**Research Article** 

https://kelvinpublishers.com/



Kelvin Open Science Publishers Connect with Research Community

**Research Article** 

Volume 1 | Issue 1

# KOS Journal of Biotechnology and Pharmaceutical Sciences https://kelvinpublishers.com/journals/biotechnology-and-pharmaceutical-sciences.php

## https://kervinpuonsners.com/journals/biotechnology-and-pharmaceutical-sciences.php

# Nanomedicine and Al: The Future of Targeted Drug Delivery and Diagnostics

## Soren Falkner

Faculty of Computer Engineering, Vienna University of Technology, Vienna, Austria

\*Corresponding author: Soren Falkner, Faculty of Computer Engineering, Vienna University of Technology, Vienna, Austria

Received: May 10, 2025; Accepted: May 26, 2025; Published: May 28, 2025

**Citation:** Soren F. (2025) Nanomedicine and Al: The Future of Targeted Drug Delivery and Diagnostics. *KOS J Biotech and Pharm Sci.* 1(1): 1-7.

**Copyright:** © 2025 Soren F., This is an open-access article published in *KOS J Biotech and Pharm Sci* and distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

#### 1. Abstract

Nanomedicine, an interdisciplinary field leveraging nanotechnology, is poised to revolutionize healthcare through the development of highly specific drug delivery systems and ultra-sensitive diagnostic tools. By manipulating materials at the nanoscale. (1-100 nanometers), researchers are engineering novel approaches to overcome limitations in conventional medicine. Targeted drug delivery via nanoparticles offers the potential to enhance therapeutic efficacy by precisely delivering payloads to diseased cells or tissues, minimizing off-target effects and improving patient outcomes. Simultaneously, advancements in Nano diagnostics are enabling the development of highly sensitive biosensors and imaging agents capable of detecting disease biomarkers at extremely low concentrations, facilitating earlier and more accurate diagnoses. This abstract highlights the fundamental principles of nanomedicine in drug delivery and diagnostics, explores recent progress in the field, and discusses the potential of these technologies to transform disease management and personalized medicine.

## 2. Keywords

Nanomedicine, Nanotechnology, Targeted drug delivery, Nanoparticles, Diagnostics, Biosensors, Imaging agents, Personalized medicine, Therapeutics, Disease management

# **3. Introduction**

The dawn of the 21<sup>st</sup> century has witnessed an unprecedented convergence of scientific disciplines, giving rise to transformative fields with the potential to reshape our understanding and treatment of human disease. Among these, nanomedicine stands out as a particularly promising and rapidly evolving area. At its core, nanomedicine harnesses the unique properties of materials and structures at the nanoscale. (one billionth of a meter, typically ranging from 1 to 100 nanometers) to develop innovative diagnostic and therapeutic strategies. This ability to manipulate matter at such an infinitesimally small scale unlocks a plethora of possibilities, allowing for interactions with biological systems at a molecular and cellular level with unprecedented precision.

The limitations of conventional medicine often stem from a lack of specificity. Traditional drug delivery methods frequently distribute therapeutic agents throughout the body, leading to systemic side effects and suboptimal concentrations at the target site. Similarly, diagnostic techniques may lack the sensitivity to detect diseases in their nascent stages, hindering early intervention and impacting treatment outcomes [1-28]. Nanomedicine offers a paradigm shift by addressing these challenges through the engineering of nanoscale tools and materials that can interact with biological entities in a highly targeted and controlled manner.

One of the most compelling applications of nanomedicine lies in the realm of targeted drug delivery. Imagine microscopic vehicles, engineered with exquisite precision, capable of navigating the complex biological landscape to deliver their therapeutic payload directly to diseased cells, such as cancerous tumors or sites of infection. This targeted approach holds the potential to dramatically enhance drug efficacy while significantly reducing the debilitating side



effects often associated with systemic chemotherapy or broad-spectrum antibiotics. Various types of nanoparticles, including liposomes, dendrimers, polymeric nanoparticles, and inorganic nanoparticles, are being explored and tailored for specific targeting mechanisms. These nanoparticles can be functionalized with ligands that recognize specific receptors overexpressed on diseased cells, enabling them to selectively bind and release their therapeutic cargo at the intended site. The implications for treating diseases like cancer, where minimizing damage to healthy tissues is paramount, are profound.

Beyond enhancing drug delivery, nanomedicine is also revolutionizing medical diagnostics [29-41]. The ability to engineer nanomaterials with unique optical, electrical, and magnetic properties is paving the way for the development of highly sensitive biosensors and advanced imaging agents. Nanoparticle-based contrast agents can improve the resolution and sensitivity of medical imaging techniques such as MRI and CT scans, allowing for the earlier and more accurate detection of subtle pathological changes. Furthermore, nanoscale biosensors can be designed to detect minute concentrations of disease-specific biomarkers in bodily fluids like blood, urine, or saliva [42-66]. This capability for early disease detection, even before the onset of clinical symptoms, opens up new avenues for preventative medicine and timely intervention, potentially leading to significantly improved patient outcomes for a wide range of including cardiovascular conditions, diseases, neurodegenerative disorders, and infectious diseases.

The interdisciplinary nature of nanomedicine is one of its greatest strengths, drawing upon expertise from fields such as materials science, chemistry, biology, engineering, and medicine. This collaborative environment fosters the innovation necessary to design, synthesize, characterize, and ultimately translate nanoscale technologies into clinically relevant applications. The development of functionalized nanoparticles, for instance, requires a deep understanding of both materials science for their fabrication and biological principles for their targeting and interaction with living systems. Similarly, the creation of highly sensitive Nano biosensors necessitates expertise in nanotechnology for sensor design and biochemistry for biomarker recognition.

The journey from the laboratory bench to the patient bedside in nanomedicine is, however, fraught with challenges. Issues related to the biocompatibility and toxicity of nanomaterials are paramount and require rigorous investigation. Understanding the long-term fate of nanoparticles within the body, their potential for accumulation in specific organs, and their interactions with the immune system are crucial for ensuring patient safety. Furthermore, the complex biological environment presents significant hurdles for targeted delivery. Overcoming physiological barriers, such as the reticuloendothelial system. (a network of cells that removes foreign particles from the bloodstream) and achieving efficient penetration into target tissues, requires sophisticated engineering strategies.

Despite these challenges, the field of nanomedicine continues to advance at an impressive pace. Ongoing research is focused on developing novel nanomaterials with improved biocompatibility and biodegradability, engineering more sophisticated targeting ligands for enhanced specificity, and designing scalable and cost-effective manufacturing processes [67-88]. The integration of nanomedicine with other emerging fields, such as artificial intelligence and genomics, holds even greater promise for the future of personalized medicine. Imagine a scenario where a patient's unique genetic profile informs the design of personalized Nano carriers loaded with specific drugs, delivered precisely to the affected cells, and monitored in real-time using Nano sensors.

Nanomedicine represents a paradigm shift in healthcare, offering the potential to move beyond traditional, often nonspecific, approaches to disease diagnosis and treatment. By harnessing the unique properties of matter at the nanoscale, researchers are developing innovative tools for targeted drug delivery and ultra-sensitive diagnostics [89-95]. While significant challenges remain in translating these technologies into widespread clinical practice, the rapid advancements in the field and the potential for transformative impact on human health make nanomedicine a critical area of scientific inquiry and a cornerstone of the future of precision healthcare. The continued interdisciplinary collaboration and rigorous investigation into the safety and efficacy of nanomedicine will undoubtedly pave the way for a new era of more effective, personalized, and less invasive medical interventions.

#### 4. Challenges

One of the primary hurdles is navigating the complex biological environment within the human body. Nanoparticles, upon entering the bloodstream, face a multitude of interactions that can hinder their journey to the target site and affect their efficacy and safety:

• **Protein Corona Formation:** When nanoparticles encounter biological fluids, plasma proteins readily adsorb onto their surface, forming a "protein corona". This corona can alter the nanoparticle's size, surface charge, and targeting ligands, potentially leading to unintended interactions with the immune system and reduced targeting specificity. The composition of the protein corona is dynamic and depends on various factors, including the nanoparticle's physicochemical properties and the surrounding biological milieu. Understanding and controlling this interaction is critical for predictable nanoparticle behavior in vivo.

• **Reticuloendothelial System. (RES) Clearance:** The RES, a network of phagocytic cells. (primarily macrophages in organs like the liver and spleen), is the body's natural defense mechanism for removing foreign particles. Nanoparticles are often recognized and engulfed by RES cells, leading to their rapid clearance from the bloodstream before they can reach their intended target. Overcoming this "opsonization". (protein tagging for phagocytosis) and subsequent clearance is a major challenge for achieving prolonged circulation times and effective targeted delivery. Strategies like surface modification with polyethylene glycol. (PEGylation) are commonly employed to create a steric barrier that reduces protein adsorption and RES uptake, but these strategies are not universally effective and can sometimes elicit their own immune responses.

• **Target Tissue Penetration:** Even if nanoparticles successfully evade the RES and reach the vicinity of the target tissue, they often face significant barriers to penetration. For instance, in solid tumors, the tumor microenvironment is characterized by dense extracellular matrix, abnormal vasculature with poor permeability, and



high interstitial fluid pressure, all of which can impede nanoparticle extravasation. (leakage from blood vessels) and distribution within the tumor. Similarly, penetrating the blood-brain barrier to deliver therapeutics for neurological disorders remains a formidable challenge.

• **Cellular Uptake Mechanisms:** Once at the target site, nanoparticles need to be efficiently taken up by the target cells to deliver their therapeutic or diagnostic payload. Cellular uptake pathways are diverse and depend on both the nanoparticle's properties. (size, shape, surface charge, ligands) and the cell type. Understanding and manipulating these uptake mechanisms to favor the desired pathway in target cells while minimizing uptake in healthy cells is crucial for efficacy and safety.

#### 4.1. Safety and toxicity concerns

The unique physicochemical properties of nanomaterials that make them attractive for medical applications also raise potential safety concerns:

**4.1.1. Nano toxicity:** The small size and large surface area of nanoparticles can lead to interactions with biological molecules and cellular structures in ways that are different from their bulk counterparts. Potential toxic effects include the generation of reactive oxygen species. (ROS) leading to oxidative stress, DNA damage, protein denaturation, and disruption of cell membranes. The biodistribution and accumulation of nanoparticles in specific organs, as well as their potential for long-term effects, need thorough investigation. Factors such as nanoparticle composition, size, shape, surface charge, and aggregation state can all influence their toxicity profile.

**4.1.2. Biocompatibility:** Biocompatibility refers to the ability of a material to perform its desired function without eliciting an adverse host response. Nanomaterials must be biocompatible to be safely used in medical applications [96-104]. This includes not triggering excessive inflammation, immune responses, blood clotting. (thrombogenicity), or other adverse reactions. Careful selection of materials, surface modifications, and rigorous in vitro and in vivo testing are essential to ensure biocompatibility.

**4.1.3. Immunogenicity:** Nanoparticles can interact with the immune system in complex ways, potentially leading to both desired immunostimulatory effects. (e.g., in vaccines or cancer immunotherapy) and undesirable effects like hypersensitivity reactions or the induction of autoimmunity. Understanding how different nanoparticle properties influence immune responses is critical for designing safe and effective nanomedicines. The protein corona, as mentioned earlier, plays a significant role in mediating these interactions.

**4.1.4. Biodegradation and clearance:** The long-term fate of nanoparticles within the body is another important safety consideration. Ideally, nanoparticles should be cleared from the body after they have fulfilled their function, without leaving behind toxic residues. The clearance mechanisms depend on the size, composition, and biodegradability of the nanoparticles. Smaller nanoparticles. (typically < 8 nm) can be cleared through the kidneys, while larger ones are primarily cleared by the liver and spleen via the hepatobiliary pathway. Non-biodegradable nanoparticles may accumulate in organs over time, potentially leading to chronic toxicity. Designing nanoparticles with controlled biodegradability and

understanding their clearance pathways are essential for ensuring long-term safety.

#### 4.2. Technological and translational challenges

Beyond the biological and safety aspects, several technological and translational challenges hinder the widespread clinical adoption of nanomedicine:

**4.2.1.** Scalable and reproducible manufacturing: Producing high-quality nanoparticles with consistent properties at a large scale and with good manufacturing practices. (GMP) is a significant challenge. The synthesis and functionalization of nanoparticles often involve complex chemical processes that need to be tightly controlled to ensure reproducibility and batch-to-batch consistency, which is crucial for regulatory approval and clinical use.

**4.2.2.** Characterization and quality control: Thorough characterization of the physicochemical properties of nanoparticles. (size, shape, surface charge, composition, stability, drug loading, release kinetics) is essential for understanding their behavior and ensuring quality. Developing standardized and reliable methods for nanoparticle characterization and quality control is crucial for both research and manufacturing.

**4.2.3. Stability and storage:** Maintaining the stability of nanoparticles during storage and formulation is important for their shelf life and efficacy. Aggregation, degradation, and loss of functionality over time can compromise the quality of nanomedicines. Developing appropriate storage conditions and formulations to enhance stability is an ongoing challenge.

**4.2.4. Regulatory hurdles:** The regulatory landscape for nanomedicines is still evolving. Defining clear regulatory pathways for the approval of these complex systems, which often blur the lines between drugs, devices, and biologics, is crucial for facilitating their clinical translation. Addressing concerns related to safety, efficacy, and long-term effects requires robust preclinical and clinical evaluation, and regulatory agencies worldwide are working to establish appropriate guidelines [105-109].

**4.2.5. Cost-effectiveness:** The development and manufacturing of nanomedicines can be expensive. Demonstrating their clinical benefit and cost-effectiveness compared to existing therapies is essential for their widespread adoption and reimbursement by healthcare systems.

#### **5. Future Works**

#### 5.1. Advancing targeted drug delivery systems

**5.1.1. Smart and responsive nanoparticles:** Future research will likely concentrate on developing nanoparticles that can respond to specific physiological or pathological stimuli within the body. This could include pH changes in the tumor microenvironment, the presence of specific enzymes, temperature gradients, or even external triggers like light or magnetic fields. Such stimuli-responsive systems could enable even more precise drug release at the target site, further minimizing off-target effects. Imagine nanoparticles that remain inert until they encounter a high concentration of a specific cancer biomarker, at which point they release their cytotoxic payload.



**5.1.2. Multi-stage delivery systems:** Researchers are exploring more complex, multi-stage nanoparticles that can sequentially overcome biological barriers. For example, a larger nanoparticle might be designed to navigate the bloodstream and then shed layers or transform into smaller entities that can penetrate tissues more effectively or be taken up by cells more readily. This could significantly improve drug penetration into dense tumors or across the blood-brain barrier.

**5.1.3. "Stealth" nanoparticles with enhanced circulation:** While PEGylation has been a cornerstone of evading the RES, future work will focus on developing even more effective "stealth" coatings that are less immunogenic and can further prolong circulation times. This might involve exploring new biocompatible polymers, self-assembling peptides, or even mimicking natural biological structures to create truly "invisible" nanoparticles.

**5.1.4.** Active targeting with high specificity: Future targeting ligands will likely become more sophisticated, moving beyond simple antibody fragments or peptides to include aptamers. (nucleic acid sequences with high binding affinity), engineered proteins, or even cell-derived vesicles that exhibit inherent targeting capabilities. The goal is to achieve even greater specificity for diseased cells and minimize uptake by healthy tissues.

# 5.2. Revolutionizing Diagnostics with Nanotechnology

**5.2.1. Ultrasensitive and multiplexed biosensors:** Future nanodiagnostics will likely focus on developing biosensors with even higher sensitivity, capable of detecting single molecules or extremely low concentrations of biomarkers for early disease detection. Furthermore, multiplexed sensors that can simultaneously detect multiple biomarkers will provide a more comprehensive picture of a patient's health status. This could involve advancements in nanomaterials like quantum dots, nanowires, and graphene-based sensors.

**5.2.2. Advanced Nano imaging agents:** The development of novel nanoparticle-based contrast agents for various imaging modalities. (MRI, CT, PET, ultrasound, optical imaging) will continue. Future agents will likely offer improved resolution, target specificity, and the ability to provide functional information about the disease state, such as enzyme activity or cellular metabolism. Multimodal imaging agents that can be detected by two or more imaging techniques will also become more prevalent.

**5.2.3. Liquid biopsies with nanoparticle enrichment:** Nanoparticles can be engineered to capture and enrich rare circulating tumor cells. (CTCs), circulating tumor DNA. (ctDNA), or exosomes from blood or other bodily fluids. Future work will focus on developing more efficient and selective capture methods using functionalized nanoparticles, enabling earlier cancer detection, monitoring of treatment response, and detection of minimal residual disease.

**5.2.4. Point-of-care Nano diagnostics:** There is a growing need for rapid, low-cost, and user-friendly diagnostic tools that can be used at the point of care, especially in resource-limited settings. Nanotechnology is well-suited for developing such devices, for example, through the creation of paper-based or microfluidic devices incorporating nanoparticle-based sensors for rapid detection of infectious diseases or other health conditions.

# 5.3. Addressing safety and translational challenges

**5.3.1. Biodegradable and biocompatible nanomaterials:** Future research will prioritize the development of nanomaterials that are inherently biocompatible and can safely degrade into non-toxic byproducts after fulfilling their function. This includes exploring new classes of biodegradable polymers, inorganic nanomaterials with controlled dissolution, and bio-inspired nanomaterials.

**5.3.2.** Comprehensive nontoxicity studies: More sophisticated and long-term studies are needed to fully understand the potential toxicological effects of different nanomaterials under various physiological conditions. This includes investigating their interactions with different cell types, organs, and the immune system over extended periods. Predictive in vitro and in silico models will also play a crucial role in screening and designing safer nanomaterials.

**5.3.3. Standardized characterization and quality control:** Efforts to develop standardized protocols and techniques for the comprehensive characterization of nanoparticles will be crucial for ensuring reproducibility and facilitating regulatory approval. This includes defining critical quality attributes and establishing robust quality control measures for large-scale manufacturing.

**5.3.4. Understanding and controlling nano-bio interactions:** Future work will focus on gaining a deeper understanding of the complex interactions between nanoparticles and biological systems, including protein corona formation, cellular uptake pathways, and immune responses. This knowledge will be essential for rationally designing nanoparticles with predictable and desired in vivo behavior.

**5.3.5. Streamlining regulatory pathways:** Continued dialogue and collaboration between researchers, regulatory agencies, and industry are needed to establish clear and efficient regulatory pathways for the approval of nanomedicines. This includes developing guidelines that address the unique characteristics and potential risks and benefits of these novel therapeutic and diagnostic agents.

**5.3.6.** Scalable and cost-effective manufacturing: Developing robust and scalable manufacturing processes that can produce high-quality nanomedicines at a reasonable cost is essential for their widespread clinical adoption. This might involve exploring new synthesis techniques, microfluidicbased manufacturing, and other innovative approaches.

# 5.4. Synergies with other emerging fields

**5.4.1. Nanomedicine and artificial intelligence (AI):** AI can play a crucial role in analyzing the vast amounts of data generated in nanomedicine research, from nanoparticle design and characterization to preclinical and clinical trial outcomes. AI algorithms can help identify patterns, predict nanoparticle behavior, and optimize treatment strategies.

#### **5.4.2.** Nanomedicine and genomics/personalized medicine: Integrating nanomedicine with advances in genomics and other omics technologies will pave the way for truly personalized medicine. Nanocarriers can be tailored to deliver drugs based on a patient's genetic profile or disease subtype, and nanodiagnostics can be used to monitor individual responses to therapy at a molecular level.



Volume 1 | Issue 1

**Research Article** 

**5.4.3. Nanomedicine and tissue engineering/regenerative medicine:** Nanomaterials can provide scaffolds and growth factors for tissue regeneration and repair. Future work will likely focus on developing more sophisticated nanomaterial-based scaffolds that can mimic the native extracellular matrix and promote cell growth and differentiation.

# 6. Conclusion

In summary, nanomedicine stands at the forefront of medical innovation, offering a transformative approach to both diagnosing and treating diseases with unprecedented precision. By harnessing the unique properties of materials at the nanoscale, this interdisciplinary field is developing sophisticated tools that can overcome the limitations of conventional medicine. Targeted drug delivery systems promise to enhance therapeutic efficacy while minimizing harmful side effects, and advancements in Nano diagnostics are paving the way for earlier and more accurate disease detection.

While significant challenges remain in navigating biological complexities, ensuring safety, and scaling up production for clinical translation, the momentum in nanomedicine research is undeniable. Future work is focused on creating smarter, more responsive Nano carriers, developing ultrasensitive diagnostic tools, and ensuring the biocompatibility and longterm safety of nanomaterials. The integration of nanomedicine with other cutting-edge fields like artificial intelligence and genomics holds the key to realizing the vision of truly personalized healthcare.

Despite the hurdles, the potential of nanomedicine to revolutionize disease management and improve patient outcomes is immense. As research continues to advance and regulatory pathways become clearer, we can anticipate a future where nanoscale interventions play an increasingly vital role in maintaining health and combating disease, ushering in an era of more effective, less invasive, and ultimately more patient-centric medicine. The journey is ongoing, but the destination promises a significant leap forward in the landscape of healthcare.

# 7. References

- Omid Panahi, Ali Ezzati. (2025) AI in Dental-Medicine: Current Applications & Future Directions. Open Access J Clin Images. 2(1): 1-5.
- Koyuncu B, Gokce A, Panahi P. (2015) Reconstruction of an Archeological site in real time domain by using software techniques. In: 2015 Fifth International Conference on Communication Systems and Network Technologies, 1350-1354.
- 3. Omid P, Soren F. (2025) The Digital Double: Data Privacy, Security, and Consent in AI Implants West. J Dent Sci 2(1): 108.
- Uras Panahi, Redes AD HOC: Aplicações, Desafios, Direcções Futuras, Edições Nosso Conhecimento.
- 5. Uras Panahi, Sieci AD HOC: Zastosowania, wyzwania, przyszłe kierunki, Wydawnictwo Nasza Wiedza.
- 6. Uras Panahi, Reti AD HOC: Applicazioni, sfide e direzioni future, Edizioni Sapienza.
- 7. Omid Panahi, Sevil Farrokh Eslamlou, Peridontium: Estrutura, função e gestão clínica.
- 8. Omid Panahi, Shabnam Dadkhah, AI in der modernen Zahnmedizin.
- 9. Omid Panahi, Shabnam Dadkhah, La IA en la odontología moderna.

- 10. Omid Panahi, Shabnam Dadkhah, L'IA dans la dentisterie moderne.
- 11. Omid Panahi, Shabnam Dadkhah, L'intelligenza artificiale nell'odontoiatria moderna.
- 12. Omid Panahi, Shabnam Dadkhah, Sztuczna inteligencja w nowoczesnej stomatologii.
- 13. Omid Panahi, Shabnam Dadkhah, A IA na medicina dentária moderna.
- 14. Uras Panahi, Redes AD HOC: Aplicaciones, retos y orientaciones futuras, Ediciones Nuestro Conocimiento.
- 15. Uras Panahi, Réseaux AD HOC: Applications, défis et orientations futures, Editions Notre Savoir.
- Uras Panahi, AD HOC-Netze: Anwendungen, Herausforderungen, zukünftige Wege, Verlag Unser Wissen.
- 17. Panahi O. (2025) The Role of Artificial Intelligence in Shaping Future Health Planning. Int J Health Policy Plann. 4(1): 1-5.
- Panahi O. (2025) AI in Health Policy: Navigating Implementation and Ethical Considerations. Int J Health Policy Plann. 4(1): 1-5.
- Panahi O. (2024) Dental Implants & the Rise of AI. On J Dent & Oral Health. 8(1): 2024.
- Panahi O, Falkner S. (2025) Telemedicine, AI, and the Future of Public Health. Western J Med Sci & Res. 2(1): 102.
- Panahi O. (2025) Innovative Biomaterials for Sustainable Medical Implants: A Circular Economy Approach. European Journal of Innovative Studies and Sustainability. 1(2): 1-5.
- 22. Panahi O. (2025) Wearable Sensors and Personalized Sustainability: Monitoring Health and Environmental Exposures in Real-Time. European Journal of Innovative Studies and Sustainability. 1(2): 1-5.
- Panahi O. (2025) AI-Enhanced Case Reports: Integrating Medical Imaging for Diagnostic Insights. J Case Rep Clin Images. 8(1): 1161
- 24. Panahi O. (2025) AI and IT in Medical Imaging: Case Reports. J Case Rep Clin Images. 8(1): 1160.
- 25. Omid Panahi. (2025) Robotics in Implant Dentistry: Current Status and Future Prospects. Scientific Archives of Dental Sciences. 7(9): 55-60.
- Omid P, Soren F. (2025) The Digital Double: Data Privacy, Security, and Consent in AI Implants. Digit J Eng Sci Technol. 2(1): 105.
- Panahi O. (2025) Algorithmic Medicine. Journal of Medical Discoveries. 2(1).
- 28. Panahi O. (2025) Deep Learning in Diagnostics. Journal of Medical Discoveries. 2(1).
- 29. Panahi O. (2025) AI in Health Policy: Navigating Implementation and Ethical Considerations. Int J Health Policy Plann. 4(1): 1-5.
- Panahi O. (2025) The Role of Artificial Intelligence in Shaping Future Health Planning. Int J Health Policy Plann. 4(1): 1-5.
- Panahi O. (2025) Secure IoT for Healthcare. European Journal of Innovative Studies and Sustainability. 1(1): 1-5.
- 32. Omid P, Evil Farrokh E. (2024) Beyond the Scalpel: AI, Alternative Medicine, and the Future of Personalized Dental Care. J Complement Med Alt Healthcare. 13(2): 555860.
- Panahi O, Farrokh S. (2025) Ethical Considerations of AI in Implant Dentistry: A Clinical Perspective. J Clin Rev Case Rep. 10(2): 1-5.



- 34. Omid Panahi, Ali Ezzati, Mansoureh Zeynali. (2025) Will AI Replace Your Dentist? The Future of Dental Practice. On J Dent & Oral Health. 8(3): 2025.
- 35. Panahi O. (2025) Navigating the AI Landscape in Healthcare and Public Health. Mathews J Nurs. 7(1): 56.
- Omid Panahi, Faezeh Esmaili, Sasan Kargarnezhad. (2024) Künstliche Intelligenz in der Zahnmedizin, Unser Wissen Publishing.
- Omid Panahi, Faezeh Esmaili, Sasan Kargarnezhad. (2024) Artificial Intelligence in Dentistry, Scholars Press Publishing.
- Omid Panahi, Faezeh Esmaili, Sasan Kargarnezhad. (2024) Inteligencia artificial en odontología. Nuestro Conoc, Mento Publishing.
- Omid Panahi, Faezeh Esmaili, Sasan Kargarnezhad. (2024) L'intelligence artificielle dans l'odontologie. Edition Notre Savoir Publishing.
- 40. Omid Panahi, Faezeh Esmaili, Sasan Kargarnezhad. (2024) Intelligenza artificiale in odontoiatria. Sapienza Publishing.
- Omid Panahi, Faezeh Esmaili, Sasan Kargarnezhad. (2024) Inteligência Artificial em Medicina Dentária. Nosso Conhecimento Publishing.
- 42. Omid Panahi, Faezeh Esmaili, Sasan Kargarnezhad. (2024) Искусственный интеллект в стоматологии, Sciencia Scripts Publishing.
- 43. Shima Esmaielzadeh, Omid Panahi, Fatmanur Ketenci Çay. (2020) Application of Clay's in Drug Delivery in Dental Medicine. Scholars Press Academic Publishing.
- 44. Maryam Gholizadeh, Omid Panahi. (2021) Investigating System in Health Management Information Systems. Scholars Press Academic Publishing.
- 45. Maryam Gholizadeh, Omid Panahi. (2021) Untersuchungssystem im Gesund heits management Informations systeme, Unser Wissen Publishing.
- 46. Maryam Gholizadeh, Omid Panahi. (2021) Sistema de investigación en sistemas de información de gestión sanitaria. Nuestro Conoc, Mento Publishing.
- 47. Maryam Gholizadeh, Omid Panahi. (2021) Système d'investigation dans les systèmes d'information de gestion de la santé. Edition Notre Savoir Publishing.
- 48. Maryam Gholizadeh, Omid Panahi. (2021) Indagare il sistema nei sistemi informativi di gestione della salute. Sapienza Publishing.
- 49. Maryam Gholizadeh, Omid Panahi. (2021) Systeemonderzoek in Informatiesystemen voor Gezondheidsbeheer. Onze Kennis Publishing.
- 50. Maryam Gholizadeh, Omid Panahi. (2021) System badawczy w systemach informacyjnych zarządzania zdrowiem, Nazsa Wiedza Publishing.
- 51. Omid Panahi, Alireza Azarfardin. (2025) Computer-Aided Implant Planning: Utilizing AI for Precise Placement and Predictable Outcomes. Journal of Dentistry and Oral Health. 2(1).
- 52. Maryam Gholizadeh, Omid Panahi. (2021) Sistema de Investigação em Sistemas de Informação de Gestão de Saúde. Nosso Conhecimento Publishing.
- 53. Maryam Gholizadeh, Omid Panahi. (2021) Система исследований в информационных системах управления здравоохранением. Sciencia Scripts Publishing.
- Leila Ostovar, Kamal Khadem Vatan, Omid Panahi. (2020) Clinical Outcome of Thrombolytic Therapy. Scholars Press Academic Publishing.
- 55. Panahi O. (2025) Integrating dental and cardiac patient data for comprehensive health insights using AI. Ann Cardiolol. 2(1): 1007.

- 56. O. Panahi. (2025) The Future of Medicine: Converging Technologies and Human Health. Journal of Bio-Med and ClinicalResearch. RPC Publishers. 2(1).
- 57. O. Panahi. (2025) The Age of Longevity: Medical Advances and The Extension of Human Life. Journal of Bio-Med and Clinical Research. RPC Publishers. 2(1).
- Panahi. (2025) Nanomedicine: Tiny Technologies, Big Impact on Health. Journal of Bio-Med and Clinical Research. RPC Publishers. 2(1).
- 59. Panahi O. (2025) The evolving partnership: Surgeons and robots in the maxillofacial operating room of the future. J Dent Sci Oral Care. 1(1): 1-7.
- 60. Omid Panahi. (2019) Nanotechnology, Regenerative Medicine and Tissue Bioengineering. Scholars Press Academic Publishing.
- 61. Samira Zarei, Omid Panahi, Nima Bahador. (2019) Antibacterial activity of aqueous extract of eucalyptus camaldulensis against Vibrio harveyi. (PTCC1755) and Vibrio alginolyticus. (MK641453.1). Saarbucken: LAP, Lambert Academic Publishing GmbH & Co.KG.
- 62. Samira Zarei, Omid Panahi. (2019) Eucalyptus camaldulensis extract as a preventive to the vibriosis. Scholars Press Academic Publishing.
- Panahi O. (2024) Dental Implants & the Rise of AI. On J Dent & Oral Health. 8(1): 2024.
- 64. Omid P, Sevil Farrokh E. (2025) Bioengineering Innovations in Dental Implantology. Curr Trends Biomedical Eng & Biosci. 23(3): 556111.
- Panahi P, Bayılmış C, Çavuşoğlu U. (2021) Performance evaluation of lightweight encryption algorithms for IoTbased applications. Arabian Journal for Science and Engineering. 46(4): 4015-4037.
- 66. Panahi U, Bayılmış C. (2023) Enabling secure data transmission for wireless sensor networks based IoT applications. Ain Shams Engineering Journal. 14(2): 101866.
- Omid Panahi, Uras Panahi. (2025) AI-Powered IoT: Transforming Diagnostics and Treatment Planning in Oral Implantology. J Adv Artif Intell Mach Learn. 1(1): 1-4.
- Panahi O. (2025) The Algorithmic Healer: AI's Impact on Public Health Delivery. Medi Clin Case Rep J. 3(1): 759-762.
- 69. Panahi O. (2025) The Future of Healthcare: AI, Public Health and the Digital Revolution. Medi Clin Case Rep J. 3(1): 763-766.
- 70. Panahi O, Raouf MF, Patrik K. (2011) The evaluation between pregnancy and peridontal therapy. Int J Acad Res. 3: 1057-1058.
- Panahi O, Melody FR, Kennet P. (2011) Drug induced. (calcium channel blockers) gingival hyperplasia. JMBS. 2(1): 10-12.
- 72. Omid P. (2011) Relevance between gingival hyperplasia and leukemia. Int J Acad Res. 3: 493-494.
- 73. Omid Panahi, Fatmanur Ketenci Çay. (2023) NanoTechnology, Regenerative Medicine and, Tissue Bio-Engineering. Acta Scientific Dental Sciences. 7(4): 118-122.
- 74. Omid Panahi. (2024) Dental Pulp Stem Cells: A Review. Acta Scientific Dental Sciences. 8(2): 22-24.
- 75. Uras Panahi. (2025) AD HOC Networks: Applications, Challenges, Future Directions. Scholars' Press.
- 76. Omid Panahi, Artificial intelligence in Dentistry. Scholars Press Academic Publishing.
- 77. Panahi O. (2025) Smart Robotics for Personalized Dental Implant Solutions. Dental. 7(1): 21.



- Pejman Panahi, Michelle Freund. (2011) Safety Application Schema For Vehicular Virtual Ad Hoc Grid Networks. International Journal of Academic Research. 3(2).
- 79. Pejman Panahi. (2009) New Plan for Hardware Resource Utilization in Multimedia Applications Over Multi Processor Based System, MIPRO 2009. 32<sup>nd</sup> International Convention Conference on Grid And Visualization Systems. (GVS), 256-260.
- 80. Omid Panahi, Sevil Farrokh Eslamlou, Peridontium: Struktur, Funktion und klinisches management.
- 81. Omid Panahi, Sevil Farrokh Eslamlou, Peridoncio: Estructura, función y manejo clinic.
- 82. Omid Panahi, Sevil Farrokh Eslamlou, Le péridontium: Structure, fonction et gestion clinique.
- 83. Omid Panahi, Sevil Farrokh Eslamlou, Peridonio: Struttura, funzione e gestione clinica.
- 84. Omid Panahi, Sevil Farrokh Eslamlou, Peridontium: Struktura, funkcja i postępowanie kliniczne.
- Bakikoyuncu, Pejmanpanahi, Kalman Filtering of Link Quality Indicator Values for Position Detection by Using WSNS. Int'l Journal of Computing, Communications & Instrumentation Engg. 1: 2014.
- Panahi O. (2025) The Algorithmic Healer: AI's Impact on Public Health Delivery. Medi Clin Case Rep J. 3(1): 759-762.
- Panahi O. (2025) The Future of Healthcare: AI, Public Health and the Digital Revolution. Medi Clin Case Rep J. 3(1): 763-766.
- Panahi O. (2013) Comparison between unripe Makopa fruit extract on bleeding and clotting time. International Journal of Paediatric Dentistry. 23: 205.
- 89. Panahi O, Arab MS, Tamson KM. (2011) Gingival enlargment and relevance with leukemia. International Journal of Academic Research. 3(2).
- 90. Omid Panahi, Stammzellen aus dem Zahnmark.
- 91. Omid Panahi, Células madre de la pulpa dental.
- 92. Omid Panahi, Стволовые клетки пульпы зуба.
- 93. Omid Panahi, Cellules souches de la pulpe dentaire.
- 94. Omid Panahi, Cellule staminali della polpa dentaria.
- 95. Omid Panahi, Células estaminais de polpa dentária.
- 96. Panahi O, Melody FR. (2011) A novel scheme about extraction orthodontic and orthotherapy. International Journal of Academic Research. 3(2).
- Panahi O, Nunag GM, Nourinezhad Siyahtan A. (2011) Molecular Pathology: P-115: Correlation of Helicobacter Pylori and Prevalent Infections in Oral Cavity. Cell Journal. (Yakhteh). 12: 91-92.
- 98. Panahi P, Bayılmış C, Çavuşoğlu U, et al.. (2018) Performance Evaluation of L-Block Algorithm for IoT Applications. Uluslararası Bilgisayar Bilimleri ve Mühendisliği Konferansı, 609-612.
- 99. Panahi P, Bayılmış C, Çavuşoğlu U, et al.. (2019) Comparing Present and LBlock block ciphers over IoT Platform. 12<sup>th</sup> International Conference on Information Security and Cryptology, 66-69.
- 100.Panahi U. (2022) Nesnelerin internet için hafif sıklet kriptoloji algoritmalarına dayalı güvenli haberleşme modeli tasarımı. Sakarya Üniversitesi, Fen Bilimleri Enstitüsü, Sakarya.
- 101.Baki Koyuncu, Pejman Panahi, Sefika Varlioglu. (2015) Comparative Indoor Localization by using Landmarc and Cricket Systems. International Journal of Emerging Technology and Advanced Engineering. 5(6): 453-456.
- 102.Omid Panahi, Sevil Farrokh Eslamlou, Masoumeh Jabbarzadeh, Digitale Zahnmedizin und künstliche Intelligenz.

- 103.Omid Panahi, Sevil Farrokh Eslamlou, Masoumeh Jabbarzadeh, Odontología digital e inteligencia artificial.
- 104.Omid Panahi, Sevil Farrokh Eslamlou, Masoumeh Jabbarzadeh, Dentisterie numérique et intelligence artificielle.
- 105.Omid Panahi, Sevil Farrokh Eslamlou, Masoumeh Jabbarzadeh, Odontoiatria digitale e intelligenza artificial.
- 106.Omid Panahi, Sevil Farrokh Eslamlou, Masoumeh Jabbarzadeh, Stomatologia cyfrowa i sztuczna inteligencja.
- 107.Omid Panahi, Sevil Farrokh Eslamlou, Masoumeh Jabbarzadeh, Medicina dentária digital e inteligência artificial.
- 108.Omid Panahi, Masoumeh Jabbarzadeh. (2025) The Expanding Role of Artificial Intelligence in Modern Dentistry. On J Dent & Oral Health. 8(3): 2025.
- 109.Omid P, Shabnam D. (2025) Mitigating Aflatoxin Contamination in Grains: The Importance of Postharvest Management Practices. Adv Biotech & Micro. 18(5): 555996.

