ARMACEUTIC

International peer reviewed open access journal

Journal of Medical Pharmaceutical and Allied Sciences

Ameu Sciences

Journal homepage: www.jmpas.com CODEN: JMPACO

Review article

Artificial intelligence in drug delivery and pharmaceutical research: a transformative application in the modern era

R Titus bruno, M Sharmila, A R Aravind, S Nagalakshmi*

Department of Pharmaceutics, Faculty of Pharmacy, Sri Ramachandra Institute of Higher Education and Research (DU), Porur, Chennai, Tamil Nadu, India

Corresponding author: S Nagalakshmi, Z titusbruno24@gmail.com, Orcid Id: https://orcid.org/0009-0001-2465-7854

Department of Pharmaceutics, Faculty of Pharmacy, Sri Ramachandra Institute of Higher Education and Research (DU), Porur, Chennai, Tamil Nadu, India

© The author(s). This is an open access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by-nc/4.0/). See https://jmpas.com/reprints-and-permissions for full terms and conditions.

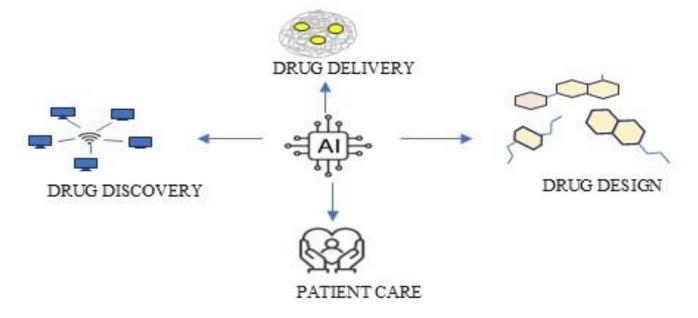
Received - 20-08-2024, Revised - 27-01-2025, Accepted - 19-02-2025 (DD-MM-YYYY)

Refer This Article

R Titus bruno, M Sharmila, A R Aravind, S Nagalakshmi, 2025. Artificial intelligence in drug delivery and pharmaceutical research: a transformative application in the modern era. Journal of medical pharmaceutical and allied sciences, V 14 - I 1, Pages - 7009 - 7016. Doi: https://doi.org/10.55522/jmpas.V14I1.6669.

ABSTRACT

The life sciences have experienced a significant increase in the utilization of artificial intelligence (AI) in pharmaceutical research and drug delivery. The amalgamation of AI technology with human expertise has resulted in the rapid analysis and interpretation of genetic and biological data, leading to the acceleration of drug discovery processes and the identification of novel molecules. AI algorithms have also be en employed to optimize drug development and delivery systems, predict disease progression, and evaluate drug candidates' pharmacological profiles. Additionally, AI has played a critical role in personalized medicine, scrutinizing patient data to customize treatments and improve patient outcomes. Although challenges still persist, sustained investments and exploration hold the promise of a fascinating future for healthcare and pharmaceuticals, with AI potentially revolutionizing pharmaceutical processes, reducing expenses, and enhancing patient care.



Keywords: Artificial intelligence, Drug discovery, Delivery system, Pharmaceutical, Patient care.

INTRODUCTION

Creating novel medicinal delivery systems with maximum efficacy and low side effects has garnered increasing attention in recent decades ^[1, 2]. The use of micro fabrication technologies to create implantable microchips shows assurance of controlled medication delivery ^[3]. Micro fabricated drug delivery devices offer pulsatile or continuous medication delivery, which includes medication reservoirs with various capacity or geometries and the capacity to open automatically ^[4, 5]. One potential strategy to increase patient compliance is to use implantable drug delivery systems that have the ability to autonomously adjust the dosage and timing of medication releases, efficiency, as well as safety when it comes to regulated and focused therapeutic delivery^[6]. For chronic conditions, which necessitate immediate medical attention and continuous monitoring, this would be extremely important.

The creation of intelligent drug delivery systems, such as Janus micro- or nanoparticles that can deliver several medications, is made possible by the application of microfluidic technology ^[7, 8]. Controlled insulin administration combined with ongoing glucose monitoring may greatly lower the complications associated with diabetes. Here, the incorporation of glucose sensors, Control algorithms, mathematical models, and insulin delivery systems is useful. Combining the glucose monitor, insulin dispenser, and medication calculator meter into a gadget, an automated framework for insulin delivery and glucose monitoring has been made available ^[2, 9]. Artificial neural networks (ANNs), which consist of linked processing elements formed by simulating a program has been developed using a network of simulated neurons that simulates physiological mechanisms, generates methods for controlling, models pharmacodynamics, and pharmacokinetics, delivers drugs under controlled conditions, and assesses the efficacy of treatment plans¹², ^{10,11]}. In fact, the progression of innovative methods of delivery and the next generation of medications depends on the application of advanced technologies. This review emphasizes the potentially difficult problems and the importance in the creation of pharmaceuticals and delivery systems using artificial intelligence (AI) and TF.

Artificial Intelligence (AI) seeks to enable machines to emulate human intelligence by combining knowledge from various fields such as computer science, neuroscience, and mathematics ^[12]. Machine learning makes use of algorithms and a machine to automatically analyze and learn from big data sets to predict the output of yet-to-be-seen data, is the most successful use of artificial intelligence to date ^[13]. For the following reasons, artificial intelligence (AI) machine learning is a good fit to support medication administration for the management of infectious illnesses using vast and intricate datasets, it can identify relevant features to generate

precise predictions without relying on the laborious process of repeated biological experiments. The creation of new drugs, choosing drug combinations, and optimizing dosage, which all need an enormously large test space covering the potential medicinal substances, the matrices for screening concentrations, the necessary copies, and possibly the range of harmful strains, would therefore benefit greatly from it. It can use the data to reveal hidden information, identify unexpected patterns, and create new rules. Consequently, it would enable us to forecast AMR without requiring drawn-out phenotypic tests or previous knowledge of the microorganism's genome. We could also optimize with it. The drug's pharmacokinetics, delivery mechanism, and system, even when the associated biological Pathways and processes are not stated. Its speed at processing and analyzing data is impressive. This, along with the other two characteristics mentioned above, may enable early prediction of the unfavorable effects of an anti-infective treatment, allowing for the introduction of more effective treatments in time to stop the disease's progression of illnesses linked to AMR. Computational software can function while providing care and become a useful tool for antiinfective medication administration clinical decision-making strategies by being embedded in portable or medically accessible gadgets. It can adjust its instantaneous performance and produce a medication administration strategy that is adequately adaptable to take into account the common and ongoing evolution of pathogens by incorporating and learning from fresh factors involving patients, microbes, and antibiotics. Even though they are unrelated to medication delivery, artificial intelligence (AI) has the potential to be extremely beneficial in a wide range of other clinical fields, such as infectious illness treatment. Explaining pathogen-host interactions, diagnosing infections, developing vaccines, and predicting outbreaks ^[14, 15] are a few examples.

The pharmaceutical industry's approach to supply chain operations is set to go through a dramatic change brought about by the application of AI. In order to provide practical answers for a range of supply chain problems, it also synthesizes a number of AI research initiatives from the previous few decades. The study also makes recommendations for future research directions that might improve supply chain management decision-making tools ^[16,17]. AI reduces the amount of data labor needed for the same by using techniques for gathering the massive quantities of information produced by the clinical experiments. These technologies use wearable technology and body sensors to remotely record vital signs and other important data from the patient. This helps satisfy the patient's need for regular inperson communication. Instantaneous perceptions while conducting research are provided by wearable AI algorithms ^[18]. For both remote workers and in-office cyber security to be implemented successfully,

DOI: 10.55522/jmpas.V1411.6669

the demand exists for new technology and a new platform. Additionally, techniques for data security breaches must receive special attention. Additionally, technology is needed to handle political fraud, of which there have been numerous cases documented, particularly during the pandemic in the past several years. As a result, necessary actions must be taken for the prevention of healthcare fraud and ongoing support for internal dialogues about dishonest behavior, which could aid in discouraging it.

Application of Ai Techniques to Develop Medication and Delivery Systems

Developing molecule libraries, finding new drug candidates with ideal qualities, forecasting the roles that proteins play in biology and deep learning are all essential components of contemporary drug discovery ^[19, 20]. AI tools for the study of biological data, the discovery of pharmacological targets, and pharmaceutical search may enhance the effectiveness of drug discovery in the biopharmaceutical companies [21]. In addition to virtual screening or quick filtering, classification using machine learning techniques has been used for drug and nondrug screening and categorized compilations, and toxicity prediction [22, 23]. Assist vector machines involving heuristics and methods for describing molecular structures have been used for rate-limited drug absorption and the prediction of enzyme inhibitor activity ^[24, 25]. Using OSAR analysis, 1, 4-Analogs of the calcium channel that block dihydropyridine having undergone a support vector machine screening for least squares ^[26]. Methods of machine learning allow in order to forecast interactions between drugs and targets, which may be crucial in identifying new medications or targets ^[27]. While regularized least squares and Gaussian interaction profile kernels perform suitably in terms of prediction, a blend of Gaussian interaction profile kernels with chemical and genomic kernels has enhanced capacity for prediction [28]. When in a range of experimental techniques, results from the best ANN-based models and experimental data have shown good agreement data [29] showing that ANNs have the appropriate power to be used as complex equations as an alternative. With ANNs, it would be able to in order to model nonlinear systems and complex biological data, resolve multivariate and multi-response system issues, forecast the secondary protein structures, and categorize cancers^[30,31]. The undirected graph recursive neural network method, a recurrent neural network variant, can model drug-induced liver injuries in addition to providing predictive solubility models ^[32].

AI techniques can also be used to create personalized treatment plans, find biomarkers, create associations between a patient's expression profile of genes and clinical characteristics, and create predictive models ^[33]. In addition to being used in the initial stages of AI techniques for medication discovery or design methods has been used regarding quick recognition and evaluation among the

bioactive compounds the billions of substances, evaluation data parameters and chemical processes, kinetic curves, and directing conventional trials^[34] could considerably conserve expenses as well as time. Additionally, artificial intelligence techniques aid in modelling the way that medications are metabolized, including how they interact using metabolic enzymes or how their chemical compositions relate to their metabolic endpoints and biological fates ^[35]. A mechanized formula for assessing the changes that substances undergo during their metabolism has been developed using an ANN model to categorize drug candidates as cytochrome P450 substrates ^[36].

AI in Drug Administration

In computational pharmaceutics, multiple scale modelling methods for enhancing medication administration processes-is the result of pharmaceutics field's combining AI with big data. Computational pharmaceutics uses AI algorithms and machine learning techniques to analyze large datasets to predict pharmaceutical conduct (Table 1). Researchers have simulated the procedures for the formulation and administration of drugs that assess multiple situations additionally enhance medication delivery methods without necessitating a lot of trial and error. This shortens the time needed to develop new drugs reduces costs and increases output. AI systems are capable of analyzing intricate drug relationship characteristics, ingredients in the formulation, and physiological aspects to forecast medication behavior at every scale. This facilitates understanding of medication delivery systems in greater detail and makes the creation of efficient medication administration methods. It aids in forecasting the drug's stability, medication release profile in vitro, and physicochemical properties. Additionally, same technology is used to improve the evaluation of drug distribution, research on the link between in vitro and in vivo pharmacokinetic parameters. With an appropriate suite of AI instruments, scholars can spot possible dangers as well as difficulties in medication delivery mechanisms at the beginning of their development. This enables proactive modifications and adjustments to lower hazards and maximize drug usage patterns. The likelihood of unanticipated results is decreased when AI and computational modelling are used instead of expensive and lengthy trial-and-error experiments [37].

Drug Delivery Modeling Using Artificial Intelligence

AI can enhance the design of nan systems by enabling a more profound comprehension biological surroundings, which can subsequently be utilized to nan engineer pharmaceutical items. The human body is an intricate system that's frequently divided into compartments for drug delivery purposes based on biological linings. The idea among biological membranes refers about the physicochemical characteristics of partitions dividing various biological divisions, thereby classifying a highly diverse range of epithelia and surroundings. For instance, a medication taken orally

DOI: 10.55522/jmpas.V14I1.6669

must penetrate the stomach or intestinal wall in order for the effective epithelium to enter the blood vessel. It then needs to get to its target, which could be an intracellular molecule, a tissue, or even a piece of a cellular membrane. When the medication is exposed with relation to the biological surroundings, it consciously alters the molecule characteristics of artificial intelligence applications in pharmaceutical development and medication delivery 95 drugs, making the insulin. Furthermore, absent particular drug delivery systems, passive infiltration is frequently ineffective regarding biology and a number of categories of tiny molecules. Energy-activated cellular mediators mediate active diffusion systems, like membrane transport, so it usually depends on intricate biological exchanges and a significantly higher energy cost. This could enable the systems to be modeled for a greater range of particular variables for calculation ^[46].

AI that can investigate and analyze multilayered data could be very helpful in the pursuit of discover, developing, and characterizing mechanisms, such as those for interactions between membranes in the human environment model. The perceptive literature's parameter search and model comparison is presently among the most important techniques that is typically entrusted to the particular expertise as well as comprehension among the units of research. It could be very helpful to have an automated system that can search, simulate, score, and improve the search parameters and model evaluation. Consequently, the capacity to create a supported estimate and systematically improve it with the help of the outcomes of simulations in silico or experimental trials would consistently enhance the situation by allowing the methodical evaluation and selection of simulated models ^[46]. Databases pertaining to system biology may soon be prepared to facilitate AI applications and offer reliable data for AI training. Many examples of neural network software and applications are currently available; for instance, pharmacokinetics evaluation software already offers a strong foundation for this technology's application [47]. More sophisticated AI system examples are becoming available as instruments to add to the model's intricate inputs, such as phenotypic, drug interactions, and 96 Medical Artificial Intelligence databases pertaining to chemicals and genetics ^[48], paving the path for views on personalized medicine [49].

For instance, a business that owns a liposome—a platform for drug delivery—wants to simulate the effects of its technology by offering several prospective APIs for extended market circulation. The model ought to depict the most pertinent information for each of these APIs. Estimating each drug's penetration of obstacles in comparison to the others based on comparing the APIs' ADME functionality to the liposome's APIs (for instance, extravasation within the tumor). Perhaps this demands conducting both in silico and experimental research on a complex system, system modeling. An AI system could

assist in compiling data from various sources and generating prescription signs of these medications that would significantly help medication delivery mechanism. Analyzing molecular, pharmacokinetic, and patient data, for instance, could reveal the most pertinent difficulties in the creation of a particular API or system. Using a passive AI, new molecular entity features could be included with comparable recognized compounds and actively suggest delivery methods that are anticipated to be successful in creating a remedy. In light of that even a small rise in a substance's local concentration or bioavailability of powerful chemicals could determine a significant improvement in therapy, the outcomes of accurate mechanical simulations can significantly influence the impending creation of novel goods.

AI application early in the process of finding new drugs can directly benefit medicinal repurposing is the process of using current therapeutics for new diseases ^[47]. On the other hand, drug advancements in medication delivery or formulation could be necessary to modify the drug's stability or pharmacokinetics to meet the needs of particular patients. The lack of consistent data in databases is a barrier to the application of AI. Taking into account the possibility that many of the outcomes from today may not be closely enough equivalent to allow for an impartial assessment of parameters and models, an active AI that can sense and generate or validate the existing knowledge could aid in its consolidation. Thus, this would then allow for the creation of an information-processing passive AI application and teach researchers how to get around the lack of specialized knowledge needed for a product's logical design.

Active AI, parameter recording, and self-supervision of experiment outcomes could enable a better stringent outcome codification in a body of knowledge base. To elaborate, consider the following scenario: A virtual assistant managing pumps, UV probes, and liquid handlers run a series of tests that are micronized, or tinyscale lab-on-a-chip test procedures for the membrane penetration, interactions between cells or enzymes, and potentially even an organ on-chip research [50]. The AI reads articles quickly to learn about APIs and the delivery networks that feed it. The retesting of the parameters of permeability via a bio membrane, or membrane simulation, a PAMPA system that is standardized, for instance ^[51]. This allows it to compile the earlier results into a logical and well-documented database; later, the AI will conduct a comparison analysis with a novel medication. Another AI is working in the adjacent lab, conducting a mimicking controlled dissolution or glomerular filtration, but in a third lab, an enzyme's affinity is evaluated using a chip. The total of the outcomes is set up within a database. Systems have the ability to find an API that might being useful regarding the foundation within their ADME and replicate the results of drug delivery methods employing

DOI: 10.55522/jmpas.V14I1.6669

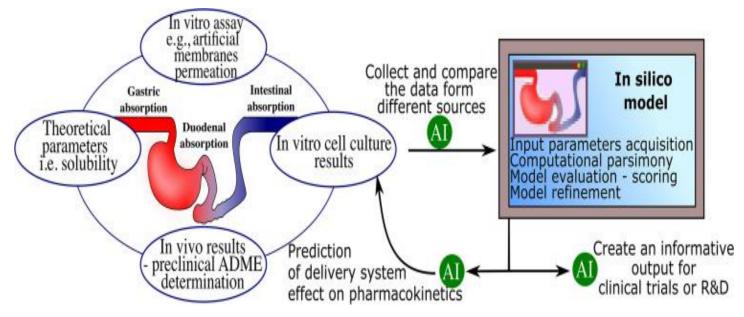
additional exacting criteria. In the meantime, the database might be being used by an AI bot to recommend a delivery method to a researcher looking as to improve insulin absorbance through the intestines (Figure 1). Product research and development can begin once the drug's delivery mechanism, metabolism, obstacles, and mode

of action have been determined.

Table 1: Enumeration of frequently studied AI models for the creation of pharmaceutical products

Models of AI and Machine Learning	Synopsis/Application	Reference
Molecular Algorithms	Natural selection and genetics serve as the foundation for genetic algorithms, which are optimization techniques. These can be used to maximize drug release profiles, formulation	[38]
	compositions, and process variables to reach the intended	
	Features of the dosage form.	
	5	<u> </u>
Artificial Neural Networks (ANNs)	Improved drug release kinetics have been achieved with the usage of ANNs at various dosage	[39]
	forms. They are useful in figuring out ideal compositions and forecasting the release how the active	
	ingredients in pharmaceuticals (APIs) in diverse circumstances.	
Support Vector Machines (SVMs)	Relationships between formulation factors, such as excipient, have been forecasted and modeled	40]
	using SVMs, in dosage form optimization. Composition, processing specifications, and medication	
	publish profiles. They support optimization composition design area.	
Particle Swarm Optimization (PSO)	PSO is a population-based optimization approach that can be used for dosage form optimization. It	[41]
	has been utilized to enhance distribution of particle sizes, profiles of dissolution, and further	
	parameters for formulation.	
Expert systems powered by artificial intelligence	Expert systems mimic the decision-making process of human experts by using AI techniques such	[42]
	as fuzzy logic and rule-based systems. They can be used for optimizing dosage forms by taking into	[42]
	account various formulation and procedure variations	
Monte Carlo Simulation	Drug product performance has been optimized through the use of Monte Carlo simulation	43]
	techniques, which take factors for formulation and procedure that are unclear and variable. They	,
	support the strong creation and layout of the procedure.	
Computational Fluid Dynamics (CFD)	CFD simulations make it possible to optimize fluid flow and mixing during the granulation and	[44]
	other dosage form manufacturing processes, drying, and coating. They assist in creating uniform	[44]
	and effective procedures.	
	1	
Response Surface Methodology (RSM)	RSM is a quantitative method that models and examines the relationship between several variables	[45]
	to help optimize dosage form formulations. The impact of variables on formulation reactions. It	
	facilitates comprehension and formulation parameter optimization.	

Figure 1: An illustration regarding artificial intelligence's application in silico simulations for drug delivery.



Application of Artificial Intelligence to Pharmaceutical Product R&D

The past and present phases in terms of development and research are recognized as the two primary stages of the process, simplifying it. Early-stage research and development consists of converting an idea into a design and creating a prototype that is tested while taking the fictitious mechanism of action as specified during the preliminary phases of the study. As it is integrated into the prototype and continuously improved after prototype testing. The primary earlyphase challenges are thought to be, aside from the precise product features, thorough product design, and accurate prototype understanding using a scalable process. Next, preliminary evidence of safety and efficacy is essential, particularly for novel pharmaceutical entities and consumer goods. The robustness of the advanced stage of development is a more powerful development that of scalability and real production method, as more research and advancement can be enabled by the capacity to produce the intended pharmaceutical products in greater quantities at specified quality possibilities ^[52].

The future is uncertain due to the trailing adoption of artificial intelligence (AI) in medicine delivery, but there is definitely room for improvement. It may seem that the drug delivery systems market is fairly developed at first glance, even taking into account the greater constrained domain of medication delivery systems with nanofeatures, indexing more than 300 items, or nearly industrystandard technologies [53]. The idea of a comprehensive applicative accomplishment is deceptive, though. The majority of the comparatively easy-to-make molecular conjugates that provide stability and a comparatively limited effect on the medication delivery strategies that have been used in industry are the relatively simple passive distribution of drugs. Companies can effectively implement new technologies through technological diffusion through imitation and propagation, however if the rate of inventions slows down as noted. It might be a sign of problems with the crisis in small-molecule R&D route of industrialization. The significant number of medication administration innovators are modest to medium businesses. Those populations are especially susceptible toward the growing dangers when creating new technologies, particularly when getting close to the newest artificial intelligence applications in pharmaceutical development and medication delivery 109 phases during the creation of technological readiness. TRL 1-3 here refers to the prototype stage prior to clinical trials that only requires TRL 4-6 for small-scale manufacturing here refers to the first to mature phases of clinical manifestation that require TRL 7-9 and at least a medium-scale degree of GMP production here refers to the commercial scale and beyond superior production. Given the potential uses in AI covered within the preceding sections, it could be a huge revolutionary for creative businesses in terms of first, the initial development and design of the system (usually identified in TRL 3-6) to mitigate the risks upon entering the clinical phases, and second, the use of AI in medicine distribution smart manufacturing to enhance procedures transfer (TRL 4 and beyond), scalability, and robustness [52].

For AI developers, the customized business network—the center of medication administration research and development—presents a number of significant obstacles. It is necessary to design and develop highly specialized AI systems for particular technological segments. This necessitates that IT professionals with an average level of IT/data expertise quickly popularize platforms that have knowledge of particular technological specialties. Toolboxes and the AI system cannot be closed-off entities due to the customization required, so it ought to be feasible to manage an open customization process and regulate ingrained biases. This puts a lot of pressure on programmers to create command solutions that are simplified, which eventually calls

for state-of-the-art user interfaces.

On the other hand, the pressure would shift to open platforms if the creation of a universal platform was sufficiently adaptable enough to establish the common foundation of the tailored AI development knowledge security is a vital resource for high-tech businesses, therefore data developers should be primarily concerned with safety and AI control. An additional query relates to the process of "forgetting" sensible industrial it is unclear how things turn out in the long run effects survivability of private industrial data in artificial intelligence systems would be once they are acquired by the system.

CONCLUSION

The escalating time and expenses in drug research demand innovative approaches, with AI technologies presenting vast opportunities. AI can analyze extensive multivariate data, tackle intricate issues in drug delivery system design, enhance decisionmaking, prototype illnesses, expedite identify targets and biomarkers for drug development, optimize formulations, and predict drug interactions. It plays a crucial role in designing novel therapeutics and efficiently connecting individuals with appropriate clinical trials, reducing mistakes and enhancing economy of scale. By scrutinizing chemical information, AI unveils insights into disease mechanisms, fostering the creation of medication and delivery methods that are more efficient. Specifically in combating infectious diseases and antimicrobial resistance, AI proves invaluable across the entire treatment spectrum, aiding drug development, predicting resistance, optimizing dosing, selecting combinations, refining delivery systems, designing administration routes, characterizing pharmacokinetics, and predicting treatment outcomes.

Despite the promise of AI in pharmaceuticals, adoption delays stem from non-technological issues, notably the absence of standardized databases and conservative regulatory approaches. AI transforms drug delivery, enabling targeted therapies through datadriven insights. AI models predict pharmacokinetics better than conventional techniques, model the dispersion of drugs and adjust dosages. AI and big data-driven computational pharmaceutics, streamlines drug delivery, offering efficiency, cost-effectiveness, and regulatory compliance. The incorporation of AI has tremendous capacity in propelling drug development, enhancing patient outcomes, and ushering the pharmaceutical sector has entered a new age.

ACKNOWLEDGEMENT

Thanks to my university and my teachers for supporting me throughout the completion of this review.

REFERENCES

- P Tangri, S Khurana, 2011. Pulsatile drug delivery systems: methods and advances. Int J Drug Formul Res. 2, Pages 100– 111.
- 2. Mark Staples, Karen Daniel, Michael J Cima, et al, 2006. Application of micro and nano-electromechanical devices to

drug delivery. Pharm Res 23, Pages 847–863. Doi: 10.1007/s11095-006-9906-4.

- K B Sutradhar, D Sumi, 2016. Implantable microchip: the futuristic controlled drug delivery system. Drug Deliv. 23, Pages 1–11. Doi: 10.3109/10717544.2014.903579.
- T Santini Jr, A Richards, A. Scheidt, et al, 2000. Microchips as implantable drug delivery devices. Ang Chem Int Ed. 39, Pages 2396–2407.
- Y.Li, H Duc, B Tyler, et al, 2005. Invivo delivery of BCNU from a MEMS device to a tumor model. J Control Release. 106, Pages 138–145. Doi: 10.1016/j.jconrel.2005.04.009.
- Kritika Ramesh, Shagun Gupta, Suhaib Ahmed, et al, 2016. A comprehensive study on design trends and future scope of implantable drug delivery systems. Int J Biosci Biotech. 8, Pages 11–20. Doi: 10.14257/ijbsbt.2016.8.6.02.
- T. Nisisako, 2016. Recent advances in microfluidic production of Janus droplets and particles. Curr Opin Colloid Interface Sci. 25, Pages 1–12. Doi: https://doi.org/10.1016/j.cocis.2016.05.003.
- U Xie, Z She, S Wang, et al, 2012. One-step fabrication of polymeric Janus nanoparticles for drug delivery. Langmuir. 28, Pages 4459–4463. Doi: 10.1021/la2042185.
- P Grant, 2007. A new approach to diabetic control: fuzzy logic and insulin pump technology. Med Eng Phys. 29, Pages 824– 827. Doi: 10.1016/j.medengphy.2006.08.014.
- E Murtoniemi, P Merkku, P Kinnunen, et al, 1994. Effect of neural network topology and training endpoint in modeling the fluidized bed granulation process. Int J Pharm. 110, Pages 101– 108. Doi: https://doi.org/10.1016/0378-5173(94)90147-3.
- A Sherriff, J Ott, 2004. Artificial neural networks as statistical tools in epidemiological studies: analysis of risk factors for early infant wheeze, Paediatr. Perinat.Epidemiol. 18(6), Pages 456– 463. Doi: https://doi.org/10.1111/j.1365-3016.2004.00592.x.
- S Chan, H Shan, T Dahoun, et al, 2019. Advancing Drug Discovery via Artificial Intelligence. Trends Pharmacol Sci. 40(8), Pages 592–604. Doi:10.1016/j.tips.2019.06.004.
- X Yang, Y Wang, R Byrne, et al, 2019. Concepts of Artificial Intelligence for Computer-Assisted Drug Discovery. Chem Rev. 119(18), Pages 10520–10594. Doi: 10.1021/acs.chemrev.8b00728.
- S Agrebi, A Larbi, 2020. Use of artificial intelligence in infectious diseases. In Artificial intelligence in precision health. Pages 415–438. Doi: https://doi.org/10.1016/B978-0-12-817133-2.00018-5.
- K Jain, 2020. Artificial Intelligence Applications in Handling the Infectious Diseases. Prim Health Care. 10(5), Pages 351.
- Sharma R, Shishodia A, 2022. Gunasekaran, A.; et al. The Role of Artificial Intelligence in Supply Chain Management. Mapping the Territory. Int J Prod Res. 60, Pages 7527-7550. Doi: 10.1080/00207543.2022.2029611.

- 17. A Aliper, 2016. Deep learning applications for predicting pharmacological properties of drugs and drug repurposing using transcriptomic data. Mol Pharm. 13, Pages 2524–2530.
- B Alipanahi, 2015. Predicting the sequence specificities of DNA- and RNA-binding proteins by deep learning. Nat Biotechnol. 33, Pages 831–838.
- 19. N Fleming, 2018. Computer-calculated compounds. Nature. 557, Pages S55–S57.
- Y Zhao, H Zhang, X Zhang, et al, 2006. Application of support vector machine (SVM) for prediction toxic activity of different data sets. Toxicology. 217(2-3), Pages 105–119. Doi: https://doi.org/10.1016/j.tox.2005.08.019.
- Selcuk Korkmaz, Gokmen Zararsiz, Dincer Goksuluk, et al, 2014. Drug/nondrug classification using support vector machines with various feature selection strategies, Comput. Meth. Prog. Biomed. 117 Pages 51–60. Doi: 10.1016/j.cmpb.2014.08.009.
- V Zernov, K Balakin, A Ivaschenko, et al, 2003. Drug discovery using support vector machines. The case studies of druglikeness, agrochemicallikeness, and enzyme inhibition predictions, J Chem Inf Comput Sci. 43(6), Pages 2048–2056. Doi: 10.1021/ci0340916.
- 23. X Liu, J Hu, R Zhang, et al, 2005. The prediction of human oral absorption for diffusion rate-limited drugs based on heuristic method and support vector machine. Journal Comput Aided Mol Des. 19(1), Pages 33–46. Doi: 10.1007/s10822-005-0095-8.
- X Yao, H Liu, R Zhang, et al, 2005. QSAR and classification study of 1,4-dihydropyridine calcium channel antagonists based on least squares support vector machines. Mol.Pharm. 2(5), Pages 348–356. Doi: 10.1021/mp050027v.
- 25. T van Laarhoven, E Marchiori, 2013. Predicting drug-target interactions for new drug compounds using a weighted nearest neighbor profile. PloS ONE. 8, Pages e66952. Doi: https://doi.org/10.1371/journal.pone.0066952.
- T van Laarhoven, S Nabuurs, E Marchiori, et al, 2011. Gaussian Interaction Profile Kernels for Predicting. Drug–Target Interaction. 27, Pages 3036–3043. Doi: 10.1093/bioinformatics/btr500.
- P Valeh-e-Sheyda, F Yaripour, G Moradi, et al, 2010. Application of artificial neural networks for estimation of the reaction rate in methanol dehydration, Ind Eng Chem Res. 49, Pages 4620–4626. Doi: 10.1021/ie9020705.
- A Metwally, R Hathout, 2015. Computer-assisted drug formulation design: a novel approach in drug Delivery. Mol Pharm. 12, Pages 2800–2810. Doi: 10.1021/mp500740d.
- V Sutariya, A Groshev, P Sadana, et al, 2013. Artificial neural network in drug delivery and pharmaceutical research. Open Bioinf. Journal. 7, Pages 49–62. Doi: 10.2174/1875036201307010049.
- 30. Y Xu, 2015. Deep learning for drug-induced liver injury. J Chem Inf Model. 55, Pages 2085–2093. Doi: https://pubs.acs.org/doi/10.1021/acs.jcim.5b00238.

DOI: 10.55522/jmpas.V14I1.6669

- M Danishuddin, A Khan, 2015. Structure-based virtual screening to discover putative drug candidates: necessary considerations and successful case studies. Methods. 71, Pages 135–145. Doi: 10.1016/j.ymeth.2014.10.019.
- T Fox, J Kriegl, 2006. Machine learning techniques for in silico modeling of drug metabolism. Curr Top Med Chem. 6, Pages 1579–1591. Doi: 10.2174/156802606778108915.
- D Korolev, K Balakin, Y Nikolsky, et al, 2003. Modeling of human cytochrome P450-mediated drug metabolism using unsupervised machine learning approach. J Med Chem. 46, Pages 3631–3643. Doi: 10.1021/jm030102a.
- Lou H, Lian B, Hageman M, et al, 2021. Applications of Machine Learning in Solid Oral Dosage Form Development. J Pharm Sci. 110, Pages 3150–3165. Doi: 10.1016/j.xphs.2021.04.013.
- Bannigan P, Aldeghi M, S Bao, et al, 2021. Machine Learning Directed Drug Formulation Development. Adv Drug Deliv Rev. 175, Pages 113806. Doi: https://doi.org/10.1016/j.addr.2021.05.016.
- 37. Sun Y, Peng Y, Chen, et al, 2003. Application of Artificial Neural Networks in the Design of Controlled Release Drug Delivery Systems. Adv Drug Deliver Rev. 55, Pages 1201– 1215. Doi: 10.1016/s0169-409x(03)00119-4.
- Mukhamediev R, Popova Y, Kuchin, et al, 2022. Review of Artificial Intelligence and Machine Learning Technologies: Classification, Restrictions, Opportunities and Challenges. Mathematics. 10, Pages 2552. Doi: https://doi.org/10.3390/math10152552.
- Sengupta S, Basak S, Peters, et al, 2018. Optimization: A Survey of Historical and Recent Developments with Hybridization Perspectives. Mach Learn Knowl Extr. 1, Pages 157–191. Doi: https://doi.org/10.3390/make1010010.
- Paul D, Sanap G, Shenoy S, et al, 2021. Artificial Intelligence in Drug Discovery and Development. Drug Discov. 26, Pages 80– 93. Doi: 10.1016/j.drudis.2020.10.010.
- Eberle G, Sugiyama H, Schmidt R, et al, 2014. Improving Lead Time of Pharmaceutical Production Processes Using Monte Carlo Simulation. Comput Chem Eng. 68, Pages 255–263. Doi: 10.1016/j.compchemeng.2014.05.017.

- 42. Böhling P, Khinast J, Jajcevic D, et al, 2019. Computational Fluid Dynamics-Discrete Element Method Modeling of an Industrial-Scale Wurster Coater. Journal Pharma Sci. 108, Pages 538–550. Doi: https://doi.org/10.1016/j.xphs.2018.10.016.
- 43. Mahapatra K, Saraswat R, Botre N, et al, 2020. Application of Response Surface Methodology (RSM) in Statistical Optimization and Pharmaceutical Characterization of a Patient Compliance Effervescent Tablet Formulation of an Antiepileptic Drug Levetiracetam. Future J Pharm Sci. 6, Pages 82.
- 44. Bhhatarai B, Walters WP, Hop CECA, et al, 2019. Opportunities and challenges using artificial intelligence in ADME/Tox. Nat Mater. 18, Pages 41822. Doi: 10.1038/s41563-019-0332-5.
- 45. Mak KK, Pichika MR, 2019. Artificial intelligence in drug development: present status and future prospects. Drug Discov Today. 24, Pages 77380. Doi: 10.1016/j.drudis.2018.11.014.
- 46. Cheng F, Zhao Z, 2014. Machine learning-based prediction of drug-drug interactions by integrating drug phenotypic, therapeutic, chemical, and genomic properties. J Am Med Inform Assoc. Pages 21:e27886. Doi: 10.1136/amiajnl-2013-002512.
- 47. Menden MP, 2013. Machine learning prediction of cancer cell sensitivity to drugs based on genomic and chemical properties. PLoS One. Pages 8:e61318. Doi: https://doi.org/10.1371/journal.pone.0061318.
- Cui P, Wang S, 2018. Application of microfluidic chip technology in pharmaceutical analysis: a review. J Pharm Anal. Doi: https://doi.org/10.1016/J. JPHA.2018.12.001.
- 49. Balogh GT, Müller J, Könczöl A, et al, 2013. pH-gradient PAMPA-based in vitro model assay for drug-induced phospholipidosis in the early stage of drug discovery. Eur J Pharm Sci. 49, Pages 819. Doi: 10.1016/j.ejps.2013.02.005.
- Eaton MAW, Levy L, Fontaine OMA, et al, 2015. Delivering nanomedicines to patients: a practical guide. Nanomed Nanotechnol Biol Med. 11, Pages 98392. Doi: 10.1016/j.nano.2015.02.004.
- 51. Weissig V, Guzman-Villanueva D, 2015. Nanopharmaceuticals (part 2): products in the pipeline. Int J Nanomed. 10, Pages 1245. Doi: 10.2147/IJN.S65526.
- 52. Park K, 2013. Facing the truth about nanotechnology in drug delivery. ACS Nano. 7, Pages 74427. Doi: 10.1021/nn404501g.
- Ragelle H, Danhier F, Préat V, et al, 2016. Nanoparticle-based drug delivery systems: a commercial and regulatory outlook as the field matures. Expert Opin Drug Deliv. 114, Doi: https://doi.org/10.1080/17425247.2016.1244187.