

AI Infused Smart Health Care Revolution with 5G Connectivity

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Abstract

The demand for AI-driven intelligent healthcare systems has increased due to the rising need for prompt and effective healthcare solutions, particularly since 5G connection makes it possible to gather and process data from medical devices in real time. Accurate and timely identification of serious illnesses including heart disease, renal failure, liver problems, malaria, and pneumonia is frequently a challenge for traditional healthcare. In order to solve this, our project suggests an AI-powered healthcare system that uses 5G capable devices to gather data in realtime. It uses sophisticated machine learning and deep neural networks to identify a variety of illnesses and offer preventative measures and treatments. In addition to CNN algorithms for malaria with 96.01% efficiency including pneumonia with 98.16% accuracy, the system uses Random Forest Classifier for cardiovascular disease with a precision of 99%, renal disease with 98.3% reliability, and liver cancer with 98.64% efficiency utilizing SMOTE for class imbalance. A Flask-based user interface (UI) enables immediate monitoring and interaction, while preprocessing methods like exploratory data analysis (EDA) guarantee data quality, providing a thorough and adaptable healthcare solution.

Keywords: AI-driven healthcare, Data Augmentation, Deep Learning, Disease Detection, Exploratory Data Analysis, Machine Learning, Random Forest Classifier and SMOTE.

1. Introduction

Begin silently and come to a head due to critical complications and delayed management, and escalating fatalities [1], emerged as the biggest threats that faced healthcare for the past years. Approximately 850 million people around the world have kidney disease of one form or another and, if not diagnosed early, could prove fatal. Hepatitis and cirrhosis are two of the top 10 leading causes of death due to liver diseases and add significantly to healthcare costs. Malaria, a disease that can be averted and cured nevertheless takes the lives of approximately 400,000 individuals yearly, the majority of them being children from sub-Saharan Africa. Pneumonia remains the leading cause of over 2.5 million fatalities annually, with the old and young children being the most negatively affected. The gradual acceptance of the contemporary diagnostic methods only escalates all these issues, thus the keenness for its quick detection as a perfect treatment. The healthcare system in India faces major difficulties. Cardiovascular diseases [6] are

responsible for 28 percent of total mortality in the country. The IPR states that over 10 percent of the population has kidney diseases, mostly CKD, which is asymptomatic and hence detected late because of limited access to healthcare. Liver diseases also rank high and account for a big share of the total disease burden. More than 200,000 cases of malaria are reported annually from some pockets of the country where the disease is still endemic. [1-5]

2. Literature Survey

The rise of machine learning and artificial intelligence has been exhaustively researched lately, intended for application in the field of healthcare, particularly the diagnosis of diseases. In the early stages of this research, learning was focused on disease classification using medical datasets and traditional machine learning models such as logistic regression, decision trees, and support vector machines [7]. These models achieved a fair degree of effectiveness in diagnosing diseases like issues concerning kidneys, liver, and the heart. A major

challenge for them was the usage of structured data because it limited their applicability to handle ever more complex and unstructured medical data, such as health time series and images. 8. Industry 4.0 has raised and proposed systems for the implemented 5G wireless communication networks which are the New Radio Access Network (NR), and were developed to fulfill the increased user capacity, networking speed, cost-effective and resource consumption needs.

3. Data Collection & Preprocessing

The Data Collection Process, which performed data collection from various devices enabled with 5G and freely available medical repositories, was used to implement an AI-based healthcare system Data Sources used were typically the unstructured medical images (x-rays, CT scans, and microscopic images) and structured data, which included everything from patient medical records to health indicators Real-Time Data would play an important role in the pace of processing and immediacy of reaction towards such data 5G enabled us to bring diverse Data Categories comprising demographic information, medical histories, test results, and imaging data to guarantee an immensely strong and diversified dataset A Multi-Disease Detection System needs a holistic approach since different forms of input data belong to every disease Preprocessing, after the data had been collected Publicly available medical repositories to guarantee data quality. For example, from EDA, it comes out very clearly that there are dependencies between the risk factors: age, and blood pressure and cholesterol levels when one considers cardiac disease. (Figure 1) [16-20]



Figure 1 Correlation Matrix for Heart Disease

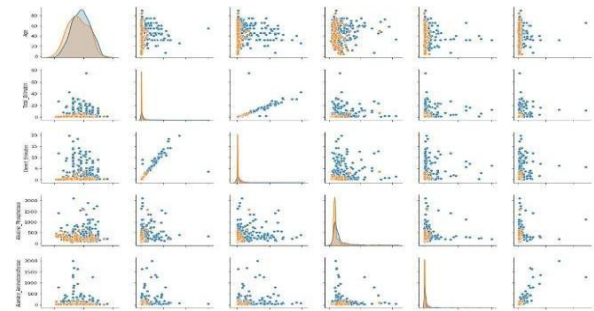


Figure 2 Pair Plot of Data in Liver

Disease Patterns found from diagnostic service result distributions of liver and renal conditions were also later noted and used in the "modeling exercise.

4. Principles and Methods

Methodology of this project implicitly states that data collection, preprocessing, model training, and deployment take several steps- all driven towards the development of an AI-powered smart healthcare system. Our technique, thus, would begin with data gathering. Different kinds of health-related information shall be sourced from publicly accessible healthcare databases and 5G devices. The data can be customer demographics, medical histories, test results, and even medical photographs, which are examples of unstructured data. The real-time features of the 5G technology shall ease the process of data collection and its transfer to the platform; thus, the system will be able to have access to the latest information and be responsive in times of medical emergencies. The data will need further cleaning and manipulation to ensure its quality and fitness for the proper training of the deep learning and machine learning models. Data imputation is done to deal with the issue of missing numbers or therefore outliers and discrepancies. SMOTE is used to deal with the disparity in representation by creating samples made up for underrepresented classes. Numerical features are normalized or standardized to ensure that all the data is at the same scale. Encoding methods transform categorical data into a format that can be understood by machine learning algorithms. This complete preprocessing step is very important to best improve the performance of the models and lower the risk of any kind of training error. The next step for the system is model building and evaluation— selecting appropriate algorithms for deep as well as machine

learning based on the data and disease to be detected. The preprocessed dataset is used for model training from the selected models, with emphasis laid on hyperparameter optimization for maximum performance. At this stage, things like cross-validation will be used to ensure that the models will perform well with new data. Various performance-related model evaluation measures such as accuracy, precision, recall, and F1-score are developed. After completion of training and validation, the models are implemented within an intuitive interface built using Flask, such that the health practitioner can derive real-time diagnoses as well as recommendations immediately there is incoming patient-related information. learn complex patterns and features, making them effective tools for evaluating structured data, such as photographs. Effective feature extraction is made possible by their hierarchical technique, which also helps the model generalize [25] well across a variety of tasks. This is especially useful in industries like healthcare, where precise picture analysis is essential for illness diagnosis and treatment. Practitioners may create complex models that can identify diseases in real time and enhance patient outcomes in medical settings by utilizing CNNs' special qualities. (Figure 3) [21-26]

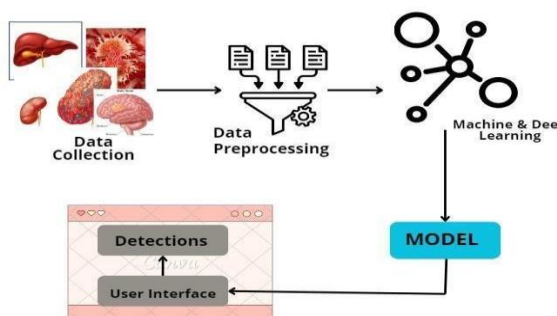


Figure 3 Project Architecture

5. Results

These results prove the high diagnosis potential of the AI-driven smart healthcare system for multiple diseases, including pneumonia, malaria, liver injury, kidney impairment, and heart illness. This study diagnosed each disease using a customized approach that employed state-of-the-art machine learning and deep neural networks techniques. In the results, the

system has the competency of working with 5G data available on-the-fly, therefore, can be very beneficial for practitioners seeking enhancements to not only improved patient care but also diagnosis. The Random Forest algorithm came up with very good results in the diagnosis of heart disease, which demonstrates a degree of success in correctly categorizing patients based on various health parameters. Even in the presence of so many factors such as age, blood pressure, and cholesterol levels, which may affect the outcome of heart disease due to the complexity of the issue, one can easily judge about the model's performance. Not only as a reflection of the effectiveness of the model but also how much overwhelmingly important it is to pull out features and include relevant health metrics in the training process. The Random Forest algorithm proved strong performance once again, thereby indicating the effectiveness of technology used for diagnosing renal diseases. The model was very accurate; equal correction for class imbalance could be more evidence for SMOTE, which would have high confidence in finding health problems related to kidneys. (Figure 5) [6-10]

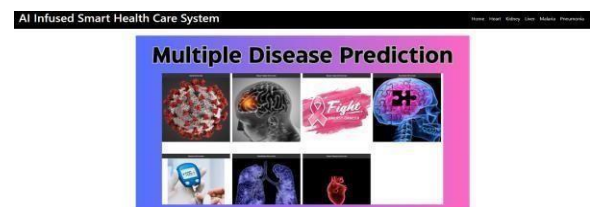


Figure 5 Home Page

The result is crucial for the initiation of treatment in the proper condition with no further complications that lead to better results for the patient. Similar methods were applied in the liver disease findings, emphasizing data preparation and model training techniques geared specifically to the characteristics of the liver disease data collection. Extremely successful in this implementation is SMOTE, which allowed the Random Forest system to achieve a very good accuracy rate. These results highlight the significance of tailoring approaches to the specific problems of different diseases so that algorithms can provide accurate and useful information for the

medical professional.

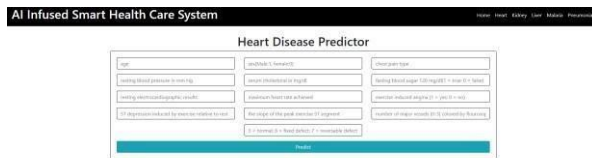


Figure 6 Heary Disease Prediction Page

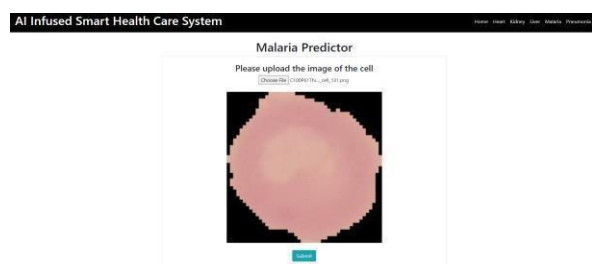


Figure 7 Malaria Prediction Page

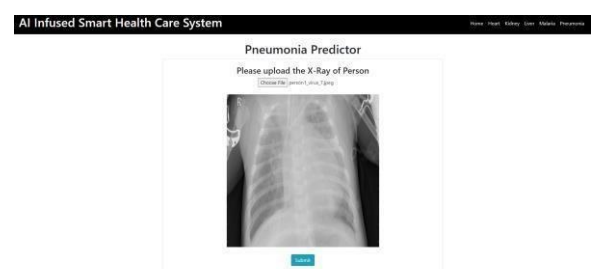


Figure 8 Pneumonia Prediction Page

Using data augmentation strategies to improve model performance and generalization, the CNN model used for malaria diagnosis demonstrated encouraging results. Because CNNs can automatically learn pertinent characteristics from photos of blood samples infected with malaria, their ability to handle image data efficiently provided a major benefit in this situation. The model's capacity to distinguish between healthy and infection-ridden specimens is demonstrated by the accuracy attained, which is essential for quick treatment and diagnosis in endemic areas. Lastly, a CNN model was used to diagnose pneumonia, and the findings showed a similarly high level of accuracy. This demonstrates how well deep learning methods perform when handling jobs involving the categorization of medical

images. Accurately identifying pneumonia from X-ray pictures is essential for enhancing patient care and clinical judgment. In addition to offering helpful diagnostic assistance, the CNN model's effective integration into the system highlights the possibility of incorporating cutting-edge AI technology into routine medical procedures, which might eventually improve patient treatment and medical outcomes. Overall, the findings show that the AI-powered intelligent hospital system is an encouraging advancement in the area that might transform the way diseases are detected and treated in real-time medical settings. [11-15]

Conclusion

This paper effectively demonstrates how a 5G-enabled AIbased intelligent health system will manage and diagnose diseases at the very instant. The system will identify critical diseases, such as coronary heart disease, kidney failure, liver disease, malaria, and pneumonia since it integrates state-of-the-art machine learning and deep learning techniques such as Random Forest and Convolutional Neural Network with strikingly high levels of accuracy across all models Disparities regarding classes and features selection beside the user's manual data collection preprocessing of data and model-building processes underscore the need for an abundance of high-quality datasets The system should be of great interest to healthcare practitioners since it reflects some state-of-the-art methods-including SMOTE for data oversampling and custom preprocessing steps in enhancing prediction accuracy Further, real-time diagnosis, and then initiating treatment, ultimately translating into better health outcomes, as well as streamlined healthcare delivery are a few of the other boons of 5Genabled AI-powered smart healthcare system for managing and detecting disease in real-time This innovative AI-based solution reaches a great milestone in the health sector due to the increasing demand for accurate, timely health assessments which further opens opportunities for more research and development in making the system better and widening its application in clinical settings. Such a system may change the way healthcare is administered, empower the physician with more control, and enhance the quality

of patient care through the use of AI and state-of-art technology.

References

- [1]. Diabetes Control and Complications Trial Research Group. "The effect of intensive treatment of diabetes on the development and progression of long-term complications in insulin-dependent diabetes mellitus." *New England journal of medicine* 329.14 (1993): 977-986.
- [2]. Haidine, Abdelfatteh, et al. "Artificial intelligence and machine learning in 5G and beyond: a survey and perspectives." *Moving broadband mobile communications forward: intelligent technologies for 5G and beyond* 47 (2021).
- [3]. Li, Philip Kam-Tao, et al. "Tackling dialysis burden around the world: a global challenge." *Kidney Diseases* 7.3 (2021): 167-175.
- [4]. Darj, Elisabeth. *the impediment and resolution among children under five years of age*. MS thesis. NTNU, 2021.
- [5]. Li, Philip Kam Tao, Emmanuel A. Burdmann, and Ravindra L. Mehta. "Acute kidney injury: global health alert." *Arab journal of nephrology and transplantation* 6.2 (2013): 75-81.
- [6]. Patel, Vikram, et al. "Chronic diseases and injuries in India." *The Lancet* 377.9763 (2011): 413-428.
- [7]. Ibrahim, Ibrahim, and Adnan Abdulazeez. "The role of machine learning algorithms for diagnosing diseases." *Journal of Applied Science and Technology Trends* 2.01 (2021): 1019.
- [8]. Alhayani, Bilal, et al. "RETRACTED ARTICLE: 5G standards for the Industry 4.0 enabled communication systems using artificial intelligence: perspective of smart healthcare system." *Applied nanoscience* 13.3 (2023): 1807-1817.
- [9]. Navaz, Alramzana Nujum, et al. "Trends, technologies, and key challenges in smart and connected healthcare." *Ieee Access* 9 (2021): 74044-74067.
- [10]. Prakash, Nikhil, Andrea Manconi, and Simon Loew. "Mapping landslides on EO data: Performance of deep learning models vs. traditional machine learning models." *Remote Sensing* 12.3 (2020): 346.
- [11]. West, Darrell M. "How 5G technology enables the health internet of things." *Brookings Center for Technology Innovation* 3.1 (2016): 20.
- [12]. Fernández, Alberto, et al. "SMOTE for learning from imbalanced data: progress and challenges, marking the 15year anniversary." *Journal of artificial intelligence research* 61 (2018): 863-905.
- [13]. Zaman, Umar, et al. "Towards secure and intelligent internet of health things: A survey of enabling technologies and applications." *Electronics* 11.12 (2022): 1893.
- [14]. Boddapati, Mohan Sai Dinesh, et al. "Creating a Protected Virtual Learning Space: A Comprehensive Strategy for Security and User Experience in Online Education." *International Conference on Cognitive Computing and Cyber Physical Systems*. Cham: Springer Nature Switzerland, 2023.
- [15]. Benhar, Houda, Ali Idri, and J. L. Fernández-Alemán. "Data preprocessing for heart disease classification: A systematic literature review." *Computer Methods and Programs in Biomedicine* 195 (2020): 105635.
- [16]. Chatfield, Chris. "Exploratory data analysis." *European journal of operational research* 23.1 (1986): 5-13.
- [17]. Abdi, Hervé, and Lynne J. Williams. "Principal component analysis." *Wiley interdisciplinary reviews: computational statistics* 2.4 (2010): 433-459.
- [18]. Rigatti, Steven J. "Random forest." *Journal of Insurance Medicine* 47.1 (2017): 31-39.
- [19]. Sofeikov, Konstantin I., et al. "Learning optimization for decision tree classification of non-categorical data with information gain impurity criterion." *2014 International Joint Conference on Neural Networks (IJCNN)*. IEEE, 2014.
- [20]. Qin, Zhuwei, et al. "How convolutional neural network see the world-A survey of

convolutional neural network visualization methods." arXiv preprint arXiv:1804.11191 (2018).

- [21]. Schaffner, Michael, et al. "Towards edge-aware spatiotemporal filtering in real-time." IEEE Transactions on Image Processing 27.1 (2017): 265280.
- [22]. Sharma, Sagar, Simone Sharma, and Anidhya Athaiya. "Activation functions in neural networks." Towards Data Sci 6.12 (2017): 310-316.
- [23]. Yan, Zhicheng, et al. "HD-CNN: hierarchical deep convolutional neural networks for large scale visual recognition." Proceedings of the IEEE international conference on computer vision. 2015.
- [24]. Memisevic, Roland, et al. "Gated softmax classification." Advances in neural information processing systems 23 (2010).
- [25]. Kumar, Naveen, Christina Mastrangelo, and Doug
- [26]. Montgomery. "Hierarchical modeling using generalized linear models." Quality and Reliability Engineering International 27.6 (2011): 835-842.