

AI-Enhanced Nanoparticle-Mediated Drug Delivery: Advancing Personalized Cancer Treatment through Biomarker Identification

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Abstract

Cancer is a fatal illness that claims approximately 10 million lives each year worldwide. There are numerous types of cancer, and each patient's prognosis is different due to specific molecular markers a person's body. However, different cancer kinds and neoplastic alterations can cause genetic heterogeneity. Specialized medication delivery is regarded as a key component of precisemedical care in the treatment of cancer since it assists in the administration of giving patient medicines by gradually boosting the drug's presence in the part of body being targeted. In this circumstances, with the use of nanoparticle mediated drug administration and the inclusion of diagnostics and therapeutics artificial intelligence (AI), localized drug delivery system capable of biomarker identification can be enhanced. Biomarker identification by diagnostic assays employing nanoparticles (NPs) is made possible by gathering at the precise cancer spots and ensuring precise medication delivery planning. AI and NPs for cancer targeting can be used to create sophisticated algorithms that better categorize different cancers and comprehend complicated disease patterns. Advanced AI algorithms may also be used to detect biomarkers, forecast various medication-drug interactions, and assess therapeutic effectiveness. Given the advantages of NPs and AI working together for targeted medicine administration, this specific research topic has not received much attention, with the majority of studies focusing on AI and drug development. Therefore, main objective of the study is to draw attention to the most current developments in NP-based drug delivery and how they affect the development of individualized cancer therapy regimens.

Introduction

Cancer is a wide range of illnesses brought on by the transformation of normal cells into cancerous ones and develop through multiple stages from malignant lesions to malignancy are connectively referred to as cancer. Annual reports of over a million new cases of cancer result in significant death rates (2). In 2020, cancer will be the primary cause of roughly 10 million deaths globally. In terms of fresh cases of cancer in 2020, the following were most prevalent:

- 1- 2.26 million instances of breast cancer (22%).
- 2- 2.21 million cases of lung cancer (23%).

- 3- 1.93 million cases of colon and rectal cancer (19%).
- 4- 1.41 million cases of prostate cancer (14%).
- 5- 1.20 million cases of non-melanoma skin cancer (11%).
- 6- 1.09 million cases of stomach cancer (11%).

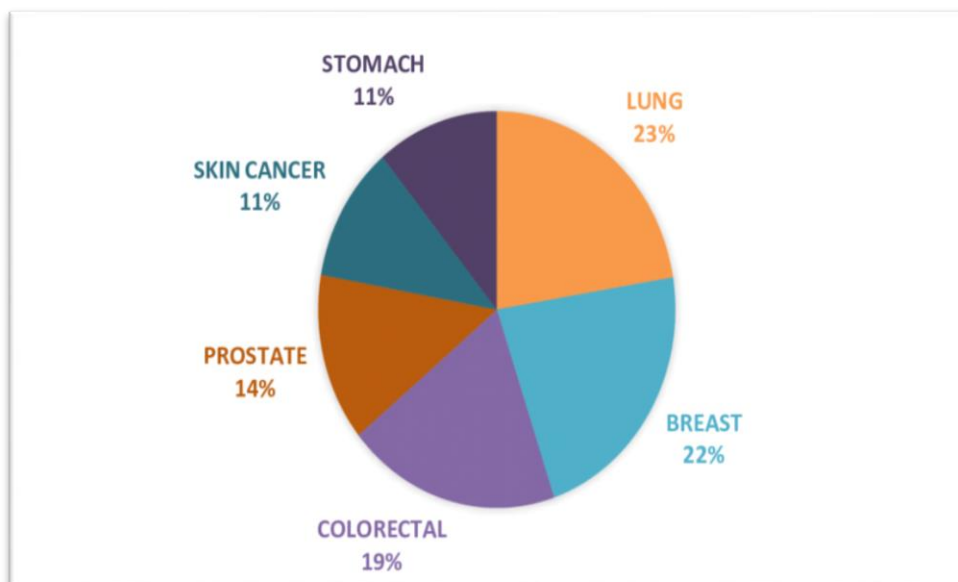


Figure 1: Different types of cancer

Surgery is typically used to treat cancer that is localized and radiation therapy and chemotherapy are used to treat cancer that is progressed (3). Chemotherapeutic treatments target both cancerous cells and certain normal cells in patients, it has been discovered in retrospect.

As a result, newly generated cancer therapeutics have emerged during the past few years, including targeted cancer therapies for increased treatment precision. Drugs that are administered to reduce the development and demise of cancerous cells are included in targeted therapy, which limits cancer metastasis. The recent studies suggested, that systemic drug administration is a major factor in clinical chemotherapeutic failures because there is insufficient drug concentration in the tumor regions (4). Due to the fact that natural substances are currently being researched for use in the treatment of cancer and a number of other microbial and inflammatory illnesses, nanotechnology is essential in the development of contemporary drug delivery systems. Utilizing nanotechnology makes it possible to use therapeutic medicines and other nanoscale produced nanostructures for nanomedicines (5).

Background

Nanotechnology used as targeted drug delivery

Medication delivery, biosensors, tissue engineering, and nanobiotechnology are all areas of biomedicine that are greatly impacted by the usage of nanoparticles. Numerous advancements in nanotechnology have been made over the last 10 years, and feasible synthesis, characterization, and alterations of functional characteristics of nanoparticles are

currently used for biological applications and medical diagnosis(6). Conventional chemotherapy has been somewhat successful, but it has some significant drawbacks, including low levels of therapeutic indices, inadequate bioavailability, excessive dose needs, unfavorable side effects following therapy, and non-specific targeting. As the field of nanomedicine continues to make major developments, investigators have examined the effectiveness of nanoparticles medically mediated administration and its potential to enhance the regional medication delivery system.

The primary benefit of such customized medication delivery is the decrease in the number of times cancer patients must take medication and any unwanted effects. Traditionally, giving chemotherapy medications is a recommended method. However, medication delivery inside of a capsule provides a number of benefits, including protection from bloodstream degradation, greater drug solubility, a reduction in hazardous side effects delivery, as some medications have a poor ability to dissolve and absorb (7).

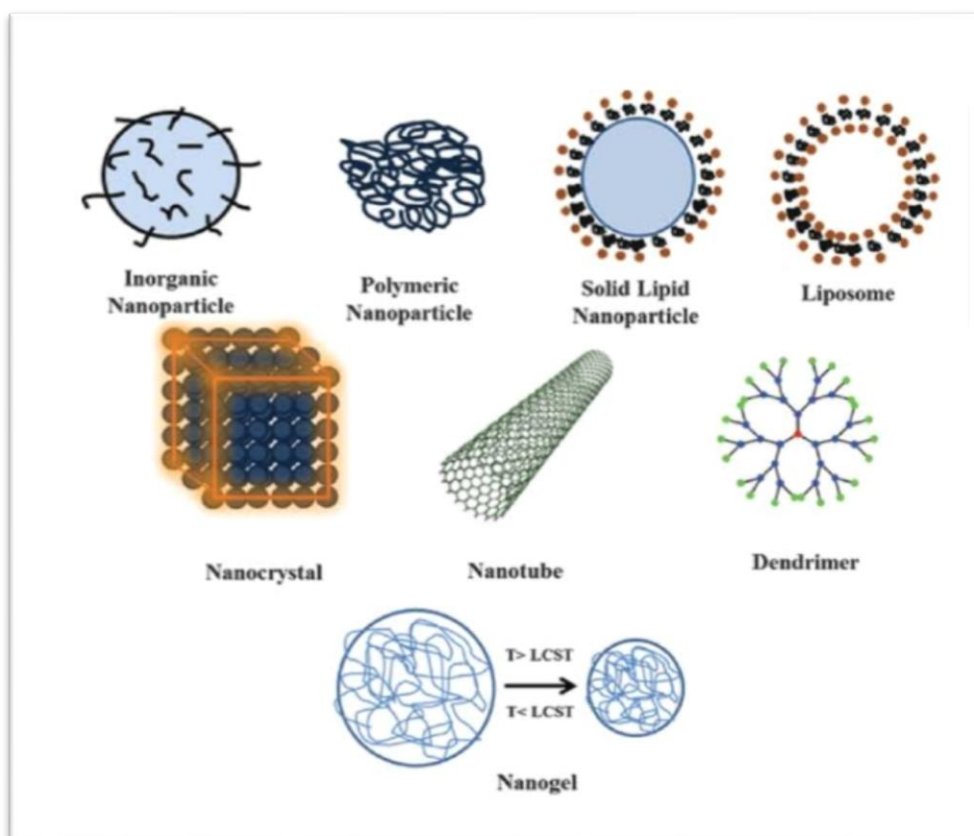


Figure2: Many nanoparticle kinds utilized in medication delivery.

Since every patient has a different genetic profile and there are several cancer indicators, treating cancer is difficult. This variability is evident in several cancer types since patients have distinctive driver mutations and individual genetic signatures that result in tumor heterogeneity, a significant obstacle in the treatment of cancer (8). Recently, therapeutic nanotechnologies have been used to further leverage patient-specific disease profiles created by diagnostic nanoparticles, such as quantum dots (QDs), gold nanoparticles (AuNPs), and polymer dots (PDs), in order to advance precision medicine and enhance the results of individualized patient treatment (9).

Additionally, AI is very good at optimizing, thus nanomedicine may also profit from the incorporation of AI by improving the material characteristics or comprehending tailored treatments interactions with the immune system, cell membranes, and drug synergies more swiftly. A rare opportunity exists to fully utilise AI's potential in precision medicine for the detection and treatment of cancer thanks to recent advancements in the field and its potential contribution to bio nanotechnology increasing treatment results.

The study also emphasises how AI may be used to improve tailored medicine delivery systems by detecting biomarkers. In the end, the discoveries serve as foundation this is due to AI's enormous potential for automation, quicker patient analysis of complicated illness information, and correct results delivery through processing complex medical data more quickly understanding medication synergies, using new techniques for analysis and molecular docking to facilitate clinical trial failures and poor response rates, and the artificial intelligence (AI) and nanomedicines that are being used in drug discovery processes that are computer and AI enabled, and they are helping to make cancer therapies more cheap. Numerous studies demonstrate their efficacy and capacity to get over restrictions associated with conventional delivery, including microbial-distribution, organelle-molecular transport to chosen organelles with precise targeting.

Additionally, NPs improve the solubility and durability of cargoes containing drugs in order to support improved extended medication circulation times with cell membrane transfer in patients in order to increase safety and effectiveness of therapy. Additionally, a significant barrier to the effectiveness of nanomedicine, particularly in the treatment of complicated disorders like cancer, is the heterogeneity of patients.

However, more recent research have investigated how NPs can get beyond biological limitations and improve precision with more individualized treatment techniques by using patient data such as environmental, genetic, and historical aspects, as well as biomarker information, to develop more effective treatment strategies. Personalized treatment programs. Lipids, polymers, and inorganic NPs are continuously studied utilizing various methods of synthesis to aid in optimizing medication administration, which results in the success of precision medicine in the treatment of cancer. However, accurate therapies may also be susceptible to biological obstacles that are possible to overcome with the help of increased utilization of reliable information from a grouped patient population.

Specific medication delivery system

Specific drug delivery system are used for cancer treatment. These medications only function when tumor has a particular target. It helps to slow down the growth of tumor cells or basically it kills the cancerous cells. Targeted cancer therapies are a type of cell-based therapy that tries to directly target cancer cells.

They target particular cellular components as well as the signals that induce cancer cells to naturally die. Targeted therapies include:-

- A- Monoclonal antibodies.
- B- Small molecule inhibitors.

Additionally, drug targeting contributes to the definition of the targeted release of cancer therapies with a greater pharmacological effect at the particular tumor location. NPs enable the use of both active and passive targeting techniques. While active targeting enables the identification of the NP uptake levels by the tumor cells, passive targeting best achieves the

localization of NPs for the target organ inside the cancer cell. Four factors make TDD preferable to conventional DSs: unsatisfactory pharmacodynamic, pharmacokinetic, pharmaceutical, and pharmacotherapeutic characteristics of drug performance with conventional delivery. Drugs should be targeted to a specific location using improved drug delivery techniques in order to increase therapeutic effectiveness as well as lessen the toxicity brought on by large doses and a small therapeutic index.

To address these constraints and the inherent drawbacks of conventional drug delivery system, targeting is required. Parenteral administration is exceedingly invasive, protein- or peptide-derived medications cannot be administered orally, and topical lotions and ointments can only have local effects. The improved permeability and retention (EPR) effect is among the most critical elements in the effective delivery of medicines to tumour tissues. One distinguishing characteristic of tumor cells that is seen as a major advancement in chemotherapy with a tumor target. Therefore, this impact of EPR has become crucial in the development of anticancer drugs and utilizing liposomes, macromolecules, molecular imaging, antibody treatment, protein-polymer conjugates, and macromolecules, respectively, are a few methods for medication delivery and design. However, there are a lot of differences in opinion on how EPR works when NPs are involved. Consequently, there is an urgent need to concentrate more on developing tumor-specific delivery methods for anticancer medications and, as a consequence, better comprehend the key differences between normal and tumor cells (10).

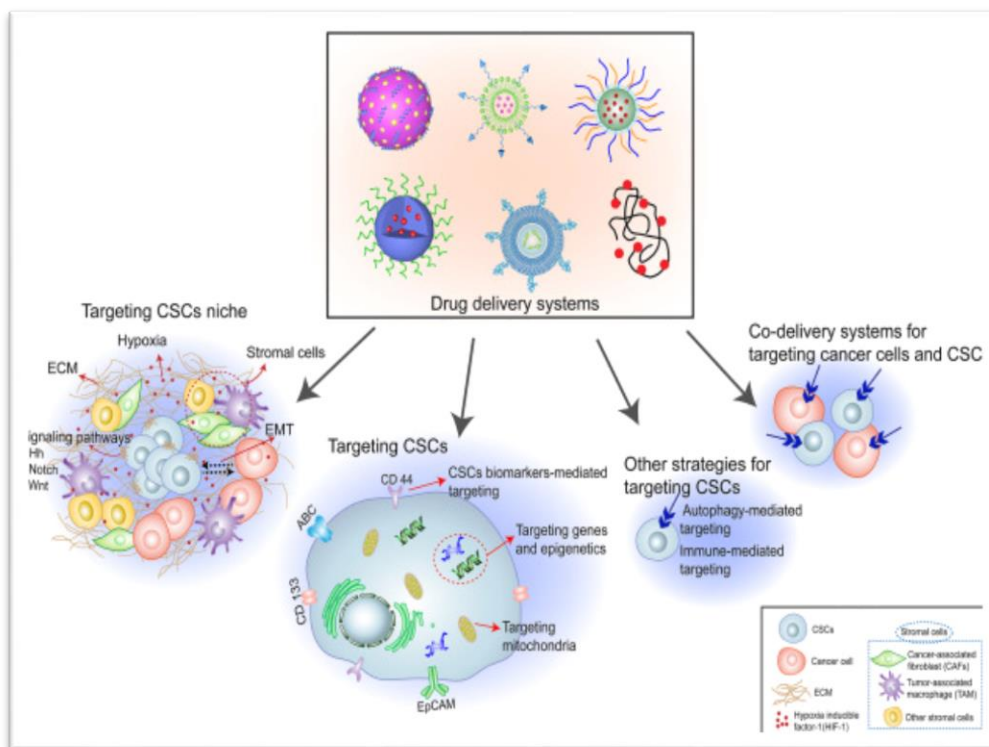


Figure 3: Drug delivery system targeting Cancer stem cells.

Nanotechnology is the process of manipulating matter at an incredibly tiny size to create usable materials, devices, and systems. This expanding field of study involves scientists from many different fields, including physicists, chemical engineers, technicians, computer

technologists, material researchers, and biologists. Nanotechnology may be able to develop a variety of new products, including ones for consumer goods, electronics, biomaterials, medicine, and energy production (11).

Existing cancer therapy medication delivery methods

The FDA (food and drug administration) approved most of the nanoparticles-based medicines over the past few years. Recently the FDA approved the albumin for the treatment of cancer. Albumin having the desirable qualities that make it desirable medication delivery system in cancer treatment. It spontaneously transports water-insoluble plasma components such as vitamins, hormones, and other endogenous hydrophobic compounds that are bound in a reversible non-covalent manner. Abraxane, a drug with commercial success for treating breast cancer, is found to contain paclitaxel in an albumin-based nanoparticle format (12, 13).

Due to their biodegradability and biocompatibility, synthetic polymers like poly D, L-lactic coglycolic acid (PLGA) are primarily used in the present drug delivery systems (36). In recent years, numerous studies have suggested the strategic role of taxanes in the treatment of cancer, and other studies have evaluated these drugs in order to better understand their preclinical and clinical pharmacology. Taxanes are hydrophobic antineoplastic agents with significant antitumor activity against a broad spectrum on cancer. Additionally, it has been discovered that the Vyexos drug delivery system can deliver a combination of daunorubicin and cytarabine in synergistic ratios for cancer treatment. When the drug is released, a better interaction with the target cell is seen (14). Additionally, intralipid exhibits the capacity to control natural immune responses, which are essential for cancer immunity. Two separate kinds of macrophages have been shown to have distinct roles in the development of cancer. By releasing pro-inflammatory cytokines, the traditionally engaged M1 macrophages provide an anti-tumor effect.

The immune response is suppressed and angiogenesis and metastases are promoted by anti-inflammatory M2 macrophages. Lipid emulsions with different fatty acid contents have been shown to influence macrophage polarization and cytokine production. Our findings imply that intralipid promotes macrophage polarization towards the M1-like phenotype but has no effect on endocytosis. As a result, pretreatment with Intralipid seems like a viable way to improve the effectiveness of nanodrugs while lowering their toxicity (15). The polymers chosen for parenteral administration should ideally have specified mechanical and physicochemical characteristics as well as be biocompatible and biodegradable. The earliest polymers used to make polymeric nanoparticles (PNs) were non-biodegradable polymers like poly (methyl methacrylate) (PMMA), polyacrylamide, polystyrene, and polyacrylates. These materials nano-systems showed quick and effective clearance towards cancer treatment (16). The European Medicines Agency (EMA) also authorized Teva's development of Myocet liposomal, which contains non-PEGylated liposomal doxorubicin and is primarily used to treat breast cancer metastases (17,18). The FDA and EMA have approved several developments and further nanoparticle-based medication delivery systems, which are now undergoing clinical trials.

General AI in nanomedicine aspects

Artificial intelligence (AI) is a general term used to describe a variety of computer science innovations, such as artificial intelligence (AI), machine learning, and natural language processing (NLP). These developments hold the possibility of enabling robots to emulate human behaviours, cognition, and perform a range of complex activities. Large and diverse datasets are used to train machine learning and deep learning models, which then allow the intelligent models to predict, categorize, or recognize patterns for a given input (19). However, it is not limited to the activities that have been outlined because recent advances in the field have led to various solutions for a range of problems that occur in the real world. AI algorithms may recognize object identification, categorization, computational intelligence, and statistical patterns. Research on AI-enabled computational approaches for drug development and other pharmaceutical research has grown significantly in the biomedical field (20). Repurposing existing chemicals for new purposes is a prevalent practise in drug discovery, and artificial intelligence in the development of drugs is the practise of employing computer tools to study novel medications. By processing data at the rate of your central processing unit (CPU), a computer, digital at scale and speed (nanotechnology), and optimising your business, artificial intelligence (AI) and its two parts, namely machine learning (ML) and deep learning (DL), can help increase productivity and ensure compliance. Operating at the microscopic level presents significant simulation-related challenges. Numerical models are frequently employed to analyse nanoscale pictures since genuine optical images can't be obtained at that size. However, different software are used to produce these picture representations, and frequently it can be challenging to incorporate all the essential information to provide correct representations. In this regard, AI effectively produces simulations that are simpler to comprehend (21). The relationship between formulation, process factors, and controlled release in drug delivery systems is nonlinear; as a result, connected networks and the optimisation of controlled release data are essential (22). The best topologies in these situations are neural network topologies since they produce predictions, classifications, or recognitions because each layer of a node is linked. The most popular method for determining the structures of molecular pieces, topological indices, and descriptors, as well as for evaluating physiochemical attributes from sizable training sets is the standard feed-forward neural network (23). ANNs are being studied in pharmaceutical research with the goal of understanding pre-formulations and accurately predicting medication behaviour.

AI-based optimisation of medicine discovery and delivery

Investigators use AI to swiftly assess therapeutic targets, identify lead compounds with therapeutic promise against a disease, and enhance medication delivery. This essay's main focus is on how AI may improve the delivery of medical care. Integrated circuits, a power supply, sensors, and a secure data backup that is maintained current utilising AI-based technologies make up nano robots. Nanorobots are used to deliver medications. They are built to avoid collisions, find their intended recipient, attach to them, deliver chemical medications, and then leave the body (24). Theoretically, nanorobots are tiny objects with dimensions measured in nanometers (1nm = one millionth of a millimetre).

They respond to acoustic impulses and operate at the atomic, molecular, and cellular levels both in the medical and industrial fields.



Figure 4: Nanorobot

Working of nanorobot:

When a small robot is inserted into our bloodstream. The benefit of the robot is that it causes quick illness elimination and non-degradation of treatment substances. It finds the source of diseases, goes to the right system, and delivers a dose of medication straight to the diseased region.

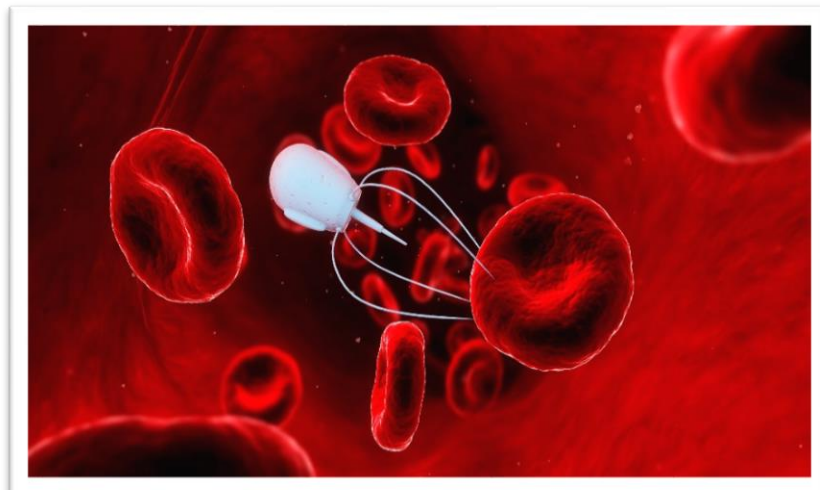


Figure 5: The nanorobot attaching to blood cell.

Investigators used artificial neural networks (ANNs), logistic regression, and network-based modelling to investigate pharmaceutical combinations and improve the overall dosage regimen. Combination drug therapy, which requires many drugs to be taken at regular times,

is typically more successful than using only one. For instance, six or seven drugs are used in an integrated therapy for cancer (24).

The human body is intricate because it is made up of several biological membranes, each of which has physicochemical characteristics that distinguish the distinct biological compartments. As a result, the medication delivery methods for these compartmental systems are frequently streamlined. Targeted drug delivery strategies need to take into account a number of variables, such as the right dosage, to guarantee passage, penetration, and accessing the desired area indicated by the cellular or organ membranes. To detect interactions between the biological environment and the medicine and its molecular characteristics in this respect, a sophisticated understanding of the biological environment is necessary. Given that drug delivery systems now include a growing number of diverse computation parameters, this information makes the predictive computation more difficult (25).

Identification and analysis of patient biomarkers for focused medication delivery

Finding proteins, genes, and other elements (often referred to as cancer indicators or biomarkers) that may give data on cancer is possible through the testing of biomarkers. Each person's cancer is characterised by a unique collection of biomarkers. Some biomarkers affect how well certain cancer therapies work. You and your physician may pick a cancer therapy together with the aid of biomarker testing. Other varieties of biomarkers are also available to aid medical professional in the detection, care, and monitoring of cancer. Biomarker testing is only for cancer patients.

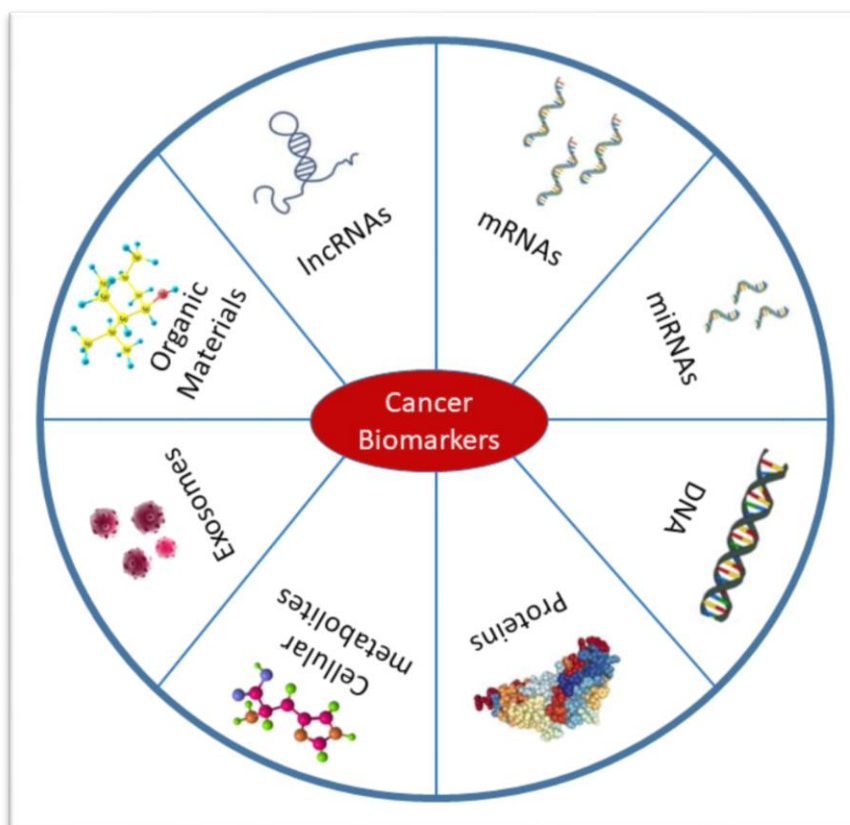


Figure 7: Different types of biomarkers.

Persons with blood cancer and solid tumours can get a biomarker test. Other names for cancer therapy biomarker testing include:

- 1- Tumour analysis .
- 2- Genetic testing for tumours .
- 3- Molecular testing using genomics or genomic profiling.

Treatments called EGFR inhibitors, which target specific genetic abnormalities in the EGFR gene, are available to patients with cancer. Biomarker analysis on an individual's cancer can identify an EGFR gene change that can be managed with an EGFR blocker in this circumstance. With the aid of biomarker testing, you could be qualified to register in a clinical study for a cutting-edge cancer treatment. Some studies choose participants based on the disease's biomarkers, rather than the area of the body where the cancer originally manifested. Sometimes, these are referred to as "basket trials" (26).

Table 1: Different types of biomarkers with their application.

Sr. No.	TYPE	CANCER	APPLICATIONS
1	Proteins	Thyroid, Colon	Monitoring, selection of therapy.
2	DNA	Lung, Head, Neck	Diagnosis, Screening.
3	miRNAs	Papillary, Colorectal, thyroid	Monitor the protein interactions.
4	Exosomes	Lung	Prognosis, Diagnosis, Cancer vaccine.
5	Cellular metabolites	Tumour (head)	Prognosis, Diagnosis.
6	Organic materials	Lung	Diagnosis
7	mRNA	Promote properties of cancer cells	Therapeutics.

Problems in imaging for cancer today that can be solved using NPs and AI

Almost every element of top-notch cancer treatment, from diagnosis through treatment and continuation, depends on imaging in one way or another. Technologies for cross-sectional visualisation, accurate cancer detection methods are now available, measure the extent of its presence and, in some cases, give biological information. However, there are disparities in imaging knowledge and technology between poor and developed nations is incredibly unequal (27). High-quality imaging necessitates a broad understanding of the diseases involved as well as advanced communication abilities. It requires efficient examination planning and execution, picture post-processing, image interpretation, and finding genes, proteins, and other components (sometimes referred to as biomarkers) can be done by testing for biomarkers that provide information about cancer.

Some biomarkers affect how well certain cancer therapies work. You and your physician may pick a cancer therapy together with the aid of biomarker testing.

There are many more types of biomarkers available to help doctors detect, treat, and monitor cancer. Biomarker testing is only for cancer patients. The oncologic radiologist must be knowledgeable about various tumour entities, their distribution patterns, and how they show up on different imaging modalities. In addition, he or she must be able to evaluate the tumour response to 15 various therapies, their side effects and the various patterns of tumour recurrence. Additionally, he or she must be aware of the procedures and requirements of the numerous clinical partners involved in the therapy of cancer (such as those from radiation therapy, surgical oncology, and medicinal oncology) (27). Fluorodeoxyglucose (F-FDG ¹⁸F) has a relatively limited shelf life due to the physical degradation of ¹⁸F, which has an approximate half-life of 109 minutes and is frequently employed for cancer diagnostics (28). Even while this duration is suitable for PET scanning, NPs with fluorescent characteristics, such as the quantum dots, may offer a longer period of retention and produce bigger concentrations in cancer tissues than in other organs (28). Although specific medication delivery represents a substantial advancement in cancer therapy, but its efficacy depends on the ability of biomarker sensing NPs to support early disease identification and provide prognostic information. Recent research has demonstrated the significance of KRAS mutant prognostic information for patient survival. Furthermore, it has been mentioned that the 36-month patient survival rate for those with KRAS mutations was just 24% (29). Fluorescence quantum dots may be used to create changeable lights with various hues that can be used to precisely detect the gene signatures of cancerous cells. The resulting pictures may be further analysed using AI to pinpoint the location of tumours and schedule medicine administration. Additionally, AI-enabled methods support ratio metric drug delivery and drug targeting. Similar to classification models, predictive models may be used to forecast the disease's prognosis based on the data obtained, whereas models of prediction can assist in creating molecular identities for patients based on their responses and pharmacological synergy to gauge therapy effectiveness. Because artificial intelligence algorithms have demonstrated capabilities in processing sizable datasets with complicated patterns, its usage in biosensor imaging can be employed to enhance cancer detection and therapy (19,30). Nano-sensors have electrochemical and mechanical characteristics that increase the signal-to-noise ratio in biomarker sensing, allowing them to identify molecular fingerprints in the tumour microenvironment even at low concentrations. As a result, AI can assist in identifying several biomarkers that may be used to create a unique illness profile utilising sophisticated computational analysis (19, 31).

Drug delivery utilising nanorobots and sophisticated AI solutions

The field of microrobotics focuses on the study and creation of artificial robots with a maximum size on the micron scale for a variety of practical uses. The goal of medical microrobotics is to create and use a large number of micro/nanomachines (programmable, reconfigurable, and capable of physical, chemical, or biological propulsion) to perform a variety of medical procedures (such as delivering medications in situ, inducing localised heat, focusing on conducting cell micro surgery on ill cells) inside the complex body environments (32).

A new investigation focused on the use of gold nanoparticles and mesoporous silica nanoparticles as nanomotors. In vivo imaging required radiolabelled nanomotors. Additionally, PET was used to implement quantitative nanomotor tracking, enhancing immediate visualisation and opening the way for theranostic applications in the transport of drugs, and tracking of active swarming dynamics (33).

Growing breakthroughs are shown incorporating AI, intelligent sensors, and a power source into nanorobots as a result of impressive technological and biological advances in nanotechnology. Researchers are also looking at the viability of automating the mobility and behaviour of nanorobots in molecular manufacturing using AI technology (34). The development of superior nanorobots for controlled drug administration with efficient nanocommunication may benefit from AI-based simulations and modelling (35). DNA nanorobots are novel technologies being researched for biosensing and medication delivery. However, because they are seen as crucial components of these nanorobots since the neural network enhances their prediction skills and optimises their performance for detecting. Fuzzy logic is a different method that has been found to be successful in predicting medicine dose for intracellular administration after the tumour diagnosis, despite the fact that the considerable influence on nanorobots has been seen. Fuzzy models, in particular, can efficiently give the linear mapping is required for determining the right dosage for delivery within cells (20, 36).

Future prospects and difficulties of AI and novel technology-mediated drug delivery involving nanoparticles

The swiftly developing nanotechnology 30 years after it first inspired novel pharmacological difficulties, the administration of biologically active substances is now revolutionised. The primary contribution of current nanotechnology to pharmacology is that it enables significant advancements to be made in site-specific, temporal, and spatial delivery. Paul Ehrlich, a Nobel Prize-winning immunologist, first introduced the idea of a "magic bullet" over a century ago. However, only lately have numerous varieties of drug-targeting systems been licenced for the treatment of major infectious illnesses and some types of cancer (37). By analysing the pharmacodynamics and pharmacokinetic characteristics of numerous medications and minimising false favourable rates, AI has considerably decreased the time and expense associated with drug discovery. It has also improved the efficiency of nanotechnology and pharmaceutical research. High computing power, obstacles include maintenance, reliability of AI-enabled findings, availability, and ethical issues (20). Even though ANNs are specially effective at classification, pattern recognition, and prediction. When used with response surface approach, they can expedite the analysis of correlations between explanatory and response variables in particular (38). In order to provide efficient control and automation for scheduling medicine administration and controlling arterial and venous circulation using pharmacological agents, flexible logic-based systems for drug delivery have been found to give faster reaction times (39).

Reinforcement learning is another cutting-edge AI technology that has attracted interest in silico medicine. The capacity of these AI systems to learn from their surroundings and rely less on datasets is the main justification.

A supervised learning technique that can identify missing features from the data was recently proposed in research. Now imagine AI is being explored for nanomedicine. To make sure reliable models are tools to forecast medication interactions, selecting acceptable chemical mixtures, as well as biomarker imaging as well as aiding in correct drug distribution and drug effectiveness, difficulties including overfitting, validation, and bias must be addressed. The availability of big datasets with various kinds of clinical data to train AI models and optimise for precise medication administration is another typical issue. The use of AI in medication development and delivery is still in its infancy, but in recent years, successful AI integration has been closely studied in the pharmaceutical and bioinformatics sectors. Despite these challenges, scientists have discovered that AI is hastening the creation of drugs, including real-world tests. Additionally, research is being done on gene treatments and the application of AI in regenerative medicine. Future therapeutic applications of AI have the potential to improve drug distribution, similar to how AI has restricted the administration of medications (40).

Conclusion

The field of nanomedicine is expanding swiftly, and several drug carriers are being examined to see how well they work at delivering drugs locally and to specific cancer locations. In addition, merging hybrid techniques with nanotherapies is always being tested to improve the effectiveness of cancer patient's treatments. However, the conventional drug development and delivery processes present a number of difficulties for these approaches. Understanding medication synergies is crucial, but defining specific patient profiles determined by their particular molecular fingerprints is now crucial for assuring the efficacy of targeted medicine delivery in the long run. These are essential since there is still a very high proportion of treatment failures and inadequate treatment responses. Additionally, in order to reduce treatment failures and enhance cancer treatments, more clinical parameters are needed. Due to its demonstrated abilities with clinical imaging, AI is therefore essential in developing a route to assess molecular signature-based patient classification, real-time monitoring of medication delivery methods, and actionable data on treatment response. This also helps to advance image-guided drug delivery. There haven't been many investigators especially concentrating on AI for targeted medication delivery throughout the years, despite the fact that both the pharmaceutical and nanotechnology disciplines have been studied extensively. In order to improve the results of nanotechnology-based therapeutics, this study set out to show the potential influence on patient profiling, cancer sign detection, and nanoparticle imaging, as well as how the use of AI might aid in overcoming some of the limits of production procedures.

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