, G. H. Sodhro, and Z. Luo, "5G-Based Transmission Power Control [8] Mechanism in Fog Computing, " r Internet of Things Devices," Sustainability, vol. 10, p. 1258, 2018.
- W. Sun, Z. Cai, Y. Li, J. Liu, S. , ng, and G. Wang, "Security and Privacy in the Medical Internet of Things: A Review," [9] Security and Commun catio Networks, vol. 2018.
- D. Puthal, N. Malik, ... P Moh .tty, E. Kougianos, and C. Yang, "The blockchain as a decentralized security framework," [10] *IEEE Consumer Electronic.* M gazine, vol. 7, pp. 18-21, 2018. S. Pirbhulal, H. Lhang, S. C. Mukhopadhyay et al., "An efficient biometric-based algorithm using heart rate variability for
- [11] securing body s nsor networks," Sensors, vol. 15, no. 7, pp. 15067-15089, 2015.
- Z. Ali, M. Imra, M. Als aiman, T. Zia, M. Shoaib, A zero-watermarking algorithm for privacy protection in biomedical [12] signals, Fut¹ Generation Computer Systems, Vol. 82, pp. 290-303, May, 2018. S. Pirbhu' J, H. Zhang, W. Wu et al., "A comparative study of fuzzy vault based security methods for wireless body sensor
- [13] networks. IEEE, 10 International Conference on Sensing Technology, 11-13 Nov, Nanjing, China, pp.57-62, 2016.
- W.-B. Lee, and C. J. Lee, "A cryptographic key management solution for HIPAA privacy/security regulations," IEEE [14] Transactions on information Technology in Biomedicine, vol. 12, no. 1, pp. 34-41, 2008.

- T. Hayajneh, B. Mohd, M. Imran, G. Almashaqbeh, A. Vasilakos, Secure Authentication for Remote Pront Monitoring with [15] Wireless Medical Sensor Networks, Sensors 2016, 16(4), 424; doi:10.3390/s16040424.
- W. Sun, Z. Cai, F. Liu et al., "A survey of data mining technology on electronic medical records" in Proceedings of the [16] International Conference on E-Health Networking, Application and Services, pp. 1-6, 2017
- [17] J.H. Abawajy and M.M. Hassan, "Federated internet of things and cloud computing pervasive patient health monitoring system", IEEE Communications Magazine, vol.55, no.1, pp.48-53, 2017.
- A.M. Rahmani, et al. "Exploiting smart e-health gateways at the edge of healthcare internet of-thing a fog computing [18] approach", Future Generation Computer Systems, vol.78, no.1, pp.641-658, 2018.
- J. Kim, "Energy-efficient dynamic packet downloading for medical IoT platforms. LEL Transactions on Industrial [19] Informatics", vol.11, no.6, pp.1653-1659, 2015.
- [20] A. A. Fadele, et al. "Internet of Things security: A survey." Journal of Network and Comp. ~ Applications, vol.88, pp.10-28, 2017.
- [21] R. M. Sanaz et al. "End-to-end security scheme for mobility enabled healthcar/ Internet of Things." Future Generation Computer Systems, vol.64, no.2, pp.108-124, 2016.
- C. Tan, H. Wang, S. Zhong, Q. Li, "IBE-Lite: A lightweight identity-based cryptos only fe body sensor networks", IEEE [22] Transactions on Information Technology in Biomedicine, vol.13, no.6, pp.926-632, 2016.
- A. Wood., et.al, "Wireless sensor networks for assisted-living and residential more on g. University of Virginia Computer [23] Science Department Technical Report" vol.2, pp.1-15, 2006.
- P. Gope., T. Hwang, "BSN-care: A secure iot-based modern healthcare _stem using body sensor network", IEEE Sensors [24] Journal, vol.16, pp.1368-1376, 2016.
- G.-H. Zhang, C. Poon, and Y.-T. Zhang, "Analysis of using interpulse intervals to generate 128-bit biometric random binary [25] sequences for securing wireless body sensor networks," IEEE Transactue on Inf rmation Technology in Biomedicine, vol. 16, no. 1, pp. 176–182, 2012.
- G. Zheng, G. Fang, R. Shankaran et al., "Multiple ECG Fiducial Point, Based Random Binary Sequence Generation for Securing Wireless Body Area Networks," IEEE Journal of Bio Line, and Health Informatics, vol. 21, no. 3, pp. 655-663, [26] 2017.
- S. N. Ramli, R. Ahmad, and M. F. Abdollah, "Electrocardiogram (ECG) gnals as biometrics in securing Wireless Body Area [27] Network." 8th International Conference for Internet Technol. y and _____ red Transactions (ICITST), pp. 536-541, 2013.
- [28] S. Peter, B. Pratap Reddy, F. Momtaz et al., "Design of sec re ECG-based biometric authentication in body area sensor networks," Sensors, vol. 16, no. 4, pp. 570, 2016.
- K. Saleem, H. Abbas, J. Al-Muhtadi et al., "Empirical "tu," s o. ECG Multiple Fiducial-Points Based Binary Sequence [29] Generation (MFBSG) Algorithm in E-Health Sensor Pla. orm.' IEEE 41st Conference on Local Computer Networks Workshops (LCN Workshops), pp. 236-240, 2016.
- [30] H.-S. Choi, B. Lee, and S. Yoon, "Biometric authent," tion using noisy electrocardiograms acquired by mobile sensors," IEEE Access, vol. 4, pp. 1266-1273, 2016.
- C. C. Poon, Y.-T. Zhang, and S.-D. Bao, "A movel biometrics method to secure wireless body area sensor networks for [31] telemedicine and m-health," IEEE Communi^{*} ations is ³gazine, vol. 44, no. 4, pp. 73-81, 2006. S.-D. Bao, C. C. Poon, Y.-T. Zhang, and ⁴-F. Shen, ⁴Using the timing information of heartbeats as an entity identifier to
- [32] secure body sensor network," IEEE Trans Int. . . . Biomed., vol. 12, no. 6, pp. 772-779, 2008
- [33] F. Xu, Z. Qin, C. C. Tan, B. Wang, and Q. Li "IM. Guard: Securing implantable medical devices with the external wearable guardian," in Proc. IEEE Conf. Comp. t. Co. mun pp. 1862-1870, 2011.
- A. Rukhin, J. Soto, J. Nechvatal, M. . . . d, and E. Barker."A statistical test suite for random and pseudorandom number generators for cryptographic applic tions," L. . Allen and Hamilton Inc Mclean Va, vol. 1, no. 1, pp.1-164, 2001 [34]
- K. Venkatasubramanian, A. Br. iee, and S. Gupta, "EKG-based key agreement in body sensor networks," in IEEE [35] INFOCOM Workshops April, F.J. 1-6, 098.
- O.W. Samuel, G.M. Asogbon A. K. Sangarah, P. Fang, and G. Li, "An integrated decision support system based on ANN and [36] Fuzzy_AHP for heart failure risk rediction," Expert Systems with Applications, 68, pp. 163-172, 2017
- [37] Pawar, P., Jones, V., Van 'eijn' a, B. J. F., & Hermens, H. A framework for the comparison of mobile patient monitoring systems. Journal of biomedica. formatics, 45(3), pp.544-556, 2012.
- Samuel, O. W., Li, X. Geng, Y., sogbon, M. G., Fang, P., Huang, Z., & Li, G. (2017). Resolving the adverse impact of [38] mobility on myoelect .c pat .rn re ognition in upper-limb multifunctional prostheses. Computers in biology and medicine, 90, 76-87
- Sodhro, Ali Hassan Sande, ¹.rbhulal, and Arun Kumar Sangaiah. "Convergence of IoT and product lifecycle management [39] in medical healt' care." Fiture Generation Computer Systems, 2018.
- Sodhro, A.H., S ngaiah, A C., Pirphulal, S., Sekhari, A. and Ouzrout, Y. Green media-aware medical IoT system. Multimedia [40] Tools and Applic tions, pr 1-20, 2018.
- Pellionisz, ras J., Zavid L. Tomko, and Charles C. Jorgensen. "Artificial cerebellum ACE: tensor network transformer [41] enabling urtual movement in virtual environment: facilitating teleoperation in telepresence." In Neural Networks, IEEE Internatio al Conference on, pp. 648-654. IEEE, 1993.

- [42] Chandramohan, J., Nagarajan, R., Satheeshkumar, K., Ajithkumar, N., Gopinath, P.A. and Ranjithkumar, S., 2017. Intelligent smart home automation and security system using Arduino and Wi-fi. International Journal Of Engineering And Computer Science, pp.1-5, 2015.
- [43] Serena, Thomas E., Caroline E. Fife, Kristen A. Eckert, Raphael A. Yaakov, and Marissa J. C. ter. 'A new approach to clinical research: Integrating clinical care, quality reporting, and research using a wound ce · net ork based learning healthcare system." Wound Repair and Regeneration 25, no. 3 (2017): 354-365.
- [44] Larburu, N., Bults, R.G., Van Sinderen, M.J. and Hermens, H.J. An ontology for telemedrine systems resiliency to technological context variations in pervasive healthcare. IEEE journal of translational engineering in realth and medicine, 3, pp.1-10, 2015.
- [45] He, D. and Zeadally, S.,. Authentication protocol for an ambient assisted living syster [IEF]. Communications Magazine, 53(1), pp.71-77, 2015.
- [46] M. Huang, A. Liu, T. Wang, and C. Huang, "Green data gathering under delay diferer it: ed setver sconstraint for internet of things," Wireless Communications and Mobile Computing, vol. 2018, Article ID 97 5428, 20 8.
- [47] Wu W.; Pirbhulal S.; Sangaiah AK.; Mukhopadhyay SC.; Li G. Optimization of s. nal qualit over comfortability of textile electrodes for ECG monitoring in fog computing based medical applications. Futu. Generation Computer Systems. pp.1-19,2018.
- [48] Pirbhulal, S.; Zhang, H.; Mukhopadhyay.; Wu, W.; Zhang, Y.-T. Heart-Be s Bar Ju i ometric Random Binary Sequences Generation to Secure Wireless Body Sensor Networks. IEEE Transaction on Bir nedical Engineering, vol.18, no.1, http://ieeexplore.ieee.org/document/8314739, pp.1-9, 2018.
- [49] Wu, W., Pirbhulal, S. and Li, G., 2018. Adaptive computing-based ometric security for intelligent medical applications. Neural Computing and Applications, pp.1-10, 2018.
- [50] Bernard, T.; Nakib, A. Adaptive ecg signal filtering using bayesian based solutionary algorithm. Metaheuristics for medicine and biology, Springer, 2017, 17, 187-211.
- [51] Gong, Y.; Gao, P.; Wei, L.; Dai, C.; Zhang, L.; Li, Y. An enhal adaptive filtering method for suppressing cardiopulmonary resuscitation artifact. IEEE Transactions on Bic succar Engineering 2017, 64, 471-478.
- [52] Belchandan, A.K.; Deshmukh, K.; Kumar, J. Removal of noises in CG signal by using a digital fir-iir filter in vhdl. Digital Signal Processing 2016, 8, 135-139.

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Highlights of the Manuscripts

- We developed a joint resource aware and security model for healthcare applications
- A wearable platform is developed for bio-signal collection
- Physiological based Key Generation Mechanism is also developed
- The performance comparisons of proposed security model with existing nethod.