



AI- Driven Transformation: The future of the Pharmaceutical Industry

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ABSTRACT: Artificial intelligence (AI) is transforming the pharmaceutical sector, promising to speed up drug research, development, and delivery. This overview looks at the history of AI, its key principles, and classification. The study investigates the integration of AI into the pharmaceutical sector, addressing cancer research, pharmacovigilance, and nano-robot enabled drug delivery, are discussed. While AI offers immense potential, the review acknowledges limitation and emphasized the need for continued research and development. By understanding the interplay between AI and pharmaceutical processes, this study provides a roadmap for future innovations, emphasizing the transformative power of AI in revolutionizing healthcare.

KEYWORDS: Artificial intelligence, pharmaceutical industry, drug discovery, drug development, nano-robots, pharmacovigilance

1. INTRODUCTION

Since the 1950s, artificial intelligence has been used in business such as banking and finance. Significant advances have occurred in numerous fields during the last decade, including the pharmaceutical, healthcare, and insurance industries. [1] AI is rapidly advancing in the healthcare sector, with significant implication for clinical decision making, diseases diagnosis, and treatment [2]. Because of its capacity to study massive amounts of data from diverse modalities, AI has the potential to go further in pharmaceutical and healthcare research [3]. Some recent research elaborates on the use of AI in healthcare and other industries. AI technologies in healthcare include machine learning (ML), natural language processing (NLP), physical robots, robotic process automation, and so on [4]. ML uses neural network models and deep learning to detect clinically meaningful aspects in imaging data, particularly for cancer diagnosis [5].

AI, with its capacity to analyze large volume of data, discover patterns, and anticipate outcomes, has the potential to change every aspect of pharmaceutical value chain. Researchers may use AI power tool and algorithms to accelerate drug development, improve clinical trials, and guarantee drug manufacturing is safe and effective. Furthermore, AI can play an important role in personalized medicine by allowing specific treatment strategies for individual patients based on their genetic composition and medical history [6].

This review delves into the multifaceted application of AI within the pharmaceutical industry, exploring its impact on drug discovery, development, manufacturing and patient care. We examine the current state of AI adaptation, highlight key challenges, and discuss the future prospective of this transformative technology.

2. HISTORY

Since its start in the 1950s, artificial intelligence (AI) has grown into fast developing industry. AI, pioneered by researches such as Newell and Simon, has made enormous advances, including the development of Deep Blue and Watson. AI has great potential, as proven by the rising market value of AI and related sectors like natural language processing and big data analytics. The pharmaceutical sector is particularly interested in AI's potential, as seen by collaboration like IBM Watson and Pfizer, which seek to speed drug research and development.

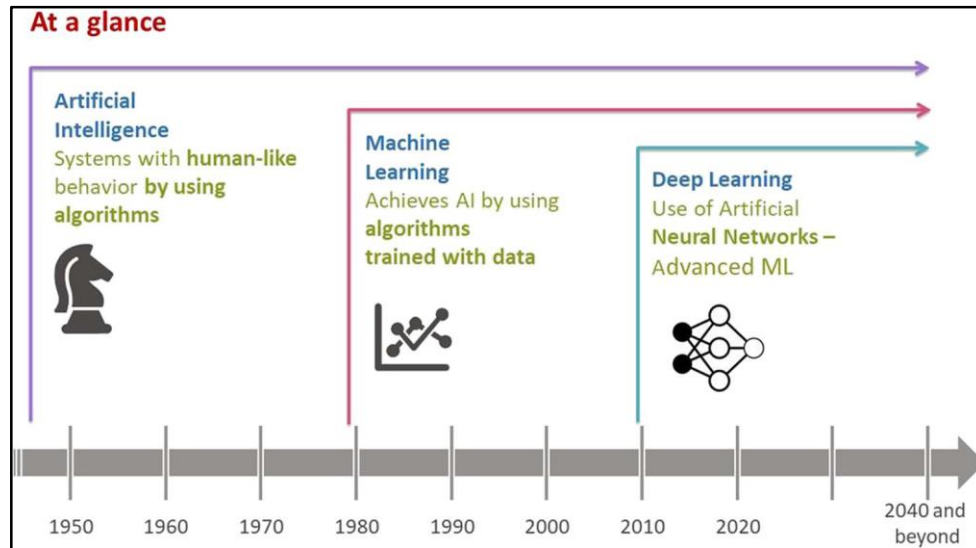


FIGURE 1: CHRONOLOGY OF AI AND ML

The waves of AI

Artificial intelligence (AI) has evolved through several phases, each with its own set of skills and limits.

First wave (1970-1990) centered on “knowledge engineering”, which involved developing rule based system (expert system) to handle specific challenges. Although effective in their field, this system lacked learning and flexibility.

Second wave (around 2000s until present): this period saw the emergence of machine learning, which brought algorithms capable of learning from data. Deep learning techniques, such as CNNs and RNNs, have enabled advancements in image, audio, and language processing. However, these models required a large quantity of data.

Third wave (2020s-2030s): this developing phase focuses on contextual knowledge and explains ability. AI system are getting better at learning from less datasets and delivering information about their decision- making processes.

Fourth wave (from the 2030s onwards): the ultimate aim is Artificial General Intellect (AGI), in which AI outperforms human intellect in all aspects. This might result in Artificial Super Intelligence (ASI) and a possible “Technological Singularity”. [7]

3. AI AND ML: KEY CONCEPTS AND TERMINOLOGY

AI is described as the use of techniques that enable computers to mimic behavior. Machine learning (ML), as area of artificial intelligence, uses statistical approaches and may learn both explicitly and implicitly.

TABLE 1: ARTIFICIAL INTELLIGENCE TECHNOLOGY DEFINITIONS PROVIDED IN THE SURVEY

Technology	Provided Definitions	Examples
Algorithms augmenting human cognitions	A method in which machines identify complex patterns, trends, and relationships Systems or computational models meant to augment human cognitions	Autonomous robots or vehicles Curated advertisements, news, or internet searches Fraud protection Optimized travel predictions
Machine learning	Process that enables machines to provide improving feedback Mimics human judgment The code that enables a machine to both absorb data and compute an answer and to provide output based on predetermined answers Continuous and repetitive learning	Automated regulatory review Support vector machines Neural networks Modeling techniques
Natural language processing	Programs with the ability to extract meaning from text or voice Application of machine learning Restricted by a set of rules	Alexa, Siri, or Cortana Social listening Skype translator Customer reviews
Computer vision	Machines that can process, analyze, and understand images	Image recognition Video tracking Object recognition

Artificial neural networks are employed in deep learning (DL), which is a subset of machine learning that adapts to and learns from massive amounts of experimental data. Human intelligence is defines as the ability of the human brain to monitor, comprehend, and respond to a constantly changing external environment (figure 1, table 1). AI not only seeks to understand how the human brain works, but also to create intelligent systems capable of responding to an ever-changing external works, but also to create intelligent systems capable of responding to an ever changing external world in a safe and effective manner [8,9].

Objectives of AI

The basic objective of developing expert systems is to create intelligent computer systems that can replicate human decision-making. This includes

- Simulating human cognition: creating computer system that can think and reason that can think and reason like humans.
- Automating tasks: Reducing human workload by handling complex problems through automated processes.
- Leveraging interdisciplinary knowledge: Combining expertise from various fields like computer science, psychology, and engineering to develop effective AI systems.

- Developing advanced techniques: Creating algorithms and methods for search, optimization, logic and machine learning to address complex computational challenges [10].

Classification of AI

AI can be categorized based on its capabilities and existence:

- Narrow AI (ANI): Performs specific tasks (facial recognition, chess).
- General AI (AGI): Hypothetical AI with human-level intelligence.
- Super AI (ASI): Hypothetical AI surpassing human intelligence.

AI can also be classified based on its memory and consciousness:

- Type-1 (Reactive Machines): No memory, reacts to present situations (e.g., IBM chess program)
- Type-2 (Limited Memory): Uses past data for decision-making (e.g., self-driving cars)
- Type-3 (Theory of Mind): Hypothetical AI understanding human emotions and intentions.
- Type-4 (Self-Aware): Hypothetical AI with consciousness and self-awareness [11].

4. AI IN PHARMACEUTICAL INDUSTRY

The pharmaceutical sector is undergoing a transformational upheaval, fueled by technology improvements and rising competition. Third-party vendor’s delivery network solutions that use AI and sophisticated analytics to optimize manufacturing processes, lower costs, and increase efficiency. Supply chain management, demand forecasting, quality control, and medication development are all key areas of concentration. Companies like Amgen and Berg are at the forefront of using artificial intelligence to enhance operations, speed drug delivery, and gain competitive advantages. The integration of AI-powered systems, such as manufacturing systems, is critical for assuring compliance, lowering risks, and increasing overall production efficiency. The industry rapidly understands the need to work with technology suppliers to realize AI’s full potential and drive future growth [12].

The pharmaceutical sector is progressively utilizing AI and machine learning technology to improve drug research, development, and manufacturing. Leading pharmaceutical company, like Roche, Pfizer, Merck, and others, is at the forefront of this movement, creating alliances and purchasing AI focused businesses. Some of the commonly used AI models are given in table 2.

TABLE 2: LIST OF COMMONLY USED AI MODELS IN THE PHARMACEUTICAL INDUSTRY

AI/Machine Learning Models	Description/Usage	References
Generative Adversarial Networks (GANs)	GANs are widely used in drug product development to generate novel Chemical structures and optimize their properties. GANs consist of a generator network that creates new molecules and a discriminator network that evaluates their quality, leading to the generation of structurally Diverse and functionally optimized drug candidates.	15
Recurrent Neural Networks (RNNs)	RNNs are commonly employed for sequence-based tasks in drug development, such as predicting protein structures, analyzing genomic Data and designing peptide sequences. They capture sequential	16

	dependencies and can generate new sequences based on learned patterns	
Convolutional Neural Networks (CNNs)	CNNs are effective in image-based tasks, including analyzing molecular Structures and identifying potential drug targets. They can extract relevant features from molecular images and aid in drug design and target identification	17
Long Short-Term Memory Networks (LSTMs)	LSTMs are a type of RNN that excel in modeling and predicting temporal Dependencies. They have been used in pharmacokinetics and pharmacodynamics studies to predict drug concentration-time profiles and Evaluate drug efficacy.	18
Artificial Neural Networks (ANNs)	ANNs have been employed to model and optimize drug release kinetics from different Dosage forms. They can assist in determining optimal formulations and predict the release behavior of active pharmaceutical ingredients (APIs) under various conditions.	19
Computational Fluid Dynamics (CFD)	CFD simulations enable the optimization of fluid flow and mixing within dosage form manufacturing processes, such as granulation, Coating and drying. They help in designing Efficient and uniform processes.	20,21

Notable collaborations include MIT's relationship with Novartis and Pfizer to promote drug design, GSK's partnership with Cloud Pharmaceuticals to speed drug development, and Roche's partnership with Owkin to accelerate drug discovery and clinical trials. The COVID-19 pandemic has hastened AI adoption, as proven by GSK and Vir Biotechnology's partnership to create COVID-19 therapeutics utilizing CRISPER and AI. Furthermore, AI is used in fields other than drug discovery, such as enhancing diagnostic tools. For example, Abbott has developed AI-powdered coronary imaging equipment to improve decision-making during stenting procedures [13].

5. CURRENT PHARMACEUTICAL CHALLENGES AND THE ROLE OF AI

While molecules have advantages such as simple synthesis and stability, their development is frequently hampered by competition from generic and complicated regulatory requirements. Biomolecules such as insulin and Adalimumab have achieved significant success, but transport and stability remain problems. AI has emerged as a viable tool for solving these difficulties, with applications ranging from medication discovery to development and delivery. However, AI models still have limitations, such as possible biases and the requirement for human interpretation of outcomes. Despite these obstacles, ongoing research and development have the potential to improve AI's skills and turn it into a significant asset in the pharmaceutical sector. Machine learning, which includes both supervised and unsupervised learning, is a key approach used in AI for drug development.

6. APPLICATION OF AI

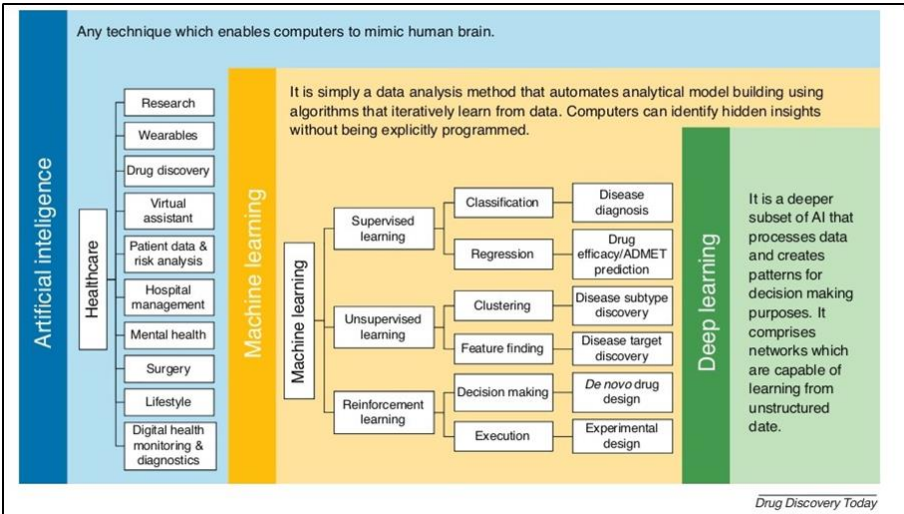


FIGURE 2: THE APPLICATIONS OF ARTIFICIAL INTELLIGENCE (AI) AND ITS SUBFIELDS: MACHINE LEARNING AND DEEP LEARNING, IN HEALTHCARE.

a) Quality-by-design R&D

The pharmaceutical industry has shifted from trial-and-error drug development to a science-based strategy known as Quality by Design (QbD). QbD focuses on developing a define product quality target profile (QTPP), which specifies the intended attributes of the final product. This profile relates to the product’s intended therapeutic impact. By defining key quality attributes (CQAs) and their related critical process and material attributes (CPAs and CMAs), manufacturers can design and regulate the drug’s manufacturing process to reliably achieve product quality. (22, 23, 24)

b) Drug Discovery

The production of a large number of therapeutic molecules from a chemical space becomes time-consuming owing to a lack of relevant technologies, which may be improved by incorporating artificial intelligence into the drug development process [9, 25]. Drug design algorithms consider the physical, chemical, and toxicological characteristics when choosing a lead molecule to bind to and create activity [26]. Different physicochemical qualities can improve efficacy and biological activity [27]. QSAR is designed for the possible use of drug candidates using AI-based QSAR techniques [28-30]. If typical methods for determining statistical difference are used, the biological activity detected and created may take a decade to regulate [31]. When creating a novel medication, target receptor binding is influenced by its solubility, partition coefficient, degree of ionization, and inherent permeability [32]. To predict binding qualities, algorithms use molecular descriptors like the Simplified Molecular Input Line Entry System (SMILE) [33]. The six physicochemical characteristics are often determined using a Quantitative Structure-Property Relationship (QSPR), also known as the Estimation program interface suite [34]. Deep learning and neural networks using the ADMET predictor and ALGOPS Software have been used to predict the lipophilicity and solubility of different substances [35]. Many undirected groups are used to predict solubility [36].

TABLE 3: LIST OF AI-BASED COMPUTER ASSISTED TOOLS USED IN DRUG DISCOVERY

AI-based computer-assisted tools used in drug discovery	Websites	Descriptions
DeepChem	https://github.com/deepchem/deepchem	A python-based AI tool for drug discovery predictions

ORGANIC	https://github.com/aspuru-guzik-group/ORGANIC	Molecular generation tool to create molecules with desired characteristics
DeepNeuralNet-QSAR	https://github.com/Merck/DeepNeuralNet-QSAR	Predictions of molecular activity
DeepTox	www.bioinf.jku.at/research/DeepTox	Prediction of toxicity and biocompatibility
Neural Graph Fingerprints	https://github.com/HIPS/neural-fingerprint	Property prediction of novel molecules
AlphaFold	https://deepmind.com/blog/alphafold	Prediction of protein 3D structure prediction
PotentialNet	https://pubs.acs.org/doi/full/10.1021/acscentsci.8b00507	Ligand-binding affinity prediction based on a graph convolutional neural network

To anticipate a new chemical entity, several factors are taken into account, including surface area, mass, hydrogen count, refractivity, volume, log P, sum of indices, solubility index, and rotatable bonds [37]. Table 3 contains a full list of AI-powered computer technologies used in the drug development process.

c) **Cancer treatment**

Artificial intelligence (AI), particularly deep learning and machine learning, has shown potential for improving lung cancer detection, diagnosis, and therapy. AI-powered technologies can analyze medical pictures, detect cancers, evaluate tumor features, and forecast treatment outcomes. For example, AI can analyze low-dose CT images to detect lung nodules and distinguish between benign and malignant cancers. AI is also being utilized in breast cancer to analyze MRI data, locate lesions, and predict therapy outcomes. However, the development of AI tools for lung and breast cancer is still in its early stages, with constraints such as the requirement for vast, high-quality datasets and the complexity of the algorithms involved. Despite these challenges, the potential of AI in cancer care are significant, including improved diagnostic accuracy, early detection, and personalized treatment [38].

d) **AI in Pharmacovigilance**

Pharmacovigilance (PV) is defined by the World Health Organization as “the science and activities relating to the detection, assessment, understanding, and prevention of adverse effects or any other drug-related problem”. Following the introduction of the new medicine into the market, drug safety (DS) has become a key concern. The primary source of loss during a clinical trial or post marketing surveillance (PMS) is unanticipated toxicities that cause morbidity and death at the regular dose of the medicine. According to data from 2008 to 2017, the food and drug administration (FDA) authorized 321 new drugs. AI the same period, the FDA’s adverse event (AE) reporting system reported more than 10 million AE reports, with 5.8 million classified as severe and 1.1 million as death reports.

Adverse drug reaction (ADR) data must be gathered by the license holder from the pharmaceutical industry and reported to the local drug regulatory body. The most important role in PV is to detect and record ADRs, code AE in technical terms, prepare individual case safety reports (ICSR), assess severity, and determine the association with suspected drugs. Human meddling is time-consuming. As a result, new technology is required for detecting and analyzing ADRs. AI is useful in PV for extracting reliable safety information. AI solutions can automate or facilitate practically every part of PV, including case processing and risk tracking, reducing overall processing time and costs. There are some different databases tools, such as VigiFlow, VigiBase, VigiAccess, and VigiLyze. Also, some methods tools i.e. VigiGrade, VigiMatch, and VigiRank for case report analysis [39].

e) **AI-drug delivery with tiny nanorobots**

In recent years, nano-robots with built-in sensors have created to aid with drug or genetically regulated distribution. Because of their connection with the power sensor, these nano-robots may only be able to work at the cellular level, eliminating the potential adverse effects of topical pharmaceutical delivery systems.

TABLE 4: LIST OF AI USED IN DRUG DELIVERY SYSTEM

Drug delivery systems	AI approaches used	References
Floating tablets of rosiglitazone maleate	ANNs	41
Nifedipine osmotic release tablets	Mechanistic gastrointestinal simulation and ANN	42
Gelatin nanoparticles of diclofenac sodium	Central composite design and ANNs	43
Hydroxyapatite (HAp)-ciprofloxacin bone-implants	Quality by Design (QbD) and 2^3 factorial design	44
Alginate-PVP K 30 microbeads of diclofenac sodium	Central composite design and RSM	45
Timolol-loaded ultradeformable nanoliposome formulations	ANN and multiple linear regression (MLR) analysis	46
Transfersomal gel for transdermal insulin delivery	2^3 factorial design and RSM	47
Besifloxacin HCl loaded liposomal gel	3^2 full factorial design and RSM	48
Transfersomal gel for transdermal delivery of risperidone	Central composite design and RSM	49
Multiple-unit pellet system of prednisone	Box–Behnken design, RSM and ANN	50
pH-dependent mesalamine matrix tablets	ANN, multi-layer perception (MLP) algorithm and RMSE	51
Voriconazole loaded nanostructured lipid carriers based topical delivery system	Box–Behnken design and QbD	52
Novel granulated pellet-containing tablets and traditional pellet-containing tablets	ANNs	53
Oral disintegrating tablets	ANN and DNN	54

These bio-nano-robots are programmed with a variety of rules for body movement, navigation, collision avoidance, target identification, search and installation, and flashing mode activation. Nano robots include micro-robotes that function wirelessly and penetrate deep into the body, as well as magnetic nano-robots driven by electricity or a battery. Advances in medicine administration have led to the development of electric and DNA nano-robots that can employ magnetic nanoparticles to improve drug delivery. Some of the AI used in drug delivery system is given in table 4.

7. FUTURE PERSPECTIVE

The pharmaceutical sector is rapidly realizing artificial intelligence's (AI) potential to transform medication research, development, and production. Companies may use AI to improve product quality, boost yield, and cut expense. Despite hurdles such as data quality and algorithm limits, the industry is investment heavily in AI research and development. Major pharmaceutical corporations are driving AI adoption, forging collaborations and purchasing AI- focused businesses to obtain a competitive advantage. The future of the pharmaceutical business is dependent on the proper integration of AI to speed drug discovery, improve outcomes, and eventually, improve global healthcare [40].

8. CONCLUSION

The integration of artificial intelligence (AI) into the pharmaceutical industry marks a pivotal shift from traditional, labor-intensive methodologies to data-driven, efficient approaches. From its inception as a conceptual framework to its current embodiment in sophisticated algorithms and systems, AI has evolved rapidly. Its application spans from drug discovery and development to clinical trials. Manufacturing, and patient care, demonstrating its potential to revolutionize the entire pharmaceutical value chain.

By analyzing vast datasets, AI algorithms can accelerate drug discovery, optimize clinical trials, and enhance drug delivery and development to clinical trials, and enhance drug delivery systems. The ability to predict drug efficacy, identify potential adverse effects, and personalize treatment plans holds immense promise for improving patient outcomes. Moreover, AI-driven automation can streamline operations, reduce costs, and ensure product quality and safety. However, realizing the full potential of AI requires addressing challenges such as data quality, algorithm bias, and regulatory hurdles. Continued research and development are essential to overcome these limitations and unlock the true power of AI the pharmaceutical industry.

As AI continues to evolve, a collaborative approach involving pharmaceutical companies, academia, and regulatory bodies will be crucial for maximizing its impact on human health. The future of the pharmaceutical industry is inextricably linked to the advancement of AI, and the journey towards this AI-driven transformation is poised to yield groundbreaking discoveries and improve patient outcomes.

Reference

1. Cabitza, F.; Rasoini, R.; Gensini, G. F. Unintended Consequences of Machine Learning in Medicine. *JAMA* 2017, 318 (6), 517. <https://doi.org/10.1001/jama.2017.7797>.
2. Sunarti, S.; Fadzulul Rahman, F.; Naufal, M.; Risky, M.; Febriyanto, K.; Masnina, R. Artificial Intelligence in Healthcare: Opportunities and Risk for Future. *Gaceta Sanitaria* 2021, 35 (1), S67–S70. <https://doi.org/10.1016/j.gaceta.2020.12.019>.
3. Toepper, M. Dissociating Normal Aging from Alzheimer's Disease: A View from Cognitive Neuroscience. *Journal of Alzheimer's Disease* 2017, 57 (2), 331–352. <https://doi.org/10.3233/jad-161099>.
4. Davenport, T.; Kalakota, R. The Potential for Artificial Intelligence in Healthcare. *Future Healthcare Journal* 2019, 6 (2), 94–98. <https://doi.org/10.7861/futurehosp.6-2-94>.
5. Fakoor, R.; Nazi, A.; Huber, M. Using Deep Learning to Enhance Cancer Diagnosis and Classification Using Deep Learning to Enhance Cancer Diagnosis and Classification; 2013. <https://www.cs.columbia.edu/~faisal/publications/whealth.pdf>.
6. Vial, A.; Stirling, D.; Field, M.; Ros, M.; Ritz, C.; Carolan, M.; Holloway, L.; Miller, A. A. The Role of Deep Learning and Radiomic Feature Extraction in Cancer-Specific Predictive Modelling: A Review. *Translational Cancer Research* 2018, 7 (3), 803–816. <https://doi.org/10.21037/tcr.2018.05.02>.
7. Kolluri, S.; Lin, J.; Liu, R.; Zhang, Y.; Zhang, W. Machine Learning and Artificial Intelligence in Pharmaceutical Research and Development: A Review. *The AAPS Journal* 2022, 24 (1). <https://doi.org/10.1208/s12248-021-00644-3>.
8. Makne, P.; Sontakke, S.; Lakade, R.; Tompe, A.; Patil, S. ARTIFICIAL INTELLIGENCE: A REVIEW. *World Journal of Pharmaceutical Research* www.wjpr.net | 12. <https://doi.org/10.20959/wjpr20231-26543>.
9. Mak, K.-K.; Pichika, M. R. Artificial Intelligence in Drug Development: Present Status and Future Prospects. *Drug Discovery Today* 2019, 24 (3), 773–780. <https://doi.org/10.1016/j.drudis.2018.11.014>.

10. Dr. Ansari Yaasir, A. A. R. Exploring and Advancing Healthcare System through Novel Strategies in Pharmacy Field. *International Journal of pharma and Bio Sciences* 2020, 10 (3). <https://doi.org/10.22376/ijpbs/ijlpr/sp12/july/2020.1-70>.
11. Das, S.; Dey, R.; Nayak, A. K. Artificial Intelligence in Pharmacy. *Indian Journal of Pharmaceutical Education and Research* 2021, 55 (2), 304–318. <https://doi.org/10.5530/ijper.55.2.68>.
12. ROLE of ARTIFICIAL INTELLIGENCE in PHARMA SCIENCE. *Journal of critical reviews* 2020, 7 (01). <https://doi.org/10.31838/jcr.07.01.54>
13. Arinez, J. F.; Chang, Q.; Gao, R. X.; Xu, C.; Zhang, J. Artificial Intelligence in Advanced Manufacturing: Current Status and Future Outlook. *Journal of Manufacturing Science and Engineering* 2020, 142 (11). <https://doi.org/10.1115/1.4047855>.
14. Vora, L. K.; Gholap, A. D.; Jetha, K.; Thakur, R. R. S.; Solanki, H. K.; Chavda, V. P. Artificial Intelligence in Pharmaceutical Technology and Drug Delivery Design. *Pharmaceutics* 2023, 15 (7), 1916–1916. <https://doi.org/10.3390/pharmaceutics15071916>.
15. Sousa, T.; Correia, J.; Pereira, V.; Rocha, M. Generative Deep Learning for Targeted Compound Design. *Journal of Chemical Information and Modeling* 2021, 61 (11), 5343–5361. <https://doi.org/10.1021/acs.jcim.0c01496>.
16. Rajalingham, R.; Piccato, A.; Jazayeri, M. Recurrent Neural Networks with Explicit Representation of Dynamic Latent Variables Can Mimic Behavioral Patterns in a Physical Inference Task. *Nature Communications* 2022, 13 (1). <https://doi.org/10.1038/s41467-022-33581-6>.
17. Nag, S.; Baidya, A. T. K.; Mandal, A.; Mathew, A. T.; Das, B.; Devi, B.; Kumar, R. Deep Learning Tools for Advancing Drug Discovery and Development. *3 Biotech* 2022, 12 (5). <https://doi.org/10.1007/s13205-022-03165-8>.
18. Liu, X.; Liu, C.; Huang, R.; Zhu, H.; Liu, Q.; Mitra, S.; Wang, Y. Long Short-Term Memory Recurrent Neural Network for Pharmacokinetic-Pharmacodynamic Modeling. *Int. Journal of Clinical Pharmacology and Therapeutics* 2021, 59 (02), 138–146. <https://doi.org/10.5414/cp203800>.
19. Sun, Y.; Peng, Y.; Chen, Y.; Shukla, A. J. Application of Artificial Neural Networks in the Design of Controlled Release Drug Delivery Systems. *Advanced Drug Delivery Reviews* 2003, 55 (9), 1201–1215. [https://doi.org/10.1016/s0169-409x\(03\)00119-4](https://doi.org/10.1016/s0169-409x(03)00119-4).
20. Böhlring, P.; Khinast, J. G.; Jajcevic, D.; Davies, C.; Carmody, A.; Doshi, P.; Am Ende, M. T.; Sarkar, A. Computational Fluid Dynamics-Discrete Element Method Modeling of an Industrial-Scale Wurster Coater. *Journal of Pharmaceutical Sciences* 2019, 108 (1), 538–550. <https://doi.org/10.1016/j.xphs.2018.10.016>.
21. Song, Y.; Zhou, T.; Bai, R.; Zhang, M.; Yang, H. Review of CFD-DEM Modeling of Wet Fluidized Bed Granulation and Coating Processes. *Processes* 2023, 11 (2), 382. <https://doi.org/10.3390/pr11020382>.
22. Troiano, G.; Nolan, J.; Parsons, D. O.; Van, C.; Zale, S. E. A Quality by Design Approach to Developing and Manufacturing Polymeric Nanoparticle Drug Products. 2016, 18 (6), 1354–1365. <https://doi.org/10.1208/s12248-016-9969-z>.
23. Rathore, A. S.; Winkle, H. Quality by Design for Biopharmaceuticals. *Nature Biotechnology* 2009, 27 (1), 26–34. <https://doi.org/10.1038/nbt0109-26>.
24. Yu, L. X. Pharmaceutical Quality by Design: Product and Process Development, Understanding, and Control. *Pharmaceutical Research* 2008, 25 (4), 781–791. <https://doi.org/10.1007/s11095-007-9511-1>.
25. Mishra, D. V. Artificial Intelligence: The Beginning of a New Era in Pharmacy Profession. *Asian Journal of Pharmaceutics (AJP): Free full text articles from Asian J Pharm* 2018, 12 (02). <https://doi.org/10.22377/ajp.v12i02.2317>
26. Chan, H. C. S.; Shan, H.; Dahoun, T.; Vogel, H.; Yuan, S. Advancing Drug Discovery via Artificial Intelligence. *Trends in Pharmacological Sciences* 2019, 40 (8), 592–604. <https://doi.org/10.1016/j.tips.2019.06.004>.
27. Firth, N. C.; Butrus Atrash; Brown, N.; Blagg, J. MOARF, an Integrated Workflow for Multiobjective Optimization: Implementation, Synthesis, and Biological Evaluation. *Journal of Chemical Information and Modeling* 2015, 55 (6), 1169–1180. <https://doi.org/10.1021/acs.jcim.5b00073>.
28. Zhang, L.; Tan, J.; Han, D.; Zhu, H. From Machine Learning to Deep Learning: Progress in Machine Intelligence for Rational Drug Discovery. *Drug Discovery Today* 2017, 22 (11), 1680–1685. <https://doi.org/10.1016/j.drudis.2017.08.010>.
29. Jain (Pancholi), N.; Gupta, S.; Sapre, N.; Sapre, N. S. In Silico de Novo Design of Novel NNRTIs: A Bio-Molecular Modelling Approach. *RSC Advances* 2015, 5 (19), 14814–14827. <https://doi.org/10.1039/C4RA15478A>.
30. Wang, Y.; Guo, Y.; Kuang, Q.; Pu, X.; Ji, Y.; Zhang, Z.; Li, M. A Comparative Study of Family-Specific Protein–Ligand Complex Affinity Prediction Based on Random Forest Approach. *Journal of Computer-Aided Molecular Design* 2014, 29 (4), 349–360. <https://doi.org/10.1007/s10822-014-9827-y>.
31. KING, R. D.; HIRST, J. D.; STERNBERG, M. J. E. COMPARISON of ARTIFICIAL INTELLIGENCE METHODS for MODELING PHARMACEUTICAL QSARS. *Applied Artificial Intelligence* 1995, 9 (2), 213–233. <https://doi.org/10.1080/08839519508945474>.

32. Zang, Q.; Mansouri, K.; Williams, A. J.; Judson, R. S.; Allen, D. T.; Casey, W.; Kleinstreuer, N. In Silico Prediction of Physicochemical Properties of Environmental Chemicals Using Molecular Fingerprints and Machine Learning. 2017, 57 (1), 36–49. <https://doi.org/10.1021/acs.jcim.6b00625>.
33. Hessler, G.; Baringhaus, K.-H. Artificial Intelligence in Drug Design. *Molecules* 2018, 23 (10), 2520. <https://doi.org/10.3390/molecules23102520>.
34. Yang, X.; Wang, Y.; Byrne, R.; Schneider, G.; Yang, S. Concepts of Artificial Intelligence for Computer-Assisted Drug Discovery. *Chemical Reviews* 2019, 119 (18), 10520–10594. <https://doi.org/10.1021/acs.chemrev.8b00728>.
35. Lusci, A.; Pollastri, G.; Baldi, P. Deep Architectures and Deep Learning in Chemoinformatics: The Prediction of Aqueous Solubility for Drug-like Molecules. *Journal of Chemical Information and Modeling* 2013, 53 (7), 1563–1575. <https://doi.org/10.1021/ci400187y>.
36. Kumar, R.; Sharma, A.; Siddiqui, M. H.; Tiwari, R. K. Prediction of Human Intestinal Absorption of Compounds Using Artificial Intelligence Techniques. *Current Drug Discovery Technologies* 2017, 14 (4). <https://doi.org/10.2174/1570163814666170404160911>.
37. Chai, S.; Liu, Q.; Liang, X.; Guo, Y.; Zhang, S.; Chen, X.; Du, J.; Yuan, Z.; Zhang, L.; Gani, R. A Grand Product Design Model for Crystallization Solvent Design. *Computers & Chemical Engineering* 2020, 135, 106764–106764. <https://doi.org/10.1016/j.compchemeng.2020.106764>.
38. Bhattamisra, S. K.; Banerjee, P.; Gupta, P.; Mayuren, J.; Patra, S.; Candasamy, M. Artificial Intelligence in Pharmaceutical and Healthcare Research. *Big Data and Cognitive Computing* 2023, 7 (1), 10. <https://doi.org/10.3390/bdcc7010010>.
39. Shinde, A.; Pawar, D.; Sonawane, K. Automation in Pharmaceutical Sector by Implementation of Artificial Intelligence Platform: A Way Forward. *International Journal of Basic & Clinical Pharmacology* 2021, 10 (7), 863. <https://doi.org/10.18203/2319-2003.ijbcp20212387>.
40. Lodhi, D. S.; Verma, M.; Golani, P.; Pawar, A. S.; Nagdev, S. Impact Artificial Intelligence in the Pharmaceutical Industry on Working Culture: A Review. *International Journal of Pharmaceutical Sciences and Nanotechnology* 2022, 15 (1), 5771–5780. <https://doi.org/10.37285/ijpsn.2022.15.1.5>.
41. Güler, G. K.; Eroğlu, H.; Öner, L. Development and Formulation of Floating Tablet Formulation Containing Rosiglitazone Maleate Using Artificial Neural Network. *Journal of Drug Delivery Science and Technology* 2017, 39, 385–397. <https://doi.org/10.1016/j.jddst.2017.04.029>.
42. Ilić, M.; Đuriš, J.; Kovačević, I.; Ibrić, S.; Parojčić, J. In Vitro – in Silico – in Vivo Drug Absorption Model Development Based on Mechanistic Gastrointestinal Simulation and Artificial Neural Networks: Nifedipine Osmotic Release Tablets Case Study. *European Journal of Pharmaceutical Sciences* 2014, 62, 212–218. <https://doi.org/10.1016/j.ejps.2014.05.030>.
43. Koletti, A. E.; Efstathia Tsarouchi; Afroditi Kapourani; Kontogiannopoulos, K. N.; Assimopoulou, A. N.; Panagiotis Barmapalexis. Gelatin Nanoparticles for NSAID Systemic Administration: Quality by Design and Artificial Neural Networks Implementation. *International Journal of Pharmaceutics* 2020, 578, 119118–119118. <https://doi.org/10.1016/j.ijpharm.2020.119118>.
44. Nayak, A.; Laha, B.; Sen, K. Development of Hydroxyapatite-Ciprofloxacin Bone-Implants Using «Quality by Design». *Acta Pharmaceutica* 2011, 61 (1), 25–36. <https://doi.org/10.2478/v10007-011-0002-x>.
45. Nayak. Development of Diclofenac Sodium-Loaded Alginate-PVP K 30 Microbeads Using Central Composite Design. *Daru : journal of Faculty of Pharmacy, Tehran University of Medical Sciences* 2023, 19 (5).
46. León Blanco, J. M.; González-R, P. L.; Arroyo García, C. M.; Cózar-Bernal, M. J.; Calle Suárez, M.; Canca Ortiz, D.; Rabasco Álvarez, A. M.; González Rodríguez, M. L. Artificial Neural Networks as Alternative Tool for Minimizing Error Predictions in Manufacturing Ultradeformable Nanoliposome Formulations. *Drug Development and Industrial Pharmacy* 2017, 44 (1), 135–143. <https://doi.org/10.1080/03639045.2017.1386201>.
47. Malakar, J.; Sen, S. O.; Nayak, A. K.; Sen, K. K. Formulation, Optimization and Evaluation of Transfersomal Gel for Transdermal Insulin Delivery. *Saudi Pharmaceutical Journal* 2012, 20 (4), 355–363. <https://doi.org/10.1016/j.jsps.2012.02.001>.
48. Bhattacharjee, A.; Das, P. J.; Dey, S.; Nayak, A. K.; Roy, P. Kr.; Chakrabarti, S.; Marbaniang, D.; Das, S. K.; Ray, S.; Chattopadhyay, P.; Mazumder, B. Development and Optimization of Besifloxacin Hydrochloride Loaded Liposomal Gel Prepared by Thin Film Hydration Method Using 32 Full Factorial Design. *Colloids and Surfaces A: Physicochemical and Engineering Aspects* 2020, 585, 124071. <https://doi.org/10.1016/j.colsurfa.2019.124071>.
49. Das, B.; Sen, S. O.; Maji, R.; Nayak, A. K.; Sen, K. K. Transfersomal Gel for Transdermal Delivery of Risperidone: Formulation Optimization and Ex Vivo Permeation. *Journal of Drug Delivery Science and Technology* 2017, 38, 59–71. <https://doi.org/10.1016/j.jddst.2017.01.006>.
50. Manda, A.; Walker, R.; Khamanga, S. An Artificial Neural Network Approach to Predict the Effects of Formulation and Process Variables on Prednisone Release from a Multipartite System. *Pharmaceutics* 2019, 11 (3), 109. <https://doi.org/10.3390/pharmaceutics11030109>.

51. Khan, A. M.; Hanif, M.; Bukhari, N. I.; Shamim, R.; Rasool, F.; Rasul, S.; Shafique, S. Artificial Neural Network (ANN) Approach to Predict an Optimized PH-Dependent Mesalamine Matrix Tablet. *Drug Design, Development and Therapy* 2020, Volume 14, 2435–2448. <https://doi.org/10.2147/dddt.s244016>.
52. Waghule, T.; Rapalli, V. K.; Singhvi, G.; Manchanda, P.; Hans, N.; Dubey, S. K.; Hasnain, M. S.; Nayak, A. K. Voriconazole Loaded Nanostructured Lipid Carriers Based Topical Delivery System: QbD Based Designing, Characterization, In-Vitro and Ex-Vivo Evaluation. *Journal of Drug Delivery Science and Technology* 2019, 52, 303–315. <https://doi.org/10.1016/j.jddst.2019.04.026>.
53. Huang, Y.; Yao, Q.; Zhu, C.; Zhang, X.; Qin, L.; Wang, Q.; Pan, X.; Wu, C. Comparison of Novel Granulated Pellet-Containing Tablets and Traditional Pellet-Containing Tablets by Artificial Neural Networks. *Pharmaceutical Development and Technology* 2014, 20 (6), 670–675. <https://doi.org/10.3109/10837450.2014.910809>.
54. Han, R.; Yang, Y.; Li, X.; Ouyang, D. Predicting Oral Disintegrating Tablet Formulations by Neural Network Techniques. *Asian Journal of Pharmaceutical Sciences* 2018, 13 (4), 336–342. <https://doi.org/10.1016/j.ajps.2018.01.003>.

