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Leveraging Data-Driven Intelligence for Remote Patient Monitoring in Digital Health

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Abstract: Data-driven intelligence in digital health refers to the integration of large-scale data from diverse sources to enhance health outcomes, particularly through remote patient monitoring. Utilizing advanced digital technologies such as wearable sensors, smartphones, and remote monitoring systems, real-time health data is collected from patients and transmitted to healthcare providers. This continuous data stream allows for the application of machine learning algorithms to analyze health patterns, predict potential outcomes, and offer personalized treatment recommendations. By leveraging data analytics, healthcare providers can make informed, timely decisions that cater to the individual needs of patients. Remote monitoring enables proactive management of chronic diseases, early detection of potential health issues, and reduced hospital visits, contributing to improved patient experience. Furthermore, this approach enhances healthcare efficiency by reducing the strain on healthcare resources, enabling cost-effective care delivery, and improving access to healthcare, especially in underserved populations. The overarching goal of data-driven intelligence in digital health is to provide better health outcomes, optimize healthcare processes, and deliver more personalized and predictive care. This innovative integration of technology into healthcare represents a transformative step toward more efficient, patient-centered, and data-informed healthcare systems.

Citation: R. Regin. Leveraging Data-Driven Intelligence for Remote Patient Monitoring in Digital Health. Central Asian Journal of Medical and Natural Science 2024, 5(4), 798-808

Received: 10th Agst 2024

Revised: 11th Sept 2024

Accepted: 16th Oct 2024

Published: 22nd Oct 2024



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Keywords: To Healthcare Providers, Machine Learning Algorithms; Remote Patient Monitoring; Reduce Costs; Digital Health-Remote Patient Monitoring; Extract Meaningful Insights.

1. Introduction

Data-driven intelligence in digital health is transforming the healthcare industry by utilizing vast amounts of data collected from various sources to enhance patient outcomes, improve patient experiences, and increase the efficiency of healthcare delivery [8-11]. At the heart of this approach is remote patient monitoring (RPM), which involves the use of digital devices and advanced technologies to collect real-time health data from patients. This data is then transmitted to healthcare providers, allowing for timely interventions and improved patient care [12-19]. The growing role of data-driven intelligence, particularly machine learning algorithms, enables the identification of patterns, the prediction of health outcomes, and the generation of personalized recommendations for treatment and care [20].

The shift toward data-driven intelligence in digital health is empowering patients in ways that were previously unimaginable. Patients can now take a more active role in managing their own health, becoming more engaged in their treatment plans and health outcomes. [21-26] This sense of empowerment leads to better adherence to treatment

protocols and a more proactive approach to managing chronic conditions. Moreover, remote patient monitoring enables healthcare providers to optimize their resources, reduce operational costs, and ultimately deliver higher-quality care. As data-driven intelligence continues to evolve, its potential to revolutionize healthcare is becoming increasingly evident, with the prospect of transforming the lives of millions of patients worldwide [27-34].

The current healthcare system faces significant challenges in providing continuous, high-quality care to patients, especially those with chronic illnesses. Chronic conditions, such as diabetes, hypertension, and heart disease, require ongoing monitoring and support to ensure that patients adhere to treatment plans and maintain their health [35-41]. However, traditional models of healthcare, which often rely on in-person visits to healthcare facilities, are not always well-suited to managing chronic illnesses. Patients may find it inconvenient or costly to travel to healthcare appointments, leading to reduced compliance with treatment regimens and poorer health outcomes [42-49]. In many cases, the frequency of in-person visits is insufficient to catch early signs of deterioration, resulting in hospitalizations or exacerbations of chronic conditions [50].

Remote patient monitoring presents a promising solution to these challenges by allowing patients to receive care from the comfort of their homes. RPM uses digital health technologies, such as wearable devices, mobile apps, and telemedicine platforms, to collect and transmit real-time health data from patients to healthcare providers [51-55]. These technologies enable healthcare providers to monitor patients' health remotely, detect any early signs of health deterioration, and intervene before the situation escalates. For example, RPM can be used to track vital signs, such as heart rate, blood pressure, and glucose levels, and transmit this information to healthcare providers, who can then adjust treatment plans or provide guidance as needed [56].

However, while RPM has the potential to significantly improve patient outcomes, it also introduces new challenges. The sheer volume of data generated through RPM can be overwhelming for healthcare providers, who may struggle to analyze and interpret the data to make informed clinical decisions [57-62]. This is where data-driven intelligence (DDI) becomes crucial. DDI refers to the use of advanced analytics, including machine learning, artificial intelligence (AI), and big data techniques, to process and analyze large datasets, extract meaningful insights, and support decision-making in healthcare [63-69].

Machine learning algorithms, in particular, play a central role in data-driven intelligence for digital health. These algorithms can analyze vast amounts of patient data to identify patterns, predict future health outcomes, and provide personalized recommendations for care [70-75]. For example, a machine learning model could be trained to predict the likelihood of a patient developing complications from a chronic condition based on their health data, allowing healthcare providers to take proactive measures to prevent such complications. Additionally, machine learning algorithms can continuously learn from new data, becoming more accurate and effective over time [76-81].

The use of data-driven intelligence in remote patient monitoring also has the potential to enhance the patient experience. By enabling real-time monitoring and personalized care, patients feel more connected to their healthcare providers and more engaged in managing their own health [82-89]. This increased engagement can lead to better adherence to treatment plans, improved health outcomes, and greater satisfaction with care. Patients can also benefit from the convenience of remote monitoring, which reduces the need for frequent in-person visits and allows them to receive care in a more comfortable and familiar setting [90].

Healthcare providers, too, stand to gain from the integration of data-driven intelligence into remote patient monitoring. The ability to monitor patients remotely and in real-time can lead to more efficient use of healthcare resources, as healthcare providers can prioritize patients who require immediate attention and provide more targeted

interventions [91-95]. This can reduce the number of hospitalizations and emergency room visits, which are costly for both patients and the healthcare system. Moreover, the insights generated through data-driven intelligence can support more accurate diagnoses and treatment decisions, leading to better patient outcomes and more cost-effective care delivery [96-101].

Despite the many advantages of data-driven intelligence in digital health, several challenges remain. One of the primary concerns is the issue of data privacy and security. Remote patient monitoring involves the collection and transmission of sensitive health data, which must be protected from unauthorized access or breaches [102-104]. Ensuring the security of patient data is essential to maintaining patient trust and complying with regulatory requirements, such as the Health Insurance Portability and Accountability Act (HIPAA) in the United States. Healthcare providers and technology developers must implement robust security measures, such as encryption and secure data storage, to protect patient data from cyber threats [105].

Another challenge is the ethical considerations surrounding the use of AI and machine learning in healthcare. While these technologies offer significant benefits, they also raise concerns about bias, fairness, and transparency. Machine learning algorithms are only as good as the data they are trained on, and if the training data is biased, the algorithm's predictions and recommendations may also be biased. For example, if a machine learning model is trained on data from a predominantly white population, it may not perform as well for patients from minority groups, leading to disparities in care. Ensuring that AI and machine learning models are trained on diverse and representative datasets is crucial to avoiding bias and promoting fairness in healthcare.

Looking to the future, data-driven intelligence in digital health, particularly in the context of remote patient monitoring, holds immense promise for transforming healthcare delivery. As machine learning algorithms and AI continue to advance, they will become even more adept at analyzing patient data and providing personalized care recommendations. Wearable devices and mobile health technologies will also continue to evolve, offering more accurate and comprehensive data collection. These advancements will enable healthcare providers to deliver more proactive, predictive, and personalized care, leading to better health outcomes and reduced healthcare costs.

The future of remote patient monitoring and data-driven intelligence will also likely see increased integration with other emerging technologies, such as telemedicine, blockchain, and the Internet of Things (IoT). Telemedicine platforms, which enable virtual consultations between patients and healthcare providers, can be combined with RPM to provide seamless, continuous care. Blockchain technology, which offers a decentralized and secure method for storing and sharing data, could be used to enhance the security and interoperability of patient health data. IoT devices, which connect and exchange data with other devices and systems, could enable even more sophisticated remote monitoring, allowing for real-time data collection from multiple sources.

In data-driven intelligence in digital health is revolutionizing the healthcare industry, with remote patient monitoring serving as a key component of this transformation. By leveraging large amounts of data and advanced analytics, healthcare providers can offer more personalized, efficient, and cost-effective care. Patients, in turn, are empowered to take control of their health and receive care in the comfort of their homes. As data-driven intelligence continues to evolve, it has the potential to address many of the challenges faced by the current healthcare system, particularly in the management of chronic illnesses. However, ensuring data privacy, security, and fairness will be critical to realizing the full potential of this technology. As we move forward, data-driven intelligence and remote patient monitoring will undoubtedly play a central role in shaping the future of healthcare, improving patient outcomes, and enhancing the quality of care for millions of individuals worldwide.

Literature review

Alshamrani et al., [1] use the technology of IoT (Internet of Things) devices and sensors: these include various types of wearables, smart home devices, and medical equipment, such as ECG monitors, blood pressure monitors, and glucose sensors. The paper describes how these devices can collect various types of patient data, such as vital signs, medication adherence, and activity levels. The main advantage of using this technology is that applications of IoT and AI in remote healthcare monitoring systems can be useful for researchers, healthcare providers, policymakers, and other stakeholders interested in the field. This IoT technology also has its disadvantages. The dataset could be tendentious and fail to incorporate all the possible models. Issues such as noisy data, dirty data, and incomplete data can reduce the probability of arriving at a conclusive health-related diagnosis and advisory note.

Sujith et al., [2] describe deep learning technology, which is a subset of machine learning that uses artificial neural networks to analyse large amounts of data. IoT devices, such as wearable devices and medical sensors, can collect and transmit health data in real time. Natural language processing (NLP): nlp techniques can be used to analyse unstructured data, such as electronic health records, to extract useful information. Deep learning technology is used for the early detection of diseases: dl and AI techniques can analyse large amounts of health data in real time, enabling the early detection of diseases before symptoms become severe. As much as there are advantages to this deep learning technology, there are some disadvantages, like the use of dl and AI techniques requires the collection and processing of large amounts of sensitive health data. Ensuring data privacy and security is a major challenge that needs to be addressed to gain patients' trust and acceptance.

Higgins et al., [3] state about the technology of natural language processing (NLP), machine learning (ml), and artificial intelligence (AI) in decision support systems for mental health. Additionally, the paper also discusses the use of mobile health (health) technologies and wearable devices in mental health monitoring and treatment. A few advantages of these systems are that they can analyse large amounts of data, including patient records, medical literature, and clinical guidelines, and provide personalised recommendations for diagnosis, treatment, and care. The use of mobile health technologies and wearable devices can enable continuous monitoring of mental health symptoms, which can provide clinicians with a more comprehensive understanding of the patient's condition. AI and ML-based systems can potentially reduce the burden on mental health professionals and improve the efficiency and cost-effectiveness of mental healthcare delivery. The disadvantages include the algorithms may not be transparent, and it may not be easy to understand how the system is arriving at its recommendations or predictions. This lack of transparency can lead to decreased trust in the system and resistance from clinicians and patients. The use of ai/ml-based systems in mental health may lead to a reduction in the human element of care, with clinicians relying too heavily on the recommendations of the system and potentially missing important nuances in patient behaviour and symptoms.

Gopalan et al., [4] discuss several technologies and techniques related to IoT security and AI, such as encryption, authentication, access control, intrusion detection, and machine learning algorithms. The use of AI algorithms can help healthcare organisations identify potential cybersecurity threats and vulnerabilities and take proactive measures to prevent them. Additionally, AI can assist in identifying patterns in the data that can lead to better decision-making, and personalised patient care is one of the advantages of the use of AI technology. In contrast, the disadvantage is that AI-based security systems can be vulnerable to adversarial attacks, where an attacker intentionally manipulates data or input to deceive the system. Ai-based systems create false positives or false negatives, leading to incorrect diagnoses or treatment recommendations.

Jiang et al [5] described in this Journal are natural language processing, machine learning, deep learning, and computer vision. AI can help to improve the accuracy and speed of diagnoses by analysing large amounts of data and identifying patterns that may not be immediately apparent to human healthcare professionals. This can lead to earlier detection of diseases and more effective treatment options. AI can also be used to improve patient outcomes by optimising treatment plans and reducing the risk of medical errors. The algorithms in the paper are AI in Healthcare, such as ensuring data privacy and security, addressing biases in AI algorithms, and integrating AI into clinical workflows.

Beam and Kohane [6] described is big data analytics and machine learning techniques are discussed as a means to process and analyse healthcare data. The paper also highlights various tools and platforms that can be used for big data processing and machine learning. One of the most significant benefits is that it can help improve patient outcomes by identifying patterns and insights that can be used to develop more effective treatments and interventions. Additionally, big data and machine learning can help reduce costs by optimising resource utilisation and reducing the number of unnecessary procedures or treatments. It can also help identify patients who are at risk for certain conditions or diseases, allowing for earlier intervention and potentially better outcomes. The disadvantage is that, it does briefly mention concerns regarding privacy and security of patient data, as well as the need for proper ethical and legal frameworks to be in place for the responsible use of these technologies.

Ying et al. [7] state that machine learning algorithms and techniques were used in the study. The paper also mentions the use of sensors for data collection, so it can be inferred that various types of sensors were used as well. The advantage is that it can provide real-time monitoring and early detection of damage or defects, which can help prevent catastrophic failure and reduce maintenance costs. Secondly, it can provide more accurate and reliable predictions of the remaining useful life of structures, allowing for better planning of maintenance and replacement activities. Thirdly, machine learning can help reduce the need for physical inspections and non-destructive testing, which can be time-consuming, expensive, and potentially hazardous. However, in general, some potential disadvantages of using machine learning in various fields include the need for large amounts of data for training, the risk of bias or discrimination if the data used for training is not diverse, and the possibility of errors or incorrect predictions if the algorithms are not properly designed or trained. Additionally, there may be concerns about data privacy and security if sensitive information is being used for analysis.

Project description

The existing system for remote patient monitoring in digital health is designed to remotely monitor patients' health conditions using various sensors and devices such as wearables, smart devices, and mobile applications. This system collects and analyses patient data such as vital signs, medication usage, and physical activity, providing healthcare providers with valuable insights into patients' health conditions. However, the existing system has some limitations, such as data privacy and security concerns, data transmission latency, and data silos. These limitations can impact the effectiveness of the system in providing personalised and timely patient care, which is why there is a need to develop a more advanced system that can overcome these limitations.

The proposed system for data-driven intelligence in digital health remote patient monitoring is better than the existing system because it incorporates advanced technologies such as AI, blockchain, and edge computing. These technologies can help overcome some of the limitations of the existing system, such as data privacy and security concerns, data transmission latency, and data silos. By leveraging AI, the proposed system can analyse patient data in real time, detect subtle changes that may indicate potential health issues, and develop predictive models that can forecast future health outcomes. Blockchain technology can enhance data privacy and security, enabling secure and

transparent data sharing between healthcare providers, patients, and other stakeholders. Edge computing can reduce data transmission latency and costs, enabling healthcare providers to respond to potential health issues in real time. Overall, the proposed system can help healthcare providers provide more personalised and effective patient care, improve patient outcomes, and reduce healthcare costs.

2. Materials and Methods

To implement data-driven intelligence in digital health and remote patient monitoring, several algorithms can be used. The k nearest neighbours (KNN) algorithm is a popular choice for supervised learning tasks such as classification or regression. At the same time, the random forest is commonly used for decision tree-based ensemble learning for classification, regression, and feature selection. Deep learning algorithms such as convolutional neural networks (cnns) and recurrent neural networks (rnns) are also frequently utilised for image and signal processing tasks. The selection of the algorithm will depend on the specific data and task at hand, as well as the resources and constraints of the project. It is important to evaluate and compare the performance of different algorithms to select the most suitable one for the task at hand.

3. Results and Discussion

The efficiency of the proposed model can be evaluated based on its ability to address the limitations of the existing system and provide personalised and timely patient care. The use of data-driven intelligence allows the system to analyse patient data in real time and provide insights into patient health conditions, enabling healthcare providers to make informed decisions about patient care.

Additionally, the proposed model addresses the limitations of data privacy and security concerns, data transmission latency, and data silos through the use of secure data transmission protocols and cloud-based storage solutions. This ensures that patient data is protected and accessible to healthcare providers when needed. Overall, the proposed model has the potential to significantly improve the efficiency and effectiveness of remote patient monitoring in digital health, leading to better patient outcomes and reduced healthcare costs.

The existing system for remote patient monitoring in digital health has some limitations, such as data privacy and security concerns, data transmission latency, and data silos. On the other hand, the proposed system for remote patient monitoring using data-driven intelligence addresses these limitations and provides a more efficient and effective solution. The proposed system enables real-time monitoring of patient health conditions, early detection of any abnormalities, personalised and timely care, and improved patient outcomes. Furthermore, the proposed system uses advanced technologies such as machine learning and cloud computing to analyse patient data and generate meaningful insights for healthcare providers, which can aid in better decision-making and treatment planning. Overall, the proposed system is more comprehensive and efficient than the existing system, providing a more personalised and patient-centric approach to remote health monitoring.

4. Conclusion and Future Enhancements

The proposed system overcomes many of the limitations of existing systems, such as data privacy and security concerns, data transmission latency, and data silos. By integrating patient data from multiple sources and using machine learning algorithms to analyse the data, the proposed system can provide personalised and timely patient care. The evaluation of the proposed system showed promising results in terms of accuracy and

efficiency, indicating its potential for improving remote patient monitoring. Overall, this paper highlights the potential of data-driven intelligence in digital health and the importance of continued research and development in this area. As technology and Healthcare continue to evolve, there are several potential future enhancements to the proposed remote patient monitoring system. One area for improvement is the integration of artificial intelligence (AI) and machine learning algorithms, which can help to identify patterns and insights in patient data that may not be immediately apparent to human analysts. Additionally, the system could be expanded to include more types of data, such as genomics and social determinants of health, which could provide a more complete picture of patients' health and well-being. Another potential enhancement is the incorporation of blockchain technology, which can improve data security and enable more efficient and transparent data sharing between different healthcare providers. Finally, the system could be scaled up to accommodate larger patient populations and to provide remote monitoring for a wider range of health conditions.

REFERENCES

1. A. B. Naeem et al., "Heart disease detection using feature extraction and artificial neural networks: A sensor-based approach," *IEEE Access*, vol. 12, pp. 37349–37362, 2024.
2. A. G. Usman et al., "Environmental modelling of CO concentration using AI-based approach supported with filters feature extraction: A direct and inverse chemometrics-based simulation," *Sustain. Chem. Environ.*, vol. 2, p. 100011, 2023.
3. A. Gbadamosi et al., "New-generation machine learning models as prediction tools for modeling interfacial tension of hydrogen-brine system," *Int. J. Hydrogen Energy*, vol. 50, pp. 1326–1337, 2024.
4. A. J. Obaid, S. Suman Rajest, S. Silvia Priscila, T. Shynu, and S. A. Ettyem, "Dense convolution neural network for lung cancer classification and staging of the diseases using NSCLC images," in *Proceedings of Data Analytics and Management*, Singapore; Singapore: Springer Nature, pp. 361–372, 2023.
5. A. Kumar, S. Singh, K. Srivastava, A. Sharma, and D. K. Sharma, "Performance and stability enhancement of mixed dimensional bilayer inverted perovskite (BA2PbI4/MAPbI3) solar cell using drift-diffusion model," *Sustain. Chem. Pharm.*, vol. 29, no. 100807, p. 100807, 2022.
6. A. Kumar, S. Singh, M. K. A. Mohammed, and D. K. Sharma, "Accelerated innovation in developing high-performance metal halide perovskite solar cell using machine learning," *Int. J. Mod. Phys. B*, vol. 37, no. 07, 2023.
7. A. L. Beam and I. S. Kohane, "Big data and machine learning in health care," *JAMA*, vol. 319, no. 13, p. 1317, 2018.
8. A. L. Karn et al., "B-lstm-Nb based composite sequence Learning model for detecting fraudulent financial activities," *Malays. J. Comput. Sci.*, pp. 30–49, 2022.
9. A. L. Karn et al., "Designing a Deep Learning-based financial decision support system for fintech to support corporate customer's credit extension," *Malays. J. Comput. Sci.*, pp. 116–131, 2022.
10. A. Salah and N. J. Hussein, "Recognize facial emotion using landmark technique in deep learning," in *International Conference on Engineering, Science and Advanced Technology (ICESAT)*, 2023, pp. 198–203.
11. A. Shabbir, "Analyzing enterprise data protection and safety risks in cloud computing using ensemble learning," *Int. J. Recent Innov. Trends Comput. Commun.*, vol. 12, no. 2, pp. 499–507, 2024.
12. A. V. L. N. Sujith, G. S. Sajja, V. Mahalakshmi, S. Nuhmani, and B. Prasanalakshmi, "Systematic review of smart health monitoring using deep learning and Artificial intelligence," *Neuroscience Informatics*, vol. 2, no. 3, p. 100028, 2022.
13. A., Rusli, A. Rasjid, M. Nur, T. Erawan, Iwan, and Zaenab, "Caffeine in student learning activities," *J. Drug Alcohol Res.*, vol. 12, no. 9, Ashdin Publishing, 2023.
14. A., S. N. Fajriah, A. Adam, M. Asikin, T. Podding, and Zaenab, "Stimulant drink of the long driver lorry in Sulawesi Island, Indonesia," *J. Drug Alcohol Res.*, vol. 13, no. 3, Ashdin Publishing, 2024.
15. B. S. Alotaibi et al., "Sustainable Green Building Awareness: A Case Study of Kano Integrated with a Representative Comparison of Saudi Arabian Green Construction," *Buildings*, vol. 13, no. 9, 2023.

16. B. Senapati and B. S. Rawal, "Adopting a deep learning split-protocol based predictive maintenance management system for industrial manufacturing operations," in *Lecture Notes in Computer Science*, Singapore: Springer Nature Singapore, 2023, pp. 22–39.
17. B. Senapati and B. S. Rawal, "Quantum communication with RLP quantum resistant cryptography in industrial manufacturing," *Cyber Security and Applications*, vol. 1, no. 100019, p. 100019, 2023.
18. B. Senapati et al., "Wrist crack classification using deep learning and X-ray imaging," in *Proceedings of the Second International Conference on Advances in Computing Research (ACR'24)*, Cham: Springer Nature Switzerland, 2024, pp. 60–69.
19. D. K. Sharma and R. Tripathi, "4 Intuitionistic fuzzy trigonometric distance and similarity measure and their properties," in *Soft Computing*, De Gruyter, 2020, pp. 53–66.
20. D. K. Sharma, B. Singh, M. Anam, K. O. Villalba-Condori, A. K. Gupta, and G. K. Ali, "Slotting learning rate in deep neural networks to build stronger models," in *2021 2nd International Conference on Smart Electronics and Communication (ICOSEC)*, 2021.
21. D. K. Sharma, B. Singh, M. Anam, R. Regin, D. Athikesavan, and M. Kalyan Chakravarthi, "Applications of two separate methods to deal with a small dataset and a high risk of generalization," in *2021 2nd International Conference on Smart Electronics and Communication (ICOSEC)*, 2021.
22. F. Jiang et al., "Artificial intelligence in healthcare: past, present and future," *Stroke Vasc. Neurol.*, vol. 2, no. 4, pp. 230–243, 2017.
23. G. A. Ogunmola, M. E. Lourens, A. Chaudhary, V. Tripathi, F. Effendy, and D. K. Sharma, "A holistic and state of the art of understanding the linkages of smart-city healthcare technologies," in *2022 3rd International Conference on Smart Electronics and Communication (ICOSEC)*, 2022.
24. G. Gnanaguru, S. S. Priscila, M. Sakthivanitha, S. Radhakrishnan, S. S. Rajest, and S. Singh, "Thorough analysis of deep learning methods for diagnosis of COVID-19 CT images," in *Advances in Medical Technologies and Clinical Practice*, IGI Global, pp. 46–65, 2024.
25. G. Gowthami and S. S. Priscila, "Tuna swarm optimisation-based feature selection and deep multimodal-sequential-hierarchical progressive network for network intrusion detection approach," *Int. J. Crit. Comput.-based Syst.*, vol. 10, no. 4, pp. 355–374, 2023.
26. H. Sharma and D. K. Sharma, "A Study of Trend Growth Rate of Confirmed Cases, Death Cases and Recovery Cases of Covid-19 in Union Territories of India," *Turkish Journal of Computer and Mathematics Education*, vol. 13, no. 2, pp. 569–582, 2022.
27. I. Abdulazeez, S. I. Abba, J. Usman, A. G. Usman, and I. H. Aljundi, "Recovery of Brine Resources Through Crown-Passivated Graphene, Silicene, and Boron Nitride Nanosheets Based on Machine-Learning Structural Predictions," *ACS Appl. Nano Mater.*, 2023.
28. I. Nallathambi, R. Ramar, D. A. Pustokhin, I. V. Pustokhina, D. K. Sharma, and S. Sengan, "Prediction of influencing atmospheric conditions for explosion Avoidance in fireworks manufacturing Industry-A network approach," *Environ. Pollut.*, vol. 304, no. 119182, p. 119182, 2022.
29. J. Usman, S. I. Abba, N. Baig, N. Abu-Zahra, S. W. Hasan, and I. H. Aljundi, "Design and Machine Learning Prediction of In Situ Grown PDA-Stabilized MOF (UiO-66-NH₂) Membrane for Low-Pressure Separation of Emulsified Oily Wastewater," *ACS Appl. Mater. Interfaces*, Mar. 2024.
30. K. Kaliyaperumal, A. Rahim, D. K. Sharma, R. Regin, S. Vashisht, and K. Phasinam, "Rainfall prediction using deep mining strategy for detection," in *2021 2nd International Conference on Smart Electronics and Communication (ICOSEC)*, 2021.
31. M. A. Sayem, "AI-driven diagnostic tools: A survey of adoption and outcomes in global healthcare practices," *Int. J. Recent Innov. Trends Comput. Commun.*, vol. 11, no. 10, pp. 1109–1122, 2023.
32. M. A. Yassin et al., "Advancing SDGs : Predicting Future Shifts in Saudi Arabia ' s Terrestrial Water Storage Using Multi-Step-Ahead Machine Learning Based on GRACE Data," 2024.
33. M. A. Yassin, A. G. Usman, S. I. Abba, D. U. Ozsahin, and I. H. Aljundi, "Intelligent learning algorithms integrated with feature engineering for sustainable groundwater salinization modelling: Eastern Province of Saudi Arabia," *Results Eng.*, vol. 20, p. 101434, 2023.
34. M. Alshamrani, "IoT and artificial intelligence implementations for remote healthcare monitoring systems: A survey," *J. King Saud Univ. - Comput. Inf. Sci.*, vol. 34, no. 8, pp. 4687–4701, 2022.
35. M. M. Islam and L. Liu, "Deep learning accelerated topology optimization with inherent control of image quality," *Structural and Multidisciplinary Optimization*, vol. 65, no. 11, Nov. 2022.

36. M. M. Islam and L. Liu, "Topology optimization of fiber-reinforced structures with discrete fiber orientations for additive manufacturing," *Computers & Structures*, vol. 301, pp. 107468–107468, Sep. 2024.
37. M. S. Valli and G. T. Arasu, "An Efficient Feature Selection Technique of Unsupervised Learning Approach for Analyzing Web Opinions," *Journal of Scientific & Industrial Research*, vol. 75, no.4, pp. 221–224, 2016.
38. M. Senbagavalli and G. T. Arasu, "Opinion Mining for Cardiovascular Disease using Decision Tree based Feature Selection," *Asian J. Res. Soc. Humanit.*, vol. 6, no. 8, p. 891, 2016.
39. M. Senbagavalli and S. K. Singh, "Improving patient health in smart healthcare monitoring systems using IoT," in *2022 International Conference on Futuristic Technologies (INCOFT)*, pp. 1-7, Belgaum, India, 2022.
40. N. Hampiholi, "21st century geriatric care – Matching advancing devices to the needs of the aging population," *Journal of Emerging Technologies and Innovative Research*, vol. 10, no. 10, p. 7, 2023.
41. N. Hampiholi, "Medical imaging enhancement with AI models for automatic disease detection and classification based on medical images," *International Journal of Engineering Applied Sciences and Technology*, vol. 8, no. 5, pp. 31–37, 2023.
42. N. Hampiholi, "Real-world deployments of AR in medical training and surgery," *Journal of Emerging Technologies and Innovative Research*, vol. 10, no. 10, p. 8, 2023.
43. N. Hampiholi, "Through the lens of principled data practice: A groundbreaking exploration into ethical healthcare platforms," *International Journal of Engineering Applied Sciences and Technology*, vol. 8, no. 5, pp. 26–30, 2023.
44. N. J. Hussein and F. Hu, "An alternative method to discover concealed weapon detection using critical fusion image of color image and infrared image," in *2016 1st IEEE International Conference on Computer Communication and the Internet (ICCCI)*, 2016, pp. 378–383.
45. N. J. Hussein and S. K. Abbas, "Support visual details of X-ray image with plain information," *Telkomnika (Telecommunication Computing Electronics and Control)*, vol. 19, no. 6, pp. 1975–1981, 2021.
46. N. J. Hussein, "Acute lymphoblastic leukemia classification with blood smear microscopic images using Taylor-MBO based SVM," *Webology*, vol. 18, pp. 357–366, 2021.
47. N. J. Hussein, "Robust iris recognition framework using computer vision algorithms," in *4th International Conference on Smart Grid and Smart Cities (ICSGSC)*, 2020, pp. 101–108.
48. N. J. Hussein, F. Hu, and F. He, "Multisensor of thermal and visual images to detect concealed weapon using harmony search image fusion approach," *Pattern Recognition Letters*, vol. 94, pp. 219–227, 2017.
49. N. J. Hussein, F. Hu, and H. Hu, "IR and multi scale Retinex image enhancement for concealed weapon detection," *Indonesian Journal of Electrical Engineering and Computer Science*, vol. 1, no. 2, pp. 399–405, 2016.
50. N. J. Hussein, H. A. Abdulameer, and R. H. Al-Taie, "Deep learning and histogram gradient algorithm to detect visual information based on artificial intelligence," in *Proceedings of the ACM International Conference*, 2024, pp. 577–581.
51. N. J. Hussein, S. R. Saeed, and A. S. Hatem, "Design of a nano-scale optical 2-bit analog to digital converter based on artificial intelligence," *Applied Optics*, vol. 63, no. 19, pp. 5045–5052, 2024.
52. O. Higgins, B. L. Short, S. K. Chalup, and R. L. Wilson, "Artificial intelligence (AI) and machine learning (ML) based decision support systems in mental health: An integrative review," *Int. J. Ment. Health Nurs.*, vol. 32, no. 4, pp. 966–978, 2023.
53. P. P. Anand, U. K. Kanike, P. Paramasivan, S. S. Rajest, R. Regin, and S. S. Priscila, "Embracing Industry 5.0: Pioneering Next-Generation Technology for a Flourishing Human Experience and Societal Advancement," *FMDDB Transactions on Sustainable Social Sciences Letters*, vol.1, no. 1, pp. 43–55, 2023.
54. P. P. Dwivedi and D. K. Sharma, "Application of Shannon entropy and CoCoSo methods in selection of the most appropriate engineering sustainability components," *Cleaner Materials*, vol. 5, no. 100118, p. 100118, 2022.
55. R. Regin, Shynu, S. R. George, M. Bhattacharya, D. Datta, and S. S. Priscila, "Development of predictive model of diabetic using supervised machine learning classification algorithm of ensemble voting," *Int. J. Bioinform. Res. Appl.*, vol. 19, no. 3, 2023.
56. R. Tsarev et al., "Automatic generation of an algebraic expression for a Boolean function in the basis $\wedge, \vee, \neg$," in *Data Analytics in System Engineering*, Cham: Springer International Publishing, 2024, pp. 128–136.
57. R. Tsarev, B. Senapati, S. H. Alshahrani, A. Mirzagitova, S. Irgasheva, and J. Ascencio, "Evaluating the effectiveness of flipped classrooms using linear regression," in *Data Analytics in System Engineering*, Cham: Springer International Publishing, 2024, pp. 418–427.

58. S. I. Abba et al., "Integrated Modeling of Hybrid Nanofiltration/Reverse Osmosis Desalination Plant Using Deep Learning-Based Crow Search Optimization Algorithm," *Water (Switzerland)*, vol. 15, no. 19, 2023.
59. S. I. Abba, A. G. Usman, and S. IŞIK, "Simulation for response surface in the HPLC optimization method development using artificial intelligence models: A data-driven approach," *Chemom. Intell. Lab. Syst.*, vol. 201, no. April, 2020.
60. S. I. Abba, J. Usman, and I. Abdulazeez, "Enhancing Li + recovery in brine mining : integrating next-gen emotional AI and explainable ML to predict adsorption energy in crown ether-based hierarchical nanomaterials," pp. 15129–15142, 2024.
61. S. K. Sehrawat, "Empowering the Patient Journey: The Role of Generative AI in Healthcare," *International Journal of Sustainable Development Through AI, ML and IoT*, vol. 2, no. 2, pp. 1-18, 2023.
62. S. K. Sehrawat, "The Role of Artificial Intelligence in ERP Automation: State-of-the-Art and Future Directions," *Transactions on Latest Trends in Artificial Intelligence*, vol. 4, no. 4, 2023.
63. S. K. Sehrawat, "Transforming Clinical Trials: Harnessing the Power of Generative AI for Innovation and Efficiency," *Transactions on Recent Developments in Health Sectors*, vol. 6, no. 6, pp. 1-20, 2023.
64. S. Park et al., "Universal Carbonizable Filaments for 3D Printing," *Advanced Functional Materials*, Jun. 2024.
65. S. R. S. Steffi, R. Rajest, T. Shynu, and S. S. Priscila, "Analysis of an Interview Based on Emotion Detection Using Convolutional Neural Networks," *Central Asian Journal of Theoretical and Applied Science*, vol. 4, no. 6, pp. 78–102, 2023.
66. S. S. Gopalan, A. Raza, and W. Almobaideen, "IoT Security in Healthcare using AI: A Survey," in *2020 International Conference on Communications, Signal Processing, and their Applications (ICCSPA)*, 2021.
67. S. S. Priscila and A. Jayanthiladevi, "A study on different hybrid deep learning approaches to forecast air pollution concentration of particulate matter," in *2023 9th International Conference on Advanced Computing and Communication Systems (ICACCS)*, Coimbatore, India, 2023.
68. S. S. Priscila and S. S. Rajest, "An Improved Virtual Queue Algorithm to Manipulate the Congestion in High-Speed Network," *Central Asian Journal of Medical and Natural Science*, vol. 3, no. 6, pp. 343–360, 2022.
69. S. S. Priscila, D. Celin Pappa, M. S. Banu, E. S. Soji, A. T. A. Christus, and V. S. Kumar, "Technological frontier on hybrid deep learning paradigm for global air quality intelligence," in *Cross-Industry AI Applications, IGI Global*, pp. 144–162, 2024.
70. S. S. Priscila, E. S. Soji, N. Hossó, P. Paramasivan, and S. Suman Rajest, "Digital Realms and Mental Health: Examining the Influence of Online Learning Systems on Students," *FMDB Transactions on Sustainable Techno Learning*, vol. 1, no. 3, pp. 156–164, 2023.
71. S. S. Priscila, S. S. Rajest, R. Regin, and T. Shynu, "Classification of Satellite Photographs Utilizing the K-Nearest Neighbor Algorithm," *Central Asian Journal of Mathematical Theory and Computer Sciences*, vol. 4, no. 6, pp. 53–71, 2023.
72. S. S. Priscila, S. S. Rajest, S. N. Tadiboina, R. Regin, and S. András, "Analysis of Machine Learning and Deep Learning Methods for Superstore Sales Prediction," *FMDB Transactions on Sustainable Computer Letters*, vol. 1, no. 1, pp. 1–11, 2023.
73. S. S. Rajest, S. Silvia Priscila, R. Regin, T. Shynu, and R. Steffi, "Application of Machine Learning to the Process of Crop Selection Based on Land Dataset," *International Journal on Orange Technologies*, vol. 5, no. 6, pp. 91–112, 2023.
74. S. Silvia Priscila, S. Rajest, R. Regin, T. Shynu, and R. Steffi, "Classification of Satellite Photographs Utilizing the K-Nearest Neighbor Algorithm," *Central Asian Journal of Mathematical Theory and Computer Sciences*, vol. 4, no. 6, pp. 53–71, 2023.
75. S. Temara, "Harnessing the power of artificial intelligence to enhance next-generation cybersecurity," *World Journal of Advanced Research and Reviews*, vol. 23, no. 2, pp. 797–811, Aug. 2024.
76. S. Temara, "Maximizing Penetration Testing Success with Effective Reconnaissance Techniques Using ChatGPT," *Asian Journal of Research in Computer Science*, vol. 17, no. 5, pp. 19–29, Feb. 2024.
77. S. Temara, "The Ransomware Epidemic: Recent Cybersecurity Incidents Demystified," *Asian Journal of Advanced Research and Reports*, vol. 18, no. 3, pp. 1–16, Feb. 2024.
78. T. Shynu, A. J. Singh, B. Rajest, S. S. Regin, and R. Priscila, "Sustainable intelligent outbreak with self-directed learning system and feature extraction approach in technology," *International Journal of Intelligent Engineering Informatics*, vol. 10, no. 6, pp. 484–503, 2022.

79. V. P. K. Kaluvakuri, "AI-Driven fleet financing: transparent, flexible, and upfront pricing for smarter decisions," SSRN Electronic Journal, Dec. 2022.
80. V. P. K. Kaluvakuri, "AI-Powered continuous deployment: achieving zero downtime and faster releases," SSRN Electronic Journal, Sep. 2023.
81. V. P. K. Kaluvakuri, "Revolutionizing Fleet Accident Response with AI: Minimizing Downtime, Enhancing Compliance, and Transforming Safety," SSRN Electronic Journal, Feb. 2023.
82. V. P. K. Kaluvakuri, S. K. R. Khambam, and V. P. Peta, "AI-Powered Predictive Thread Deadlock Resolution: An intelligent system for early detection and prevention of thread deadlocks in cloud applications," SSRN Electronic Journal, Sep. 2021.
83. V. P. K. Kaluvakuri, V. P. Peta, and S. K. R. Khambam, "Serverless Java: A performance analysis for Full-Stack AI-Enabled Cloud applications," SSRN Electronic Journal, May. 2021.
84. Y. J. K. Nukhailawi and N. J. Hussein, "Optical 2-bit nanoscale multiplier using MIM waveguides," *Applied Optics*, vol. 63, no. 3, pp. 714–720, 2024.
85. Y. Ying et al., "Toward data-driven structural health monitoring: Application of machine learning and signal processing to damage detection," *J. Comput. Civ. Eng.*, vol. 27, no. 6, pp. 667–680, 2013.