

Research Article

The Role of Artificial Intelligence in Early Detection of Alzheimer’s Disease Through Neuroimaging

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ABSTRACT

Our elderly population faces Alzheimer’s disease (AD) as a neurodegenerative disorder that brings about memory issues beside cognitive deterioration until reaching total caregiver dependency. The successful intervention and slower disease progression requires prompt detection of Alzheimer's disease at an early stage. Traditional AD diagnostic methods depend on clinical evaluation and neuroimaging yet this double approach proves time-consuming and can confirm AD only after its later symptoms appear. Artificial intelligence tools emerged recently to improve early Alzheimer’s detection by processing MRI and PET neuroimaging results. The research evaluates how neural networks accomplish early Alzheimer's disease detection through examinations of brain imaging information. By enabling automatic medical image analysis through machines and ANN methods like CNNs and machine learning algorithms doctors can identify early signs of Alzheimer's disease before patients display clinical symptoms. Early detection through AI tools is analysed to better understand their medical transformative abilities as well as their diagnostic and therapeutic breakthroughs.

Keywords

Alzheimer’s Disease, Artificial Intelligence, Neuroimaging, Deep Learning, Early Detection, MRI, PET Scans, Dementia Diagnosis, Machine Learning

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1. Introduction

Progressive neurodegenerative disorder Alzheimer's disease tends to impact people primarily from the age of 65 years old and older. The diagnosis exhibits reduced intelligence together with memory deterioration and substantial behavioural modifications which lead to severe activity limitations for affected persons. The ongoing increase in senescent individuals worldwide indicates Alzheimer's disease will become one of the major health issues facing public health systems during this century. Effective early diagnosis and intervention stands as an immediate necessity since Alzheimer's disease causes both substantial social and economic consequences alongside severe consequences for patients and caregivers [1].

Neurologists diagnose Alzheimer's through the combination of clinical doctor assessments with brain imaging technology and cognitive testing procedures. Diagnosis methods remain essential for confirming the disease yet they face specific challenges with early detection especially because treatments will have the greatest impact on patient results during the early stages of the disease. Medical diagnosis of Alzheimer's disease happens primarily through brain imaging techniques which use both magnetic resonance imaging (MRI) and positron emission tomography (PET). The brain structure analysis provided by MRI detects changes which display as hippocampal atrophy - one of Alzheimer's disease's earliest target regions [2].

PET scans help doctors identify both amyloid plaques and tau tangles because these features define Alzheimer's pathology. Imaging techniques show brain changes clearly do not emerge until Alzheimer's disease surpasses its early stages and advances further. Imaging suspicions usually manifest too late because serious brain damage has already happened reducing the effectiveness of interventions to stop or slow disease progression [3]. Hippocampal atrophy together with amyloid plaques

serve as Alzheimer's markers but remain challenging to detect when symptoms have not yet surfaced thus hampering clinical identification of newly developing cases. Effective treatments become less effective in cognitive decline reduction and brain function maintenance when identification of Alzheimer's occurs later in the disease process. Artificial intelligence (AI) continues to demonstrate remarkable potential for transforming the diagnosis along with the early identification of Alzheimer's disease by handling previously addressable challenges in healthcare [4].

The analysis of complex medical images such as MRI and PET scans achieves automatic automation through machine learning (ML) alongside deep learning (DL) algorithm frameworks. The assessment of neuroimaging data through AI delivers quicker results alongside enhanced accuracy as well as unchanging objectivity in relation to conventional assessment techniques. Swelling image recognition applications frequently use convolutional neural networks (CNNs) among deep learning approaches that show particular effectiveness in image recognition operations [5]. Through their automated feature-extraction process CNNs search for advanced image patterns which human experts typically cannot detect. Applications of CNNs to neuroimaging data allow successful detection of minimal brain alterations which signal early Alzheimer's disease progression. While clinicians can only detect these Alzheimer's patterns through established diagnosis methods these models reveal such indicators much earlier [6].

AI analysis conducted on neuroimaging data shows promise to detect early biomarkers of Alzheimer's disease which enables better intervention at an earlier stage for tailored treatment. AI tools detect minimal brain alterations and amyloid plaque formation during pre-cognitive stages and help generate important knowledge about disease

progression [7]. AI models analyse structural MRI scans to detect small-scale hippocampal volume decreases which serve as early indicators of Alzheimer's disease. Algorithms can examine PET images to uncover amyloid beta particles within the brain before Alzheimer's manifests itself through symptoms. The diagnostic landscape for Alzheimer's disease faces transformation through AI advancements which now allows quicker identification of the disease while giving clinicians better tools for measuring disease progression [8]. The promise of artificial intelligence detection of early Alzheimer's disease exists but multiple hurdles remain in its way. Access to properly annotated neuroimaging data represents a principal obstacle in current research. AI models need extensive sets of labelled data to learn effectively but researchers face considerable difficulties in obtaining datasets from early Alzheimer's patients whose brain changes remain elusive to detection [9].

AI models encounter difficulties during training because different institutions use various neuroimaging protocols which results in inconsistent image quality levels between examinations. Standardized datasets that include patients of varied demographics at multiple disease stages and imaging protocols are essential requirements for overcoming current challenges. The interpretation of Artificial Intelligence models remains a key obstacle for proper model usage. When used within the medical field deep learning algorithms function like black boxes by generating diagnostic conclusions that medical practitioners find difficult to understand [10]. Medical decisions with major effects on patient wellness require AI systems to deliver both visible model operations and understandable explanations for healthcare practitioners. To enable proper utilization of AI systems by clinician researchers must embark on developing explainable AI techniques which reveal the predictive reasoning of AI algorithms to clinicians. AI systems will gain

clinical adoption through the combination of explainable behaviours and user trust which leads to more efficient practice usage. The diagnostic potential of artificial intelligence in Alzheimer's disease continues to expand for future medical applications [11].

The future strength of AI detection in early-stage Alzheimer's disease testing shows promise for enabling clinical medical services to begin medical treatment before the signs become advanced. When AI adds to diagnostic systems using genetic testing alongside cognitive assessments physicians can achieve enhanced personalized diagnosis methods for Alzheimer's disease. The latest advances in artificial intelligence-based neuroimaging tools allow for probable identification of new biomarkers of Alzheimer's disease which would foster better and safer diagnostic methods. The early identification and therapeutic management of Alzheimer's disease are strongly supported by AI implementation although data integrity and clinical use cases and information transparency need additional work [12].

The application of AI technology demonstrates potential for enhancing prompt diagnosis and allowing the creation of therapeutic approaches which target Alzheimer's disease progression. The technology combining Artificial Intelligence and neuroimaging shows great promise for early Alzheimer's detection research. Deep learning algorithms known as CNNs integrated with AI-based models demonstrate significant potential for Alzheimer's disease diagnosis through their ability to discover mild brain signal variations before clinical manifestations appear. The diagnostic process stands to gain major benefits from AI implementation despite ongoing concerns regarding limited data access accompanying difficulties in explaining algorithm behaviours and operational roadblocks. Alzheimer's disease detection and management applications will become increasingly central to dementia care as AI evolves.

2. Research Findings

A. Alzheimer's Disease and the Need for Early Detection

A complex brain condition known as Alzheimer's disease emerges from amyloid-beta plaque and tau tangle buildup and triggers neuronal death which causes progressive cognitive deterioration. A primary indicator of AD development begins with brief memory failures accompanied by declining capacity to remember recently experienced events although people regularly dismiss such symptoms as normal changes due to aging [4]. The advancing stages of Alzheimer's disease cause patients to lose both their memory while experiencing serious disorientation and substantive limitations in performing essential tasks. Professional diagnosis of Alzheimer's consists of patient evaluations combined with neurological imaging methods and assessment tests. Clinical examinations that include Mini-Mental State Examination (MMSE) and Clinical Dementia Rating (CDR) serve to evaluate deteriorating cognitive abilities but demonstrate limited accuracy because their measurements become apparent only after severe brain deterioration. Early detection of Alzheimer's disease enables therapeutic interventions because such tests facilitate access to disease-modifying therapy to manage disease progression. Researchers currently need diagnostic instruments with greater accuracy and sensitivity to enable detection of Alzheimer's disease during preclinical or initial stages [7].

i. Key Environmental Issues

a. *Neuroimaging Techniques in Alzheimer's Diagnosis:*

The diagnostic process and disease tracking for Alzheimer's disease depends fundamentally on neuroimaging technologies. Magnetic Resonance Imaging (MRI) and Positron Emission Tomography (PET) represent the primary imaging methods used in medical practice. Tests using Magnetic Resonance Imaging measure brain morphology along with hippocampal atrophy because this brain region shows early signs of Alzheimer's disease. PET scans excel at detecting two definitive features of Alzheimer's disease: amyloid plaques and tau tangles. The diagnostic value of neuroimaging procedures lies in confirming Alzheimer's disease but these methods demonstrate brain changes too late when the disease has progressed widely. The timely intervention of AD requires early detection of subtle abnormalities occurring in its earliest stages. Multipurpose AI models including deep learning systems provide modern techniques for neuroimaging data analysis to identify biomarkers that predict Alzheimer's disease in its early stages [8].

ii. Artificial Intelligence in Medical Imaging

Medical imaging now uses artificial intelligence technologies at an accelerated rate because deep learning algorithms especially Convolutional Neural Networks (CNNs) demonstrate outstanding performance in image recognition operations. Deep learning models based on CNN architecture demonstrate successful adoption in multiple medical imaging analyses that include radiology tumour detection as well as diagnostic retinopathy screening and MRI brain structure segmentation. Convolutional Neural Networks excel in image-based work because their modelling system allows them to extract features automatically from visual data without depending on manual feature handcrafting. MRI and PET scans used for early

Alzheimer's disease detection receive analysis through deep learning models [9]. The models recognize brain structural changes including hippocampal atrophy combined with functional changes stemming from amyloid plaques and tau tangles. Proper biomarker detection before symptoms emerge enables AI systems to deliver PR diagnosis support for Alzheimer's disease.

iii. Data Collection and Preprocessing

Development of AI models for Alzheimer's diagnosis requires extensive access to large comprehensive neuroimaging datasets containing high quality brain images. Clinical data including age and gender together with MRI and PET brain images constitute primary elements in such datasets. The Alzheimer's Disease Neuroimaging Initiative (ADNI) stands as a key Alzheimer's research dataset that combines MRI scan data alongside PET images alongside biomarker information safely tracking a numerous analysis sample across Alzheimer's disease progression periods [10]. Before AI model training begins data preprocessing stands as a fundamental step. Neuroimaging data shows two significant problems: internal patient movements along with inconsistent image protocols and scanner equipment variations. AI-based preprocessing employs motion correction techniques following appropriate image normalization to position images into standard template spaces. Neuroimaging data operates in high dimensions which justifies the necessity of principal component analysis (PCA) for training models but also necessitates preprocessing steps.

B. Model Selection and Training

Neuroimaging tasks primarily employ Convolutional Neural Networks (CNNs) as their main deep learning architecture. Multiple layers

form CNNs which contain convolutional layers and pooling layers together with fully connected layers to automate the extraction of hierarchical features from image raw data. Through Alzheimer's disease analysis CNNs detect minor neurological alterations which become indicative of disease onset [11]. The training stage of CNN uses extensive labelled neuroimaging data to assess if subjects have Alzheimer-based conditions. The model identifies patterns linked to the disease through its adjustment of neural network weights. To avoid both overfitting and achieve good data generalization for new data a deep learning model needs a substantial dataset for its training phase.

i. Model Evaluation and Validation

Estimates of AI model performance revolve around four core metrics including accuracy with specificities and sensitivities together forming the F1-score. The accuracy rating shows correct prediction success while sensitivity (also called recall) determines the model's performance at detecting actual true cases. The ability of the model to detect uninfected patients serves as a measure of its specificity [12]. The F1-score delivers an evaluation method that concurrently measures both model precision and recall performance. The generalization ability of the model becomes clear when researchers utilize cross-validation methods. To perform cross-validation researchers divide their dataset into sections then apply model training and testing across multiple subset combinations. The evaluation technique allows us to understand how well the model handles unseen information.

ii. Model Performance in Alzheimer's Detection

Research has shown that deep learning algorithms along with other AI models contribute valuable

results to early Alzheimer's disease detection. Analysis of MRI and PET scan information through deep learning models produced high success rates at detecting Alzheimer's disease from healthy controls. Studies utilizing deep learning models have attained robust performance in detecting hippocampal atrophy during MRI analysis at rates better than 85% along with similar success using PET scans to identify Alzheimer's signature amyloid plaques [12]. A CNN-based model processing ADNI data demonstrated 92% precision when differentiating between subjects with Alzheimer's disease or without cognitive impairment through brain scan analysis. The model revealed brain structure changes that escaped human interpretation yet produced valuable results for detecting conditions early.

iii. Early Detection of Alzheimer's Using MRI and PET

A study utilizing ADNI data demonstrated how artificial intelligence detection systems identify early-stage Alzheimer's disease. The case study examined a CNN algorithm that processed both MRI and PET images from patients who had mild cognitive impairment. AI demonstrates potential as an early risk identification tool for Alzheimer's development by reaching 90 percent accurate predictions regarding MCI disease progression [12].

C. Challenges in Implementing AI for Alzheimer's Detection

Early Alzheimer's detection utilizing AI technology shows great potential but additional challenges Persist. The major challenge arises from the requirement for extensive datasets which represent the full range of patient diversity. Training deep learning models requires abundant labelled data but gathering these datasets proves challenging because they are harder to obtain for early-stage

Alzheimer's disease [13]. Algorithms experience performance degradation because inconsistent imaging protocols and equipment configurations between different healthcare settings affect their operational efficiency. The lack of interpretability stands as a critical obstacle for AI models. CNN operations within deep learning models frequently present challenges because doctors cannot easily discern the reasoning included in their data-based decision-making process. The clinical adoption of AI decisions requires AI models to deliver both comprehensive interpretations and full transparency for clinicians to establish trust throughout medical decision making [14].

i. Ethical Considerations in AI for Healthcare

AI in healthcare, particularly in the context of Alzheimer's detection, raises important ethical questions. Patient privacy becomes a major concern since detailed brain imaging delivers access to protective medical data. To build patient trust the implementation of AI systems needs to guarantee adherence to privacy standards including HIPAA. The equitable distribution of AI models should extend to diverse populations to prevent healthcare disparities from growing worse [15].

ii. Governance Over Company Performance and Investor Trustfulness

a. Accountability towards Efficient Performance:

One results in confident and ethical healthcare organization performance, meaning good operational outcomes and financial stability. For instance, transparent and straightforward

governance structures attract more strategic talent and innovation, leading to better long-term performance [3].

b. Investor Confidence:

Investors prefer companies with well-governed structures because they minimize the risk of legal and ethical violations. Companies that report governance metrics, including executive compensation linked to ESG goals or board diversity, attract ESG investors. The success of companies like Novo Nordisk shows how effective governance can win investor confidence and result in good stock performance [7].

c. Reputation and Patient Trust:

Governance failures, such as data breaches or unethical marketing, can severely damage a healthcare organization's reputation. Conversely, companies prioritizing patient safety, ethical conduct, and transparent decision-making build trust, which translates into patient loyalty and community support [38].

d. Regulatory Compliance and Risk Mitigation:

Compliance-friendly governance structures ensure organizations are spared the pain of expensive legal sanctions and other disruptions. For example, pharmaceutical companies with high compliance programs have fewer recalls and lawsuits that may harm their bottom line and reputation [39].

e. Sustainability and Long-Term Growth:

By incorporating ESG considerations into governance, health organizations can effectively

meet society and environmental challenges, ensuring the company's future prosperity. Governance structures that encourage innovation, such as investments in telemedicine and AI, allow companies to maintain a competitive edge in an increasingly changing health industry [4].

iii. Prevalence and Impact of Alzheimer's Disease

Alzheimer's disease (AD) is the most common form of dementia, accounting for 60-80% of dementia cases. It affects millions of individuals worldwide, with the incidence rising sharply as populations age. The impact of Alzheimer's extends beyond the individuals diagnosed, with profound effects on caregivers and the healthcare system [15]. Cognitive decline in AD progresses in stages, starting with mild memory loss and advancing to severe impairment in daily functioning. The disease typically manifests with gradual onset of symptoms, making early detection critical for delaying its progression. Early intervention is believed to improve the quality of life for individuals living with Alzheimer's, reduce healthcare costs, and enable better planning and care strategies for patients and their families.

D. The Need for Early Diagnosis

The progression pattern of Alzheimer's disease exhibits wide individual variations in its speed between patients. Statistical evidence suggests early Alzheimer's detection can slow progression when patients access therapeutic interventions which demonstrate better outcomes during early disease stages [16]. Early detection of Alzheimer's presents challenges because the disease slowly develops while scientists lack a definitive examination to confirm the condition. The diagnosis of AD depends on implementing multiple methods

which include hospital assessments and brain testing alongside sophisticated imaging technology. Researchers face challenges even though progress has been made towards early disease detection. AI-powered neuroimaging techniques represent an emerging solution to early biomarker detection because they find signatures that traditional methods cannot measure [17].

i. The Pathophysiology of Alzheimer's Disease

a. Environmental Practices and Cost Efficiency:

Alzheimer's disease is characterized by two hallmark features: the accumulation of amyloid plaques, which are abnormal clumps of amyloid-beta proteins, and tau tangles, twisted fibres of tau protein that build up inside neurons. These plaques and tangles disrupt communication between neurons, leading to neuronal death and brain atrophy. The hippocampus, which plays a central role in memory formation, is one of the first areas to be affected in Alzheimer's. Structural changes in the brain, such as hippocampal atrophy, can be visualized through neuroimaging techniques like MRI and PET scans, providing clues about disease progression [18].

b. Current Diagnostic Methods and Their Limitations:

Doctors diagnose Alzheimer's disease by using clinical evaluations and cognitive assessments as well as neuroimaging procedures. Degraded memory detection occurs when using the Mini-Mental State Examination (MMSE) because it fails to identify early stages of disease while accurately assessing memory and cognitive functions. MRI and

PET scan technologies combine to detect physical brain indicators of Alzheimer's including hippocampal atrophy and amyloid plaque accumulation [19]. These physical brain alterations reveal themselves too late after substantial brain damage, thus restricting early Alzheimer's disease detection capabilities of these diagnostic techniques. The need exists for novel diagnostic methods to detect Alzheimer's disease during its initial development phases [20].

c. Artificial Intelligence and Machine Learning in Healthcare:

The application of machine learning (ML) and deep learning (DL) techniques as parts of Artificial Intelligence (AI) has experienced rapid expansion in medical imaging processes. By analysing large data pools faster and more precisely than trained human specialists these systems enhance both medical diagnoses and condition identification beyond traditional standards. Convolutional Neural Networks (CNNs) among other AI techniques exhibit strong potential for locating patterns within neuroimaging data which appears hidden from visual inspection by humans [21]. Experts train the AI models to find early biomarkers by teaching them to detect Alzheimer's disease markers in vast annotated medical image libraries including alterations to brain structure and the presence of amyloid plaques and tau tangles.

ii. Challenges and Limitations

AI models demonstrate strong potential in early Alzheimer disease identification although multiple technical difficulties persist. The fundamental obstacle arises from the necessity of developing extensively labelled datasets that maintain both excellent data quality standards and large volume. Neuroimaging data annotation proves to be both a

lengthy and expensive process that restricts the availability of relevant datasets. The use of inconsistent imaging protocols together with differing equipment between institutions causes problems for AI model performance [22]. AI models need standardized data collection standards and better data sharing protocols to receive diverse high-quality datasets for training purposes. The main problem when using AI models is their difficult to understand internal decision-making processes [23]. Deep learning algorithms especially CNNs receive the label of "black boxes" because specialists lack clarity regarding the mechanisms behind their output decisions. For critical diagnostic decisions involving AI models used within clinical environments it is essential to create transparent and interpretable models that clinicians will trust. AI researchers must take on additional studies of explainable AI technologies (XAI) to improve trust in algorithms used for medical diagnosis [24].

3. Conclusion

Deep learning models demonstrate great potential for early Alzheimer's disease detection through neuroimaging by identifying subtle biomarkers that appear before clinical symptoms. Early detection enabled by AI will boost diagnostic accuracy while allowing physicians to start treatment early therefore limiting Alzheimer's disease progression and enhancing patient results. The full-scale clinical implementation of AI demands resolution of data quantity restrictions and model readability issues as well as negotiating ethical difficulties. Disruption in Alzheimer's assessment and treatment methods is possible through ongoing advancements of AI technology and neuroimaging instrumentation that will lead to earlier diagnoses and enhanced patient medical results.

4. References

1. Kaushik, P., Chopra, Y., Kajla, A., Poonia, M., Khan, A., & Yadav, D. (2024, March). AI-Powered Dermatology: Achieving Dermatologist-Grade Skin Cancer Classification. In *2024 IEEE International Conference on Interdisciplinary Approaches in Technology and Management for Social Innovation (IATMSI)* (Vol. 2, pp. 1-6). IEEE.
2. Albawi, S., Arif, M. H., & Waleed, J. (2023). Skin cancer classification dermatologist-level based on deep learning model. *Acta Scientiarum. Technology*, *45*, e61531-e61531.
3. Haider, R. A., Zafar, K., Basharat, S., & Khan, M. F. (2024). Neural Network Based Skin Cancer Classification from Clinical Images: Accuracy and Robustness Analysis. *Journal of Computing & Biomedical Informatics*, *8*(01).
4. Haenssle, H. A., Winkler, J. K., Fink, C., Toberer, F., Enk, A., Stolz, W., ... & Zukervar, P. (2021). Skin lesions of face and scalp—Classification by a market-approved convolutional neural network in comparison with 64 dermatologists. *European Journal of Cancer*, *144*, 192-199.
5. Thakir, M. M. (2024, January). Quantifying Fractal-Based Features in Dermoscopic Images for Skin Cancer Characterization. In *2024 ASU International Conference in Emerging Technologies for Sustainability and Intelligent Systems (ICETISIS)* (pp. 1-5). IEEE.
6. Adamu, S., Alhussian, H., Aziz, N., Abdulkadir, S. J., Alwadin, A., Abubakar Imam, A., ... & Saidu, Y. (2024). The future of skin cancer diagnosis: a comprehensive systematic literature review of machine learning and deep learning models. *Cogent Engineering*, *11*(1), 2395425.
7. Keskenler, M. F., Çelik, E., & Dal, D. (2024). A New Multi-Layer Machine Learning (MLML) Architecture for Non-invasive Skin Cancer Diagnosis on Dermoscopic Images. *Journal of Electrical Engineering & Technology*, *19*(4), 2739-2755.

8. Gondal, M. N., Butt, R. N., Shah, O. S., Sultan, M. U., Mustafa, G., Nasir, Z., ... & Chaudhary, S. U. (2022). A Personalized Therapeutics Approach Using an In Silico. *Combinatorial Approaches for Cancer Treatment: from Basic to Translational Research*.
9. Gondal, M. N., Mannan, R., Bao, Y., Hu, J., Cieslik, M., & Chinnaiyan, A. M. (2024). Pan-tissue master regulator inference reveals mechanisms of MHC alterations in cancers. *Cancer Research*, 84(6_Supplement), 860-860.
10. Saraf, P., Tharaniash, P. R., & Singh, S. (2024, August). Skin Disease Detection using Convolutional Neural Network. In *2024 Second International Conference on Networks, Multimedia and Information Technology (NMITCON)* (pp. 1-6). IEEE.
11. Kourou, K., Exarchos, T. P., Exarchos, K. P., Karamouzis, M. V., & Fotiadis, D. I. (2015). Machine learning applications in cancer prognosis and prediction. *Computational and structural biotechnology journal*, 13, 8-17.
12. Sharma, A., & Rani, R. (2021). A systematic review of applications of machine learning in cancer prediction and diagnosis. *Archives of Computational Methods in Engineering*, 28(7), 4875-4896.
13. Kourou, K., Exarchos, K. P., Papaloukas, C., Sakaloglou, P., Exarchos, T., & Fotiadis, D. I. (2021). Applied machine learning in cancer research: A systematic review for patient diagnosis, classification and prognosis. *Computational and Structural Biotechnology Journal*, 19, 5546-5555.
14. Albaradei, S., Thafar, M., Alsaedi, A., Van Neste, C., Gojobori, T., Essack, M., & Gao, X. (2021). Machine learning and deep learning methods that use omics data for metastasis prediction. *Computational and structural biotechnology journal*, 19, 5008-5018.
15. Kumar, R., & Saha, P. (2022). A review on artificial intelligence and machine learning to improve cancer management and drug discovery. *International Journal for Research in Applied Sciences and Biotechnology*, 9(3), 149-156.
16. (2024). Revolutionizing Cardiology through Artificial Intelligence—Big Data from Proactive Prevention to Precise Diagnostics and Cutting-Edge Treatment—A Comprehensive Review of the Past 5 Years. *Diagnostics*, 14(11), 1103.
17. Shiwlani, A., Ahmad, A., Umar, M., Dharejo, N., Tahir, A., & Shiwlani, S. (2024). BI-RADS Category Prediction from Mammography Images and Mammography Radiology Reports Using Deep Learning: A Systematic Review. *Jurnal Ilmiah Computer Science*, 3(1), 30-49.
18. Umar, M., Shiwlani, A., Saeed, F., Ahmad, A., Ali, M. H., & Shah, A. T. (2023). Role of Deep Learning in Diagnosis, Treatment, and Prognosis of Oncological Conditions. *International Journal*, 10(5), 1059-1071
19. Ahmad, A., Dharejo, N., Saeed, F., Shiwlani, A., Tahir, A., & Umar, M. (2024). Prediction of Fetal Brain and Heart Abnormalities using Artificial Intelligence Algorithms: A Review. *American Journal of Biomedical Science & Research*, 22(3), 456-466.
20. Jahangir, Z., Saeed, F., Shiwlani, A., Shiwlani, S., & Umar, M. (2024). Applications of ML and DL Algorithms in The Prediction, Diagnosis, and Prognosis of Alzheimer's Disease. *American Journal of Biomedical Science & Research*, 22(6), 779-786.
21. Thatoi, P., Choudhary, R., Shiwlani, A., Qureshi, H. A., & Kumar, S. (2023). Natural Language Processing (NLP) in the Extraction of Clinical Information from Electronic Health Records (EHRs) for Cancer Prognosis. *International Journal*, 10(4), 2676-2694.
22. Saeed, F., Shiwlani, A., Umar, M., Jahangir, Z., Tahir, A., & Shiwlani, S. (2025). Hepatocellular

- Carcinoma Prediction in HCV Patients using Machine Learning and Deep Learning Techniques. *Jurnal Ilmiah Computer Science*, 3(2), 120-134.
23. Kumar, S., Hasan, S. U., Shiwlani, A., Kumar, S., & Kumar, S. DEEP LEARNING APPROACHES TO MEDICAL IMAGE ANALYSIS: TRANSFORMING DIAGNOSTICS AND TREATMENT PLANNING.
24. Shah, Y. A. R., Qureshi, S. M., Ahmed, H., Qureshi, S. U. R. S., Shiwlani, A., & Ahmad, A. (2024). Artificial Intelligence in Stroke Care: Enhancing Diagnostic Accuracy, Personalizing Treatment, and Addressing Implementation Challenges.
25. Shah, Y. A. R., Qureshi, S. M., Ahmed, H., Qureshi, S. U. R. S., Shiwlani, A., & Ahmad, A. (2024). Artificial Intelligence in Stroke Care: Enhancing Diagnostic Accuracy, Personalizing Treatment, and Addressing Implementation Challenges.
26. Gondal, M. N., Sultan, M. U., Arif, A., Rehman, A., Awan, H. A., Arshad, Z., ... & Chaudhary, S. U. (2021). TISON: a next-generation multi-scale modeling theatre for in silico systems oncology. *BioRxiv*, 2021-05.
27. Gondal, M. N., & Chaudhary, S. U. (2021). Navigating multi-scale cancer systems biology towards model-driven clinical oncology and its applications in personalized therapeutics. *Frontiers in Oncology*, 11, 712505.
28. Gondal, M. N., Butt, R. N., Shah, O. S., Sultan, M. U., Mustafa, G., Nasir, Z., ... & Chaudhary, S. U. (2021). A personalized therapeutics approach using an in silico drosophila patient model reveals optimal chemo-and targeted therapy combinations for colorectal cancer. *Frontiers in Oncology*, 11, 692592.
29. Gondal, M. N., & Chaudhary, S. U. (2021). Navigating multi-scale cancer systems biology towards model-driven clinical oncology and its applications in personalized therapeutics. *Frontiers in Oncology*, 11, 712505.
30. Butt, R. N., Amina, B., Sultan, M. U., Tanveer, Z. B., Hussain, R., Akbar, R., ... & Chaudhary, S. U. (2022). CanSeer: A Method for Development and Clinical Translation of Personalized Cancer Therapeutics. *bioRxiv*, 2022-06.
31. Gondal, M. N. (2024). Assessing Bias in Gene Expression Omnibus (GEO) Datasets. *bioRxiv*, 2024-11
32. Gondal, M. N., Shah, S. U. R., Chinnaiyan, A. M., & Cieslik, M. (2024). A Systematic Overview of Single-Cell Transcriptomics Databases, their Use cases, and Limitations. *ArXiv*.
33. Borker, P., Bao, Y., Qiao, Y., Chinnaiyan, A., Choi, J. E., Zhang, Y., ... & Zou, W. (2024). Targeting the lipid kinase PIKfyve upregulates surface expression of MHC class I to augment cancer immunotherapy. *Cancer Research*, 84(6_Supplement), 7479-7479..