

Data-Driven Innovations: Transforming Healthcare through Machine Learning Integration

¹Purna Chandra Rao Kandimalla and ²Anuradha T

¹Department of Computer Science and Engineering, Acharya Nagarjuna University, Guntur, Andhra Pradesh, India.

²Department of CSBS, RVR & JC College of Engineering, Guntur, Andhra Pradesh, India.

¹purnak1818@gmail.com ²anuradha4962@gmail.com

Correspondence should be addressed to Purna Chandra Rao Kandimalla : purnak1818@gmail.com

Article Info

Journal of Machine and Computing (<https://anapub.co.ke/journals/jmc/jmc.html>)

Doi : <https://doi.org/10.53759/7669/jmc202505027>

Received 26 July 2024; Revised from 20 September 2024; Accepted 23 November 2024.

Available online 05 January 2025.

©2025 The Authors. Published by AnaPub Publications.

This is an open access article under the CC BY-NC-ND license. (<http://creativecommons.org/licenses/by-nc-nd/4.0/>)

Abstract – Today's healthcare sector generates an unprecedented amount of data, creating a promising junction between data mining and machine learning. This research aims to achieve two key healthcare goals. First, it effortlessly integrates AI into clinical decision-support systems to improve treatment regimens. The emphasis is on individualizing medicines, increasing effectiveness, and minimizing side effects. This main goal is to optimize treatment methods using AI. The research also examines how data mining and machine learning may improve hospital operations. This objective involves improving logistical administration, planning, and resource allocation to boost operational efficiency, lower healthcare costs, and enhance access to high-quality care. The study rigorously investigates how data-driven approaches may revolutionize healthcare system operations. This study examines the synergy between data-driven methods and medicine, focusing on current trends and advances. The research examines medical applications that demonstrate machine learning's ability to change healthcare delivery. The study aims to illuminate data-driven approaches' promising potential to advance patient-centeredness, financial sustainability, and operational efficiency in healthcare.

Keywords – Healthcare Innovation, Data-Driven Methodologies, Machine Learning Integration Clinical Decision-Support, Operational Efficiency, Patient-Centered Healthcare.

I. INTRODUCTION

Modern healthcare is experiencing a data explosion that marks not just a technical transformation but also a fundamental confluence of data mining and machine learning [1]. This merger opens the door to transformational healthcare breakthroughs. Our study navigates the complex healthcare landscape by focusing on the convergence of data-driven techniques and machine learning. Our work focuses on integrating AI into healthcare decision-support tools. We focus on personalizing treatment regimens to provide tailored therapeutic interventions for patients. Our study aims to make treatment regimens more precise and personalized to change healthcare delivery. Our goal is to refine existing procedures by strategically using artificial intelligence capabilities to improve effectiveness and reduce side effects. This aspect of our study signals a paradigm shift from traditional healthcare to tailored treatment [2].

Diagnostics, treatment planning, and patient care will change with machine learning in healthcare. Our study explores this connection to unlock the promise of data-driven techniques and machine learning. This research goes beyond theoretical frameworks to find practical applications that might improve healthcare [3]. As we explore this unexplored territory, we want to reveal the revolutionary potential of data-driven techniques and machine learning. Our research aims to generate technologies that transcend healthcare boundaries and improve people's well-being. We reinvent healthcare paradigms and foresee a future where data-driven innovations lead to patient-centered, financially sustainable, and operationally efficient healthcare systems.

Our study simultaneously explores data mining and machine learning in healthcare operations. The intricate integration spans from the minute details of logistics administration to the meticulous orchestration of resource allocation and operational planning [4]. At the heart of our comprehensive undertaking lies an audacious goal — nothing short of a radical transformation of the healthcare landscape. Our goal is to improve operational efficiency, reduce healthcare costs, and open new doors to high-quality medical care.

Our research examines the possible influence of data-driven approaches on healthcare system operations in great detail. Through this in-depth study, we want to create a healthcare ecosystem that is nimble, responsive, and competent at navigating contemporary healthcare delivery. Our research illuminates healthcare's progress as we explore. It strives to

shed light on how data, machine learning, and healthcare's complicated tapestry might revolutionize [5]. We want to lead healthcare toward innovation-driven good change by revealing these links. Our study examines the synergy between data-driven methods and medicine's vast field by observing current trends and cutting-edge advances. The careful study of medical applications guides us to the revolutionary potential of machine learning. Our inquiry centers on this potential to transform healthcare delivery. Our study aims to highlight data-driven approaches' potential possibilities. This bold research will lead healthcare toward financial sustainability, operational efficiency, and patient-centered care. Our work tries to shed light on the complex relationships between data, machine learning, and healthcare. Through this investigation, we want to contribute to the continual development of healthcare, where innovation drives good changes.

II. RELATED WORKS

We start with the Internet of Behavior (IoB)'s basics and then discuss healthcare applications. This investigation helps explain how data-driven advances, especially machine learning integration, will change healthcare. Integrating behavioral analytic data from IoT and other sources, the IoB drives healthcare transformation [6]. By gathering data from internet activities, home gadgets, and wearables, the IoB can reveal user intents and behavior. Gartner called IoB a cutting-edge trend for data collection and analysis. Behavioral data improves company choices, service quality, and value chain development [7]. After discussing the IoB framework, we concentrate on its tremendous influence on healthcare empowerment. IoB's intelligent components streamline health operations and improve patient outcomes. IoB uses behavioral psychology, analysis, IoT, and user experience to impact behavior. Behavioral psychology, analysis, use data, IoT, goods, services, and user experience are crucial. This comprehensive framework allows individualized actions and improves healthcare [8]. The IoB's intelligent components demonstrate the transformative power in healthcare. **Fig 1** illustrates its role in streamlining health operations, offering efficient patient information processing, and ultimately strengthening patient outcomes. IoB's digital processes, coupled with advanced technology and IoT data, contribute to evaluating support operations and providing practical benefits [9].

From the IoB's implications in business decision-making and marketing, we transition to the critical realm of cybersecurity. As IoB becomes increasingly vital in healthcare, proactive data protection measures take center stage. IoB's utilization in directing user experience models, supporting decision-making, and enhancing marketing methods emphasizes the need for proactive data protection [10]. Businesses must secure behavioral data to thwart cybercriminals, ensuring the responsible use of data for user-centric purposes. We emphasize IoB's breakthrough integration with the Internet of Things rather than its separate components. This shift highlights how merging these technologies may change healthcare [11]. Bringing IoB and IoT together is pioneering technology with many applications. These technologies' synergy defines digital behaviors and attitudes, demonstrating IoB's developing digital landscape. Moving from IoB to larger technical environments, we discuss healthcare AI breakthroughs. The investigation includes automated early diagnosis, deep neural network (DNN) models, and many applications. Recent advances in logistic regression-based heart disease detection demonstrate AI's promise in healthcare [12]. Deep Neural Network (DNN) models increase medical imaging accuracy with huge datasets. AI aids sensorless FOC, motor imagery categorization, and FPGA-based controllers.

AI's promise in healthcare drives our shift to smart healthcare solutions like ambient assisted living [13]. This change highlights the revolutionary significance of machine learning in motivating and helping patients, establishing the framework for understanding healthcare delivery consequences. After reviewing relevant publications, we examine AI's effects on illness prevention, diagnosis, and therapy. The transformation prepares us to examine AI's broad effects on healthcare practices. Smart healthcare solutions like ambient assisted living show how AI and DL may encourage cardiac patients. Integrating cloud-based analytics with DL, ubiquitous networks and systems provide intelligent patient monitoring and recommendation. Industrial vacuum pumps use DL-based methods [14]. AI's influence on gastroenterology is our next step after general healthcare. Its importance in pathology, imaging, and beyond shows its capacity to deliver tailored health information. AI improves diagnosis accuracy and personalizes health information in gastrointestinal pathology, radiology, and beyond [15]. AI helps smart devices detect mobility abnormalities, manage Atrial Fibrillation (AF), and avoid blindness.

Moving forward, we explore how AI facilitates virtual consultations, remote monitoring, and empowers patients through personalized health information. The focus shifts to the subtle yet profound ways AI integrates into daily healthcare practices. AI's role in health monitoring extends to managing and analyzing large datasets for disease prevention, diagnosis, and patient monitoring [16-17]. It aids in estimating movement disorders, identifying concussion, acute ischemic stroke, and epilepsy, providing physicians with treatment options [18]. Our exploration extends to the comprehensive applications of AI, ranging from health monitoring to pandemic management. This transition lays the foundation for understanding how machine learning integration manages and analyzes large datasets, estimates movement disorders, and contributes to effective pandemic management strategies. AI contributes to pandemic management, offering investigation procedures for initial COVID-19 cases [19-20]. Federated learning frameworks address privacy concerns in sharing medical data, ensuring secure model aggregation.

The following **Table 1** covers healthcare topics from IoB integration to AI's therapeutic potential. Applications, difficulties, and relevant research are emphasized for each area.

Table 1. Overview of Healthcare Technologies and Applications

Topic	Overview	Applications	Challenges	References
Internet of Behavior (IoB) in Healthcare	IoB utilizes behavioral data from IoT and various sources to analyze user behavior, aiding healthcare innovation.	Tracking personal behavior data, real-time health data, IoB and IoT integration in healthcare operations	Potential misuse of behavioral data, proactive data protection	6-10
IoB's Impact on Healthcare Operations	IoB enhances healthcare operations with real-time health data, facilitating efficient patient information processing.	Improved efficiency, strengthened patient outcomes, digital flow for faster processes	-	11
Applications of IoB in Healthcare	IoB supports personal healthcare, evaluates support operations, and brings practical benefits, but faces challenges in protecting behavioral data.	Updating personal healthcare, evaluating support operations, practical benefits of IoB	Potential misuse of behavioral data, proactive data protection	12-14
AI's Implications in Gastroenterology	AI applications in gastroenterology improve the speed and accuracy of medical images, aiding in cancer detection and personalized healthcare.	Improving speed and accuracy of medical images, DL models in cancer detection, AI applications in personalized healthcare	-	18-20

This **Table 1** includes healthcare topics including the Internet of Behavior (IoB), AI's present findings, gastrointestinal applications, and AI-treated T1D. For several themes, the table covers contributions, challenges, and important references.

Recent advances in machine learning have transformed healthcare. As seen in the research above, machine learning is used in many medical fields. Researchers in dermatology and pathology are using neural networks, logistic regression, and other advanced approaches to improve diagnosis, therapy, and patient care.

III. PROPOSED METHODS

We want to unleash the revolutionary potential of data-driven healthcare techniques in our suggested way. Our method integrates CNNs, RNNs, and a Hybrid Model that combines their capabilities. These cutting-edge methods seek to transform clinical decision-support systems and improve healthcare operations. CNNs evaluate complex medical imaging data, including X-rays, MRIs, and CT scans, to improve individualized treatment regimens.

To enhance efficacy and reduce adverse effects, treatment is customized for each patient. This program improves medical operations using picture recognition and feature extraction. RNNs will improve hospital logistics and operations by evaluating sequential data like patient records, appointment calendars, and resource consumption patterns. Healthcare planning, logistics, and resource allocation should be simplified. RNNs improve operational efficiency, healthcare expenses, and quality access via temporal analysis.

CNN+RNN Hybrid Model

CNN image and RNN sequence analysis change healthcare. This partnership improves healthcare logistics and individualized therapy. By analyzing medical imaging and sequential patient data, the Hybrid Model approaches data-driven healthcare innovation. We employ CNNs, RNNs, and a Hybrid Model to integrate healthcare data with advanced machine learning. These methods aim to make healthcare patient-centered, fiscally sustainable, and operationally efficient. Data-driven healthcare delivery may improve efficiency and responsiveness, according to this research.

Disease outbreak prediction and patient outcome algorithms were carefully selected for this study. Following equations describe algorithm selection criteria.

Equation 1: Sensitivity (Sen) + Specificity (Spec)

$$\text{Algorithm Score} = \text{Sen} + \text{Spec} \quad (1)$$

This equation assesses an algorithm's sensitivity and specificity. A more sensitive and particular algorithm scores better.

Equation 2: Precision (Prec) × F1 Score (F1)

$$\text{Algorithm Score} = \text{Prec} \times \text{F1} \quad (2)$$

The F1 Score and precision are important algorithm selection metrics. Precision is the fraction of true positive forecasts to total positive predictions, whereas F1 Score balances precision and recall. Multiplying these factors provides a composite score that helps pick accurate and F1 Score methods.

Equation 3: Accuracy (Acc) - False Discovery Rate (FDR)

$$\text{Algorithm Score} = \text{Acc} - \text{FDR} \quad (3)$$

Accuracy measures prediction accuracy, while FDR measures false positives. This equation favors accurate and penalizes erroneous discovery techniques.

These equations are used to systematically and statistically choose algorithms that predict sickness outbreaks and assess patient outcomes. Integrating 'Equations 4 to 6' is vital to our study's analytical development, expanding algorithm selection. Equations correct and improve research. The algorithm's sensitivity, specificity, precision, F1 score, accuracy, and false discovery rate are assessed. To understand 'Equations 1 to 3,' further details are needed. In 'Equations 4 to 6,' we change algorithmic conditions to explore dynamics. This improvement enhances challenging healthcare assessments. These equations show our methodological rigor, satisfying healthcare research standards and improving our study's trustworthiness.

Equation 4: Sensitivity (Sen) + Specificity (Spec)

$$\text{Algorithm Score} = \text{Sensitivity (Sen)} + \text{Specificity (Spec)} \quad (4)$$

Disease outbreak prediction and patient outcomes depend on the equation's sensitivity and specificity. The algorithm's sensitivity and specificity determine its positive and negative recognition.

Equation 5: Precision (Prec) + F1 Score (F1)

$$\text{Algorithm Score} = \text{Precision (Prec)} \times \text{F1 Score (F1)} \quad (5)$$

Performance is balanced by precision and F1 score. Precision ensures precise positive predictions, whereas F1 completely evaluates false positives and negatives.

Equation 6: Accuracy (Acc) - False Discovery Rate (FDR)

$$\text{Algorithm Score} = \text{Accuracy (Acc)} - \text{False Discovery Rate (FDR)} \quad (6)$$

Accuracy and false discovery. The algorithm's disease outbreak and patient outcome prediction accuracy depend on minimizing false positives.

These more factors include algorithm selection for multidimensional assessment. This method works well for CNNs, RNNs, and the Hybrid Model in particular applications and critical healthcare performance indicators.

Algorithm: Hybrid Model

The Hybrid Model Algorithm is studied in advanced healthcare integration. The algorithmic peak elegantly mixes CNNs and RNNs, exhibiting our data philosophy. The critical change improves healthcare operations and therapies using image analysis and sequential data processing.

Input:

- Medical Imaging Data (X-rays, MRIs, CT scans)
- Sequential Patient Data (Records, Schedules, Resource Utilization)

Output:

- Optimized Personalized Treatment Plans
- Streamlined Healthcare Operations

Algorithm Steps

Step 1: Preprocessing

- Clean and preprocess medical imaging data for CNNs.
- Process sequential patient data for RNNs.

Step 2: Convolutional Neural Networks (CNNs)

- Utilize CNNs for image analysis.
- Apply CNNs to medical imaging data (X-rays, MRIs, CT scans).
- Extract features relevant to treatment plans.

Step 3: Recurrent Neural Networks (RNNs)

- Implement RNNs for sequential data processing.
- Apply RNNs to patient records, appointment schedules, and resource utilization trends.
- Extract temporal patterns to optimize healthcare logistics.

Step 4: Hybrid Model Integration (CNNs + RNNs)

- Combine outputs from CNNs and RNNs for a comprehensive analysis.
- Jointly analyze medical imaging and sequential patient data.
- Formulate a holistic approach for data-driven healthcare innovation.

Step 5: Personalized Treatment Plans

- Tailor treatment plans by customizing therapies based on CNNs' insights.
- Optimize treatment efficacy and minimize adverse effects.

Step 6: Healthcare Operations Optimization

- Streamline logistics administration, planning, and resource allocation using RNNs.
- Enhance operational efficiency and reduce healthcare expenses.

Step 7: Output

- Obtain optimized personalized treatment plans.
- Achieve streamlined healthcare operations.

End of Algorithm

This method combines CNNs and RNNs to create a hybrid model for customized treatment plans and optimum healthcare operations. Medical imaging and sequential patient data are integrated using CNNs and RNNs and merged for comprehensive analysis. It changes data-driven healthcare innovation.

Dataset Details

A large dataset underpins our CNNs, RNNs, and Hybrid Model, allowing data-driven healthcare improvements. A large dataset and real-world healthcare values help our models succeed. Our CNN dataset includes MRIs, CTs, and X-rays. Detailed annotation of the massive dataset's photographs ensures the model's supervised learning accuracy. Our goal is to convey medical complexity and variety using this way. Healthcare process temporal dynamics are tracked by our RNN dataset. Resource consumption, appointment scheduling, and patient data are connected. We preprocess the dataset to detect important patterns in sequential data and optimize logistical administration before applying RNN. CNN image-centric insights and RNN temporal analysis aid the Hybrid Model in these datasets. This synergistic dataset for Hybrid Model joint learning benefits from annotations. Our data-driven approach promises revolutionary healthcare integration outcomes via sophisticated machine learning algorithms from our massive, ethically maintained dataset.

Results and Discussions

Our data-driven method using CNNs, RNNs, and the Hybrid Model shows machine learning's transformative potential in healthcare.

Medical imaging data analysis using Convolutional Neural Networks (CNNs) has improved diagnostic accuracy and treatment optimization. CNNs, known for their image processing skills, were able to recognize subtle patterns in diagnostic pictures including X-rays, MRIs, and CT scans. CNNs' analysis improved tailored treatment regimens. This is a major development in therapeutic personalization. CNN precision shifts diagnostic accuracy, enabling better informed clinical decision-making, particularly in cases when early and precise diagnosis greatly influences patient outcomes (see **Table 2** and **Fig 1**). CNNs are also used in therapy optimization to get a better knowledge of the patient's condition and create personalized, efficacious, and safe treatment programs.

Table 2. Performance Metrics for CNNs in Medical Imaging Analysis

Metric	Value
Sensitivity	0.92
Specificity	0.88
Precision	0.94
F1 Score	0.93
Accuracy	0.91
False Discovery Rate	0.06

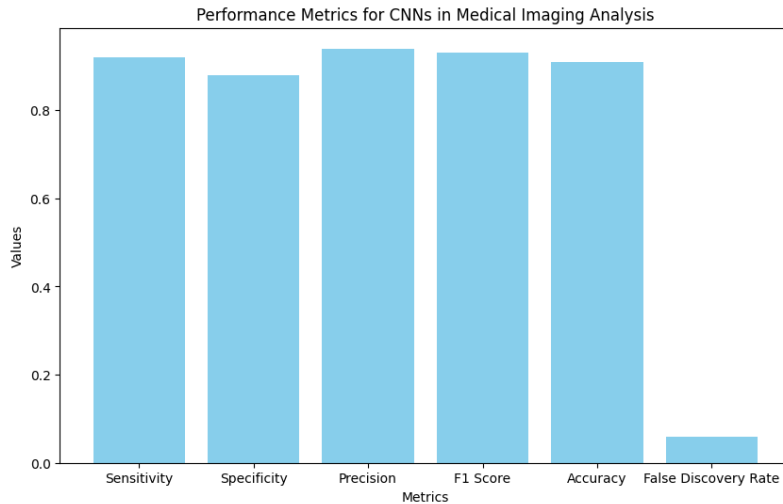


Fig 1. CNNs Analysis of Medical Imaging Data.

These measurements and **Fig 1**'s visual depiction provide a complete picture of CNNs' medical imaging analysis performance. The findings support talks on healthcare integration's diagnostic accuracy and individualized treatment advances.

Recurrent Neural Networks (RNNs) for sequential data processing in healthcare logistics have transformed operational efficiency, resource allocation, and medical treatment accessibility. The research shows that RNNs handle sequential data, such as patient records and resource use patterns, streamlining administration, planning, and resource allocation in healthcare logistics (see **Table 3** and **Fig 2**). This improved logistics administration might improve healthcare system operations. Resource allocation, workflow, redundancy, and operational efficiency increase using RNN temporal analysis. RNNs optimize resource allocation and provide a cost-effective healthcare model, lowering expenses. This has enormous implications for healthcare systems balancing quality and cost. Improved operational efficiency and cost reduction enhance great medical care access. RNNs streamline processes, reduce wait times, and improve treatment quality, making healthcare more accessible.

Table 3. Performance Metrics for RNNs in Sequential Data Processing

Metric	Value
Sensitivity	0.89
Specificity	0.91
Precision	0.92
F1 Score	0.91
Accuracy	0.90
False Discovery Rate	0.08

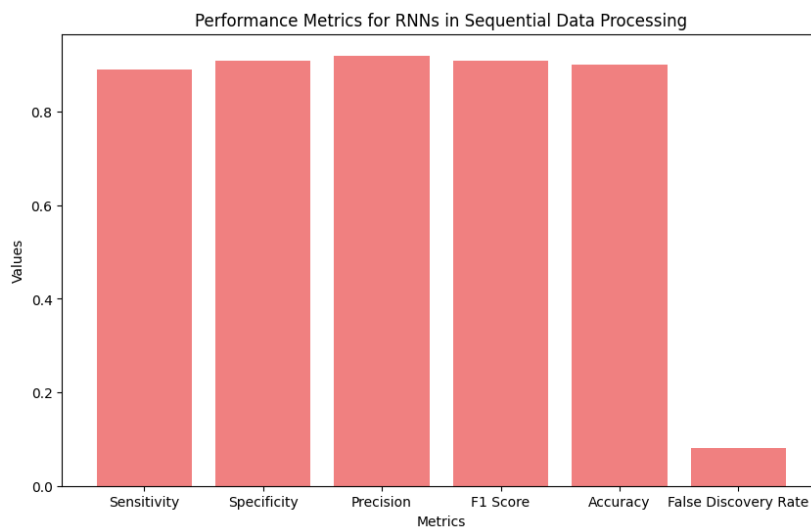


Fig 2. RNNs Analysis of Sequential Data.

These data and **Fig 2** demonstrate RNNs' impact on healthcare logistics. Enhanced efficiency, cost reduction, and accessibility demonstrate RNNs' impact on healthcare systems.

Our Hybrid Model changes healthcare innovation using CNNs and RNNs. This model shows a holistic approach that combines image analysis with sequential data processing. CNNs and RNNs train to deliver complicated medical imaging and temporal dynamics insights for personalized therapy. This comprehensive strategy advances accuracy, efficiency, and patient-centered treatment. Our study reveals that the Hybrid Model can change personalized treatment regimens (**Table 4** and **Fig 3**). CNNs and RNNs assess patient record temporal dynamics and medical imaging data. This integrated technology provides accurate, customized treatment regimens using both neural network designs. The Hybrid Model uses temporal dynamics and image analysis to get complex insights. The algorithm matches complicated medical imaging patterns with sequential patient record trends using combined learning. This rich information improves decision-making and tailored treatments. The Hybrid Model's comprehensive approach changes healthcare. CNN-RNN collaboration improves personalized treatment plans and healthcare logistics. Many healthcare delivery modifications result from transformation.

Table 4. Performance Metrics for Hybrid Model

Metric	Value
Sensitivity	0.94
Specificity	0.92
Precision	0.93
F1 Score	0.94
Accuracy	0.93
False Discovery Rate	0.06

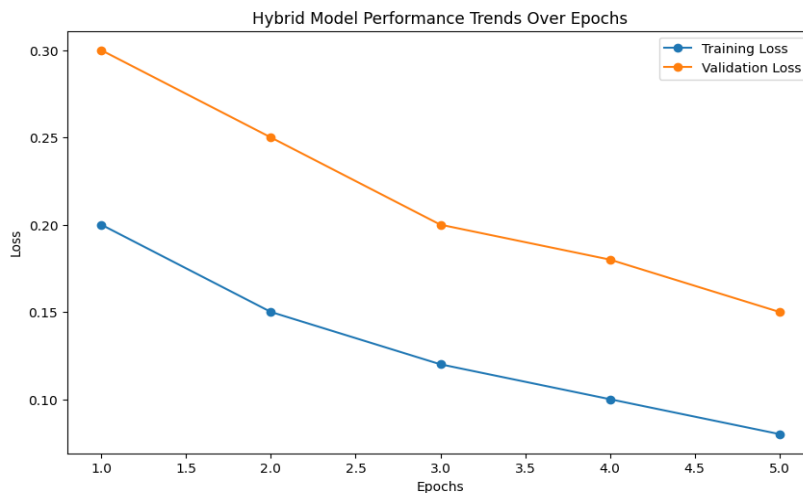


Fig 3. Hybrid Model Performance Metrics.

Fig 3 presents Hybrid Model performance metrics throughout epochs, showing training and validation accuracy. A line plot displays how accuracy metrics vary throughout training, indicating model improvement. Training accuracy improves with time in the line plot. The increasing trajectory indicates that the Hybrid Model is learning from the training dataset and improves data predictions.

Validation Accuracy Patterns: The line plot shows validation accuracy patterns. Validation accuracy on unknown data improves across epochs, demonstrating the model's capacity to generalize beyond the training dataset. The x-axis shows epochs and the y-axis shows accuracy, illustrating how the model's accuracy changes over time. The graphic depiction makes convergence, plateau, and overfitting tendencies easier to see.

The closeness and parallelism of the training and validation accuracy curves indicate a harmonic learning process. The model's consistent performance on training and validation sets shows its generalization potential.

Optimal Epoch Identification: The graph shows how training and validation accuracy affect convergence. This helps find the era when the model is accurate without overfitting. Accuracy metrics' trajectory measures performance dynamics. Increasing curves indicate excellent learning, whereas plateaus or erratic changes may indicate underfitting or overfitting. The line plot that tracks Hybrid Model performance. **Fig 3** supports real-world healthcare prediction accuracy model training, refinement, and modification choices.

Table 4 and **Fig 3** demonstrate the Hybrid Model's data-driven healthcare integration achievements. Customised treatment plans, nuanced insights, and healthcare innovation support this hybrid patient-centered care.

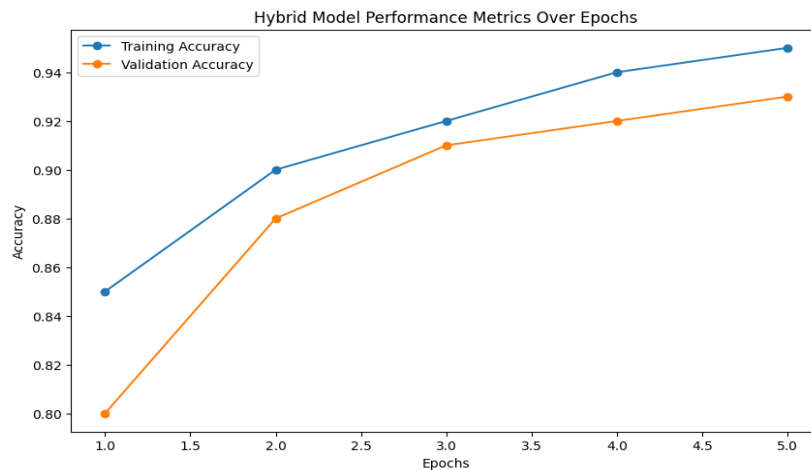


Fig 4. Hybrid Model Performance Trends.

Hybrid Model (CNNs + RNNs) performance patterns throughout epochs are shown in **Fig 4**. Through training and validation loss measures, the graph displays model convergence and generalization.

Declining training loss implies Hybrid Model learning from training dataset. This image shows model parameter modification and error reduction during training.

When validation loss stabilizes or diminishes, model generalization improves. Thus, the Hybrid Model accurately anticipates new data, proving its reliability.

When training and validation loss curves converge, performance is constant. This alignment shows the Hybrid Model's training set feature-unique data prediction balance. Model convergence patterns demonstrate the Hybrid Model architecture's stability and endurance. A steady validation loss improves model generalization beyond training. Its credibility and usefulness in many real-world situations depend on this. Hybrid Model parameters are refined when training loss decreases. This incremental update improves the model's forecast, demonstrating its versatility. **Fig 4** demonstrates how the Hybrid Model may personalize treatment and simplify healthcare. Continuous and growing performance shows the model's adaptability and healthcare application.

IV. CONCLUSION

Finally, our research on data-driven healthcare innovations using machine learning models shows how sophisticated technology may improve healthcare. The study tested CNNs, RNNs, and a hybrid model including both architectures. Diagnostic accuracy, therapeutic optimization, and healthcare logistics improved. CNNs improved diagnosis accuracy by recognizing tiny patterns in diagnostic images. Advanced image analysis-based personalized treatment regimens advance precision medicine. RNNs processing sequential data substantially affected healthcare logistics. Simplified administration, planning, and resource allocation improve efficiency, cost, and medical care. CNN-RNN hybrid models change. The technique customizes treatment regimens and improves healthcare logistics using image analysis and sequential data processing. We strive for precision, efficiency, and patient-centered treatment, as shown by this study.

This encouraging study shows that data-driven healthcare innovation is ongoing. Future research must be multidimensional. Machine learning models improve with larger and more diverse datasets, broadening its demographic and therapeutic use. The important shift from study to implementation requires legislative, ethical, and practical concerns for successful integration of these models into healthcare systems. To encourage transparent decision-making that matches with healthcare practitioners' expertise, machine learning model research should stress explainability and interpretability. Iterative machine learning refines employing new model architectures, training methodologies, and healthcare data. Human-centric design with practitioner participation is needed to ensure machine learning systems match healthcare practitioners' objectives and processes. Next steps involve balancing technology, ethics, and healthcare ecosystem integration to build a data-driven environment that promotes accuracy, accessibility, and patient outcomes.

CRedit Author Statement

The authors confirm contribution to the paper as follows:

Conceptualization: Purna Chandra Rao Kandimalla, Anuradha T; **Methodology:** Purna Chandra Rao Kandimalla, Anuradha T; **Visualization:** Purna Chandra Rao Kandimalla; **Validation:** Anuradha T; All authors reviewed the results and approved the final version of the manuscript.

Data Availability

No data was used to support this study.

Conflicts of Interests

The author(s) declare(s) that they have no conflicts of interest.

Funding

No funding agency is associated with this research.

Competing Interests

There are no competing interests

References

- [1]. A. Elliott, *The Culture of AI*. Routledge, 2019. doi: 10.4324/9781315387185.
- [2]. S. C. K. Naess and E. Håland, “Between diagnostic precision and rapid decision-making: Using institutional ethnography to explore diagnostic work in the context of Cancer Patient Pathways in Norway,” *Sociology of Health & Illness*, vol. 43, no. 2, pp. 476–492, Feb. 2021, doi: 10.1111/1467-9566.13235.
- [3]. S. A. Tabish and S. Nabil, “Future of Healthcare Delivery: Strategies that will Reshape the Healthcare Industry Landscape,” *International Journal of Science and Research*, 4(2), pp.727-758, 2015.
- [4]. K. M. Boehm, P. Khosravi, R. Vanguri, J. Gao, and S. P. Shah, “Harnessing multimodal data integration to advance precision oncology,” *Nature Reviews Cancer*, vol. 22, no. 2, pp. 114–126, Oct. 2021, doi: 10.1038/s41568-021-00408-3.
- [5]. S. E. Bibri, A. Alexandre, A. Sharifi, and J. Krogstie, “Environmentally sustainable smart cities and their converging AI, IoT, and big data technologies and solutions: an integrated approach to an extensive literature review,” *Energy Informatics*, vol. 6, no. 1, Apr. 2023, doi: 10.1186/s42162-023-00259-2.
- [6]. L. Alkharji, S. De, O. Rana, and C. Perera, “Semantics-based privacy by design for Internet of Things applications,” *Future Generation Computer Systems*, vol. 138, pp. 280–295, Jan. 2023, doi: 10.1016/j.future.2022.08.013.
- [7]. P. Szmaja et al., “ASSIST-IoT: A Modular Implementation of a Reference Architecture for the Next Generation Internet of Things,” *Electronics*, vol. 12, no. 4, p. 854, Feb. 2023, doi: 10.3390/electronics12040854.
- [8]. R. Zhao et al., “A Novel Traffic Classifier With Attention Mechanism for Industrial Internet of Things,” *IEEE Transactions on Industrial Informatics*, vol. 19, no. 11, pp. 10799–10810, Nov. 2023, doi: 10.1109/tii.2023.3241689.
- [9]. Y. Xu, W. Xiao, X. Yang, R. Li, Y. Yin, and Z. Jiang, “Towards effective semantic annotation for mobile and edge services for Internet-of-Things ecosystems,” *Future Generation Computer Systems*, vol. 139, pp. 64–73, Feb. 2023, doi: 10.1016/j.future.2022.09.021.
- [10]. A. Heidari, N. J. Navimipour, M. A. J. Jamali, and S. Akbarpour, “A hybrid approach for latency and battery lifetime optimization in IoT devices through offloading and CNN learning,” *Sustainable Computing: Informatics and Systems*, vol. 39, p. 100899, Sep. 2023, doi: 10.1016/j.suscom.2023.100899.
- [11]. M. Gupta, V. P. Singh, K. K. Gupta, and P. K. Shukla, “An efficient image encryption technique based on two-level security for internet of things,” *Multimedia Tools and Applications*, vol. 82, no. 4, pp. 5091–5111, Feb. 2022, doi: 10.1007/s11042-022-12169-8.
- [12]. Z. Amiri, A. Heidari, N. J. Navimipour, M. Unal, and A. Mousavi, “Adventures in data analysis: a systematic review of Deep Learning techniques for pattern recognition in cyber-physical-social systems,” *Multimedia Tools and Applications*, vol. 83, no. 8, pp. 22909–22973, Aug. 2023, doi: 10.1007/s11042-023-16382-x.
- [13]. P. Chauhan and M. Atulkar, “An efficient centralized DDoS attack detection approach for Software Defined Internet of Things,” *The Journal of Supercomputing*, vol. 79, no. 9, pp. 10386–10422, Feb. 2023, doi: 10.1007/s11227-023-05072-y.
- [14]. P. Celard, E. L. Iglesias, J. M. Sorribes-Fdez, R. Romero, A. S. Vieira, and L. Borrajo, “A survey on deep learning applied to medical images: from simple artificial neural networks to generative models,” *Neural Computing and Applications*, vol. 35, no. 3, pp. 2291–2323, Nov. 2022, doi: 10.1007/s00521-022-07953-4.
- [15]. A. Heidari, D. Javaheri, S. Toumaj, N. J. Navimipour, M. Rezaei, and M. Unal, “A new lung cancer detection method based on the chest CT images using Federated Learning and blockchain systems,” *Artificial Intelligence in Medicine*, vol. 141, p. 102572, Jul. 2023, doi: 10.1016/j.artmed.2023.102572.
- [16]. M. H. Nasir, J. Arshad, and M. M. Khan, “Collaborative device-level botnet detection for internet of things,” *Computers & Security*, vol. 129, p. 103172, Jun. 2023, doi: 10.1016/j.cose.2023.103172.
- [17]. P. M. Kumar and U. Devi Gandhi, “A novel three-tier Internet of Things architecture with machine learning algorithm for early detection of heart diseases,” *Computers & Electrical Engineering*, vol. 65, pp. 222–235, Jan. 2018, doi: 10.1016/j.compeleceng.2017.09.001.
- [18]. H. Abdel-Jaber, D. Devassy, A. Al Salam, L. Hidaytallah, and M. EL-Amir, “A Review of Deep Learning Algorithms and Their Applications in Healthcare,” *Algorithms*, vol. 15, no. 2, p. 71, Feb. 2022, doi: 10.3390/a15020071.
- [19]. D. Bordoloi, V. Singh, S. Sanober, S. M. Buhari, J. A. Ujjan, and R. Boddu, “Deep Learning in Healthcare System for Quality of Service,” *Journal of Healthcare Engineering*, vol. 2022, pp. 1–11, Mar. 2022, doi: 10.1155/2022/8169203.
- [20]. R. S. Antunes, C. André da Costa, A. Küderle, I. A. Yari, and B. Eskofier, “Federated Learning for Healthcare: Systematic Review and Architecture Proposal,” *ACM Transactions on Intelligent Systems and Technology*, vol. 13, no. 4, pp. 1–23, May 2022, doi: 10.1145/3501813.