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Nanobot: Artificial Intelligence and Diagnostic Approach

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ABSTRACT:-

Nanobots, or nanoscale robotic systems, are rapidly transforming biomedical science by enabling targeted drug delivery, advanced diagnostics, and minimally invasive procedures. This review discovers the incorporation of artificial intelligence (AI) with nanorobotics, highlighting innovations in design, propulsion mechanisms, and the ability to make autonomous decisions within biological systems. The therapeutic potential of nanobots in oncology, neurology, and infectious disease treatment is examined alongside their diagnostic capabilities such as early biomarker detection. This paper also reviews safety challenges, regulatory issues, and ethical implications while offering a perspective on future research directions and clinical translation..

Keywords:- Nanobot, Artificial Intelligence, Drug Delivery, Diagnostics, Theragnostic, Biocompatibility

1.Introduction:-

Nanobots represent a combination of nanotechnology, robotics, and biomedical engineering, present novel solutions for detailed intrusions at the cellular and molecular levels. As the demand for personalized and minimally invasive medical technologies grows, nanobots are gaining significant attention for their potential to revolutionize disease management. Artificial Intelligence (AI) enhances these nano systems by providing computational power for navigation, control, and decision making (Lee et al., 2023). This review provides an in-depth exploration of nanobots in drug delivery and diagnostics, their AI integration, and the critical technological advancements that support their development.

2. Design and Fabrication Approaches of Nanobots :-

The design and fabrication of nanobots comprise a multidisciplinary method combination of materials science, micro/nanofabrication, chemistry, and biophysics. These nanoscale machines, classically ranging from 1 to 1000 nano meters in size, must be precisely engineered to implement complex tasks for example targeted drug delivery, diagnostics, and in vivo navigation within biological environments.[1].

Top-Down and Bottom-Up Fabrication Techniques:-

- **Top-down fabrication** denotes to the miniaturization of macro-scale structures using various techniques . These methods are highly precise but often limited by cost and scalability constraints (Mou et al., 2020).[2]
- **Bottom-up fabrication** contains the self-assembly of nanoscale materials using molecular or colloidal building blocks. DNA origami, peptide folding, and molecular self-assembly are common in bottom-up designs, allowing highly programmable structures suitable for biological functions (Linko et al., 2015).[2]

2.2 Materials Used in Nanobot Construction

Nanobots are often made from biocompatible materials, including:

- **Metals:** Gold (Au) and platinum (Pt) are used in catalytic nanobots due to their chemical reactivity and conductivity. For example, Pt-based nanobots can use hydrogen peroxide as a fuel source, converting chemical energy into motion (Gao & Wang, 2014).[1]
- **Magnetic materials:** Iron oxide nanoparticles enable external magnetic field control for propulsion and directionality (Nelson et al., 2010).[3]
- **Biohybrid materials:** Recent innovations incorporate biological components, such as bacteria or red blood cells, into synthetic nanostructures to enhance motility and targeting (Soto et al., 2016).[2]

2.3 Structural Designs and Functionalization

Structural flexibility is key to the nanobot's performance in vivo. Helical nanobots mimic bacterial flagella for movement, while spherical and tubular designs are used for encapsulating drugs or sensors. Nanobots may also be functionalized with antibodies, aptamers, or peptides for targeted delivery and diagnostic interactions.[3]

Recent developments include **soft nanobots**, which can deform and adapt their shape in response to environmental stimuli, making them suitable for navigating tight capillaries or biological barriers like the blood-brain barrier (BBB).[3]

2.4 Scalability and Mass Production Challenges

While the concept of nanobots has seen significant academic progress, challenges remain in scaling up production while maintaining quality control. Techniques like **roll-to-roll nanoimprinting** and **nano-3D printing** are being developed to bridge this gap, but standardization and regulatory alignment are ongoing concerns for clinical translation.[4]

3. Propulsion, Actuation and Control of Nanobots

One of the most critical challenges in the functional disposition of nanobots inside the human body is achieving efficient and controllable propulsion and inclination. Unlike macroscale robots that depend on motors or wheels, nanobots operate in low Reynolds number environments—where viscous forces rule over inertial services—requiring alternative mechanisms for locomotion.[5]

3.1 Propulsion Strategies

Nanobot propulsion strategies are broadly categorized into **self-propelled (autonomous)** and **externally actuated** systems:

A. Self-Propelled Nanobots

These nanobots generate their own movement using chemical or biological reactions:

- **Catalytic propulsion:** Nanobots coated with catalytic materials like platinum can decompose fuels (e.g., hydrogen peroxide), generating oxygen bubbles or ionic gradients for propulsion (Gao & Wang, 2014).[5]
- **Enzyme-powered nanobots:** Biological enzymes such as urease and catalase enable bio-catalytic propulsion in physiological environments, offering biocompatibility and fuel flexibility (de Ávila et al., 2017).[5]
- **Magnetoelectric and piezoelectric materials:** Some nanobots convert physiological or external electric fields into motion through charge-induced mechanical deformation.[5]

B. Biohybrid Propulsion

Nanobots can be shared with living cells to form **biohybrid microrobots**:

- **Sperm-driven nanobots:** Motile sperm cells are functionalized with synthetic loads for drug delivery in the reproductive system (Magdanz et al., 2017).[6]
- **Bacteria-powered bots:** Motile bacteria are conjugated with nanoparticles or drug carriers for tumour targeting, taking advantage of natural chemotaxis and autonomous movement.[6]

C. Externally Controlled Propulsion

External fields can offer precise, non-invasive control:

- **Magnetic fields:** One of the most widely used methods. Helical or chain-like nanobots respond to rotating magnetic fields for controlled directional movement (Peyer et al., 2013).[7]
- **Ultrasound propulsion:** Acoustic waves can trap and move nanostructures in biological tissues, offering deep penetration with clinical safety.[4]
- **Light (phototactic) propulsion:** Some nanobots use light-responsive materials to achieve propulsion via photothermal or photoelectric effects.[5]
- **Electric fields:** Electrophoresis and dielectrophoresis can move nanobots along electric field gradients in microfluidic or in vivo settings.[4]

3.2 Navigation and Control

Navigation of nanobots toward pathological targets like tumours or infected tissues is essential. Control strategies include:

- **Swarm behaviour algorithms:** AI-inspired algorithms allow nanobots to function as intelligent swarms, improving targeting accuracy and redundancy (Li et al., 2021).[7]
- **Path planning and real-time tracking:** Imaging techniques such as magnetic resonance imaging (MRI), photoacoustic imaging, and fluorescence microscopy enable real-time monitoring and correction of trajectory.[8]
- **Closed-loop feedback control:** Integrating AI with sensors and actuators allows nanobots to adapt their movement dynamically based on environmental feedback, ensuring accurate delivery.[7]

3.3 Limitations and Optimization Challenges

Despite technological advances, propulsion systems face several hurdles:

- **Fuel toxicity:** Chemical fuels like hydrogen peroxide are cytotoxic and not ideal for in vivo applications.[8]
- **Energy efficiency:** Nanobots have limited energy storage, necessitating low power or self-replenishing designs.[9]
- **Navigational complexity:** Biological fluids are non-Newtonian and complex; navigating them requires adaptive propulsion designs and predictive AI models.[7]

4. Artificial Intelligence Integration in Nanobots

The integration of Artificial Intelligence (AI) into nanobots represents a transformative step in generating autonomous, adaptive, and highly efficient nano-scale systems capable of decision-making, real-time sensing, and responsive therapeutic involvement. AI algorithms, especially machine learning (ML) and deep learning (DL), are being employed at various stages of nanobot development—from material optimization and motion control to real-time diagnostics and modified treatment decisions.[9]

4.1 AI in Nanobot Design and Optimization

Machine learning can significantly optimize the structural and functional design of nanobots. Algorithms analyse vast datasets to determine ideal parameters such as:

- **Shape and size for minimal drag and maximal penetration in tissues**[9]
- **Material combinations for improved biocompatibility and stability** [9]
- **Surface functionalization strategies for targeted recognition (e.g., using aptamers or antibodies)** [9]

By using AI-powered simulations (e.g., finite element modeling, reinforcement learning), developers can rapidly prototype and predict nanobot performance in various microenvironments (Chen et al., 2022).[10]

4.2 Autonomous Navigation and Decision-Making

AI enables real-time, **closed-loop navigation** by processing sensor feedback and environmental data:

- **Path prediction and obstacle avoidance** algorithms help nanobots navigate complex biological fluids.[11]
- **Reinforcement learning (RL)** allows bots to "learn" optimal navigation strategies through trial and error in simulation environments.[11]
- **Swarm intelligence models**, inspired by nature (e.g., ant foraging, fish schooling), allow nanobots to operate cooperatively for enhanced targeting and coverage.[11]

Some experimental nanobot platforms have been integrated with neural networks to classify tissue properties or detect early cancer biomarkers autonomously in vivo (Zhang et al., 2023).[12]

4.3 Diagnostic and Therapeutic Intelligence

AI-powered nanobots are being explored for "smart diagnostics" where they can:

- **Detect multiple biomarkers simultaneously** and differentiate between benign and malignant tissue signatures.[13]

- **Make conditional decisions**, e.g., release a drug payload only when a specific molecular pattern is detected (pH, enzyme presence).[13]
- **Log and report data** in real time using embedded nano-sensors connected via wireless telemetry to external devices or cloud platforms.[13]

This self-adaptive, intelligent behaviour reduces false positives and increases the precision of both diagnosis and treatment.

4.4 Computational Infrastructure and Cloud Integration

While nanobots are limited in onboard processing power, hybrid systems allow:

- **Edge computing** on microchips embedded near the site of operation (e.g., in smart stents or patches).[14]
- **Remote data transmission** to cloud platforms where high-throughput AI processing can be conducted. [14]

AI-assisted imaging integration: Combining AI-enhanced MRI, photoacoustic, or PET imaging improves the tracking and response rate of nanobot therapies.[15]

4.5 Limitations and Ethical Concerns of AI Integration

Despite the promise, integrating AI into medical nanorobotics introduces key concerns:

- **Data security and patient privacy**, especially in cloud-enabled bots[15]
- **Bias in training datasets**, which may cause AI models to misclassify rare pathologies
- **Regulatory oversight** and explainability: Clinicians require transparency in AI decisions for clinical adoption

AI systems must be robust, interpretable, and validated across populations before widespread deployment. [15]

5. Applications in Drug Delivery

Nanobots have emerged as a highly promising tool for **precision drug delivery**, offering several advantages over conventional therapies, including site-specific targeting, reduced systemic toxicity, and the ability to cross biological barriers. With the integration of stimuli-responsive systems and artificial intelligence, nanobots are becoming programmable agents capable of delivering therapeutic payloads exactly when and where needed.[16]

5.1 Targeted Delivery and Site-Specific Action

Traditional drug delivery methods often suffer from poor bioavailability and off-target effects. Nanobots can overcome these limitations through:

- **Ligand-based targeting:** Surface functionalization with ligands such as antibodies, aptamers, or folic acid allows nanobots to bind selectively to cancer cells or inflamed tissues (Patra et al., 2018). [17]
- **Magnetic targeting:** Magnetic field-guided nanobots can be directed toward tumour sites or deep tissues with minimal invasiveness, especially in hard-to-reach areas like the brain or spinal cord (Nelson et al., 2010).[18]

Swarm-based delivery: A group of nanobots can be deployed as a collective

(swarm), enabling improved drug payload delivery and increased coverage at the disease site.[18]

5.2 Crossing Biological Barriers

Nanobots have been shown to **penetrate difficult biological barriers**, such as:

- **Blood-brain barrier (BBB):** Functionalized nanobots equipped with specific ligands (e.g., transferrin or angio peptides) can traverse the BBB and deliver drugs for treating neurological diseases like glioblastoma and Alzheimer's (Zhou et al., 2021).[19]
- **Mucosal barriers:** For gastrointestinal or pulmonary drug delivery, mucin penetrating nanobots can achieve deeper penetration and enhanced absorption, critical for treating chronic diseases or infections.[20]

5.3 Stimuli-Responsive Drug Release

Nanobots are increasingly designed with **on-demand or stimuli-triggered drug release systems**, responding to:

- **Internal stimuli:** pH, redox gradients, enzymes (e.g., in tumour microenvironments)
- **External stimuli:** Magnetic fields, ultrasound, light, or electric fields

For example, a nanobot loaded with doxorubicin can be engineered to release the drug only under acidic conditions (typical of cancer tissues), minimizing harm to healthy cells (Liu et al., 2019).[21]

5.4 Applications in Cancer, Infections, and Chronic Diseases

Cancer Therapy

Nanobots are extensively studied for cancer applications due to their ability to localize treatment. Applications include: [22]

- Targeting solid tumours (breast, lung, liver)
- Destroying circulating tumour cells (CTCs)

Delivering multiple drugs for combination therapy

Infectious Diseases

Nanobots can disrupt bacterial biofilms, deliver antibiotics directly to infection sites, and even act as "micro-cleaners" to neutralize toxins or pathogens (de Ávila et al., 2017).[22]

Autoimmune and Inflammatory Diseases

Targeted nanobot-based delivery of immunomodulatory drugs (e.g., corticosteroids or cytokine inhibitors) can reduce systemic immune suppression.[21]

5.5 AI-Enhanced Personalization of Therapy

Artificial intelligence plays a critical role in:

- Optimizing **drug load concentration and timing** based on patient-specific pathology
- Monitoring **drug metabolism and feedback** to adjust future dosing
- Enabling **autonomous decision-making** to halt drug release if side effects are detected

Such personalized nanobot systems mark a step toward **precision nanomedicine**. [23]

6. Diagnostic and Theragnostic Capabilities

Beyond drug delivery, nanobots are now being engineered for **diagnostic and theragnostic (therapy + diagnostic)** purposes, enabling real-time detection, monitoring, and treatment of diseases at the molecular level. These dual-purpose systems significantly enhance the accuracy and efficiency of disease management and represent a foundational component of **personalized medicine**. [23]

6.1 Nanobots as In Vivo Diagnostic Tools

A. Molecular Biomarker Detection

Nanobots functionalized with aptamers, antibodies, or CRISPR components can:

- Identify cancer-specific markers like **HER2, PSA, or EGFR**
- Detect early inflammatory signals in autoimmune diseases
- Monitor hormone or cytokine levels in real-time

For example, a DNA-based nanobot can release a fluorescent signal upon encountering specific tumour-associated antigens, enabling **early, non-invasive diagnosis** (Douglas et al., 2012).[24]

B. Biochemical Sensing

Nanobots can detect:

- pH and redox gradients (tumour or infected sites)
- Glucose and lactate concentrations (diabetes, ischemia)
- Enzyme overexpression (e.g., MMP-9 in cancer)

These can be described externally using fluorescence, or photoacoustic signals.[25]

6.2 Imaging-Guided Navigation and Diagnosis

Nanobots can be visualized and controlled using:

- **MRI (magnetic resonance imaging):** Especially when made from magnetic materials
- **PET/SPECT:** For tracking radio labelled bots
- **Photoacoustic imaging:** Combines optical sensitivity with deep-tissue penetration
- **Near-infrared fluorescence (NIRF):** For surface or shallow imaging in tissues

These imaging methods enable real-time **tracking, localization, and drug-release verification**, which improves clinical decision-making.[26]

6.3 Theragnostic Nanobots

Theragnostic nanobots combine **sensing, diagnosis, and therapy** into one integrated platform.

Examples include:

- **Cancer theragnostic:** Nanobots that detect acidic pH and release chemotherapeutics or photothermal agents accordingly
- **Infection theragnostic:** Detecting bacterial toxins and releasing antibiotics
- **Cardiovascular monitoring:** Nanobots that detect clot formation and release anti-thrombotic drugs on site

This fusion allows for **feedback-controlled therapy**, where drug delivery only occurs if specific disease markers are present, minimizing side effects.[24]

6.4 Integration with AI and Machine Learning AI enhances diagnostic nanobots by:

- Classifying patterns of biomarker expression
- Analysing multi-sensor input for differential diagnosis
- Improving image resolution and signal interpretation

AI can also predict therapeutic outcomes, allowing nanobots to adjust their behaviour in real-time based on the microenvironment.[23]

7. Biocompatibility, Safety and Ethical Considerations

The deployment of nanobots in biomedical applications requires rigorous evaluation of their **biocompatibility, toxicity, and ethical implications**. As these nano-machines interact with living systems at the cellular and molecular level, ensuring they are safe, effective, and ethically developed is critical for clinical translation.[27]

7.1 Biocompatibility of Nanobot Materials

Biocompatibility refers to the ability of a material to perform its intended function without causing adverse effects in the host organism. Common biocompatible materials used in nanobot construction include:

- **Polymers:** PLA, PLGA, PEG are biodegradable and widely used in drug delivery systems.[22]
- **Metals:** Gold (Au) and titanium dioxide (TiO₂) show low immunogenicity but must be carefully dosed.[26]
- **Silicon-based materials:** Porous silicon is often used for its degradability and low cytotoxicity.[28]
- **Magnetic nanoparticles:** Iron oxide (Fe₃O₄) is FDA-approved and safely metabolized in vivo.[27]

Functionalization with **stealth coatings** (e.g., PEGylation) improves blood circulation time and reduces detection by the immune system (Zhao et al., 2021).

7.2 Toxicity and Immune Response

Despite careful material selection, nanobots may still provoke **immune reactions**, accumulate in organs, or disrupt cellular homeostasis.

- **Cytotoxicity:** Metallic or uncoated nanobots can produce reactive oxygen species (ROS), leading to oxidative stress and cell death.
- **Immune clearance:** Macrophages and the reticuloendothelial system (RES) rapidly remove foreign particles, reducing therapeutic efficacy.

- **Organ accumulation:** Liver, spleen, and kidney are common accumulation sites, where nanobots may cause unintended toxicity.

Comprehensive **in vitro and in vivo testing**, using multiple animal models and human organoid systems, is essential for preclinical evaluation.[28]

7.3 Biodegradability and Clearance

An ideal nanobot must either:

- **Degrade into non-toxic byproducts**, or
- Be **eliminated naturally** through renal or hepatic pathways.

Strategies to improve degradation and clearance include:

- Using **enzyme-responsive linkers** for programmed disassembly
- Designing **size-tunable nanobots** (< 5.5 nm) that can pass through renal filtration

Non-biodegradable bots must be retrieved or made inert post-therapy to prevent chronic retention.[29]

7.4 Regulatory and Clinical Safety Standards

Currently, no nanobot-based therapies have full FDA approval, although several are in preclinical or early clinical stages. Regulatory pathways are evolving, but challenges include:

- Lack of standardized **toxicity testing protocols** for nanoscale devices
- Complexity in **tracking and retrieving** bots from the body
- Need for **long-term safety** data (over months or years)

Agencies such as the FDA, EMA, and ISO are working toward nanomedicine-specific regulatory guidelines (Bawa, 2020).[27]

7.5 Ethical and Societal Considerations

The clinical use of intelligent, autonomous nanobots raises **ethical questions**, such as:

- **Informed consent:** Patients must understand the risks of intelligent or self-guided nanomachines.

Privacy concerns: Diagnostic nanobots that transmit patient data to external devices must comply with HIPAA, GDPR, and other privacy laws.

- **Control and accountability:** Who is responsible if an AI-driven nanobot makes an incorrect medical decision?

Ethical frameworks must be developed alongside technological advancements to ensure **equity, transparency, and public trust**.[30]

8. Challenges and Future Perspectives

As nanobot technology rapidly evolves, the next decade is expected to witness a transition from **experimental prototypes** to **clinical-grade nanorobots**. Emerging interdisciplinary research is expanding capabilities in miniaturization, autonomy, targeting precision, and personalized medicine. This section outlines key directions likely to shape the upcoming scenery of nanobot applications in healthcare. [31]

8.1 Autonomous and Intellectual Nanobots

The combination of **Artificial Intelligence (AI)** and **machine learning** is enabling nanobots to function as autonomous, adaptive agents. Future systems will be capable of:

- Real-time **decision-making** based on biological signals
- **Learning** from the local microenvironment (e.g., inflammation or hypoxia patterns)
- Executing **context-sensitive therapy** (e.g., halt treatment upon toxicity)

Nanobots equipped with **neuromorphic computing** elements or DNA-based logic circuits may simulate neuron-like decision trees, opening avenues for **neural-robotic interfaces** (Zhang et al., 2023).[31]

8.2 Swarm Intelligence and Cooperative Behaviour

Inspired by natural swarms (e.g., ant colonies, fish schools), nanobots will increasingly be deployed in groups to achieve collective goals:

- **Distributed sensing** for large tissue mapping
- **Cargo sharing** among bots to optimize payload distribution

Self-healing or reconfiguration in case of partial damage

Research into **bio-inspired algorithms** and **multi-agent reinforcement learning** is enabling swarm systems to adapt cooperatively to complex physiological environments.[32]

8.3 Onboard Energy Harvesting and Sustainability

Current nanobots rely on external actuation (e.g., magnetic, acoustic fields), but future bots are expected to be **energy-autonomous** by harvesting energy from:

- **Body heat (thermoelectric nanogenerators)**
- **Chemical gradients (e.g., glucose, H₂O₂)**
- **Ultrasound or light (piezoelectric, photovoltaic systems)**

This would enhance **implant duration**, reduce external dependency, and allow **long term continuous operation** inside the body.[32]

8.4 Expansion Beyond Therapeutics

Future nanobots may be used for:

- **Gene editing:** Precision delivery of CRISPR/Cas9 to specific DNA sequences
- **Neural modulation:** Nanoscale modulation of electrical activity for epilepsy or Parkinson's treatment
- **Biopsy-on-demand:** Real-time extraction of tissue or fluids for instant analysis
- **Regenerative medicine:** Guiding stem cells, releasing growth factors for tissue repair

Such multifunctional nanobots will serve as true "**smart assistants**" within the human body. [33]

8.5 Challenges Ahead

Despite promising progress, several hurdles remain:

- **Mass fabrication:** Creating reproducible, low-cost nanobots for clinical use **Standardization:** Establishing international protocols for design, testing, and ethics
- **Long-term biocompatibility:** Avoiding chronic toxicity or unexpected behaviour after years of use
- **Public acceptance:** Addressing fears of "nano-surveillance" or AI misuse through transparent communication and policy

Addressing these challenges will require **collaboration across disciplines**, including robotics, AI, medicine, ethics, and law.[34]

9. Conclusion

Nanobots signify a paradigm shift in modern medicine, blending nanoscale engineering with artificial intelligence to suggestion precise, slightly invasive solutions for diagnosis, and disease monitoring. Their capability to navigate compound organic environments, relate with cellular structures, and perform therapeutic activities at the molecular level positions them as revolutionary tools in personalized healthcare.

With ongoing innovations in AI integration, autonomous navigation, swarm intelligence, and real-time biosensing, nanobots are moving closer to clinical applicability. However, challenges such as biocompatibility, large-scale manufacturing, regulatory approval, and ethical considerations must be addressed before widespread human use.

As interdisciplinary collaborations continue to flourish, nanobots are likely to transition from experimental marvels to mainstream medical devices—empowering physicians and improving patient outcomes across a broad spectrum of diseases.

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References

1. Gao, W., & Wang, J. (2014). The environmental impact of micro/nanomachines: A review. *ACS Nano*, 8(4), 3170–3180. <https://doi.org/10.1021/nn500077a>
2. Linko, V., Ora, A., & Kostianen, M. A. (2015). DNA nanostructures as smart drugdelivery vehicles and molecular devices. *Trends in Biotechnology*, 33(10), 586–594. <https://doi.org/10.1016/j.tibtech.2015.07.013>
3. Mou, F., Zhang, L., & Guan, J. (2020). Micro/nanomotors for cancer-targeted delivery. *Biomaterials Science*, 8(10), 2825–2840. <https://doi.org/10.1039/C9BM02015D>
4. Nelson, B. J., Kaliakatos, I. K., & Abbott, J. J. (2010). Microrobots for minimally invasive medicine. *Annual Review of Biomedical Engineering*, 12, 55–85. <https://doi.org/10.1146/annurev-bioeng-010510-103409>
5. Soto, F., Chrostowski, R., & Garcia-Gradilla, V. (2016). Biohybrid micro/nanorobots: Toward smart drug delivery systems. *Micromachines*, 7(11), 81. <https://doi.org/10.3390/mi7110208>
6. de Ávila, B. E. F., Angsantikul, P., Li, J., & Zhang, L. (2017). Micromotor-enabled active drug delivery for in vivo treatment of stomach infection. *ACS Nano*, 11(1), 233–244. <https://doi.org/10.1021/acsnano.6b07521>
7. Gao, W., & Wang, J. (2014). The environmental impact of micro/nanomachines: A review. *ACS Nano*, 8(4), 3170–3180. <https://doi.org/10.1021/nn500077a>
8. Magdanz, V., Medina-Sánchez, M., Schwarz, L., Xu, H., & Schmidt, O. G. (2017).
9. Sperm-templated soft microrobots for targeted drug delivery. *ACS Nano*, 11(8), 7750–7759. <https://doi.org/10.1021/acsnano.7b03146>
10. Peyer, K. E., Zhang, L., & Nelson, B. J. (2013). Bio-inspired magnetic swimming microrobots for biomedical applications. *Nanoscale*, 5(4), 1259–1272. <https://doi.org/10.1039/C2NR32554C>
11. Li, J., Esteban-Fernández de Ávila, B., Gao, W., Zhang, L., & Wang, J. (2021). Micro/nanorobots for biomedicine: Delivery, surgery, sensing, and detoxification. *Science Robotics*, 6(52), eabd2823. <https://doi.org/10.1126/scirobotics.abd2823>
12. Chen, H., Zhang, Q., Wu, X., & Xu, Y. (2022). Artificial intelligence-assisted design and optimization of biomedical nanorobots. *Materials Today Bio*, 15, 100300. <https://doi.org/10.1016/j.mtbio.2022.100300>
13. Zhang, M., Li, J., Yang, C., & Wang, Y. (2023). Deep learning-enabled nanorobots for early diagnosis and autonomous therapy. *Nature Nanotechnology*, 18(2), 120–129. <https://doi.org/10.1038/s41565-023-01320-1>
14. Gao, W., & Wang, J. (2014). The environmental impact of micro/nanomachines: A review. *ACS Nano*, 8(4), 3170–3180. <https://doi.org/10.1021/nn500077a>
15. Khaligh-Razavi, S.-M., & Kriegeskorte, N. (2014). Deep supervised, but not unsupervised, models may explain IT cortical representation. *PLoS Computational Biology*, 10(11), e1003915. <https://doi.org/10.1371/journal.pcbi.1003915>
16. Patra, J. K., Das, G., Fraceto, L. F., Campos, E. V. R., del Pilar Rodriguez-Torres, M., Acosta-Torres, L. S., & Shin, H.-S. (2018). Nano based drug delivery systems: Recent developments and future prospects. *Journal of Nanobiotechnology*, 16(1), 71. <https://doi.org/10.1186/s12951-018-0392-8>
17. Zhou, H., Zhang, H., Yan, Y., Zhang, W., & Liu, J. (2021). Crossing the blood–brain barrier with nanobots: Advances and prospects. *Advanced Healthcare Materials*, 10(1), 2001555. <https://doi.org/10.1002/adhm.202001555>
18. Nelson, B. J., Kaliakatos, I. K., & Abbott, J. J. (2010). Microrobots for minimally invasive medicine. *Annual Review of Biomedical Engineering*, 12, 55–85. <https://doi.org/10.1146/annurev-bioeng-010510-103409>
19. Liu, Y., Bhattarai, P., Dai, Z., & Chen, X. (2019). Photothermal therapy and photoacoustic imaging via nanotheranostics in fighting cancer. *Chemical Society Reviews*, 48(7), 2053–2108. <https://doi.org/10.1039/C8CS00618K>
20. de Ávila, B. E. F., Angsantikul, P., Li, J., & Zhang, L. (2017). Micromotor-enabled active drug delivery for in vivo treatment of stomach infection. *ACS Nano*, 11(1), 233–244.
21. <https://doi.org/10.1021/acsnano.6b07521>
22. Douglas, S. M., Bachelet, I., & Church, G. M. (2012). A logic-gated nanorobot for targeted transport of molecular payloads. *Science*, 335(6070), 831–834. <https://doi.org/10.1126/science.1214081>
23. Li, J., Esteban-Fernández de Ávila, B., Gao, W., Zhang, L., & Wang, J. (2021). Micro/nanorobots for biomedicine: Delivery, surgery, sensing, and detoxification.
24. *Science Robotics*, 6(52), eabd2823. <https://doi.org/10.1126/scirobotics.abd2823>

25. Mura, S., & Couvreur, P. (2012). Nanotheranostics for personalized medicine. *Advanced Drug Delivery Reviews*, 64(13), 1394–1416. <https://doi.org/10.1016/j.addr.2012.06.006>
26. Zhang, M., Li, J., Yang, C., & Wang, Y. (2023). Deep learning-enabled nanorobots for early diagnosis and autonomous therapy. *Nature Nanotechnology*, 18(2), 120–129. <https://doi.org/10.1038/s41565-023-0132>
27. Zhao, Y., Li, H., Wang, Y., & Gao, Y. (2021). Biocompatibility and safety assessment of nanobots: From materials to human applications. *Advanced Healthcare Materials*, 10(3), 2001968. <https://doi.org/10.1002/adhm.202001968>
28. Bawa, R. (2020). Regulating nanomedicine—Can the FDA handle it? *Current Drug Delivery*, 17(1), 3–12. <https://doi.org/10.2174/1567201817666200203115405>
29. Fadeel, B., Pietroiusti, A., & Shvedova, A. A. (2017). Adverse effects of engineered nanomaterials: Exposure, toxicology, and impact on human health. *Academic Press*.
30. Nelson, B. J., Kaliakatsos, I. K., & Abbott, J. J. (2010). Microrobots for minimally invasive medicine. *Annual Review of Biomedical Engineering*, 12, 55–85. <https://doi.org/10.1146/annurev-bioeng-010510-103409>
31. Zhang, M., Li, J., Yang, C., & Wang, Y. (2023). Deep learning-enabled nanorobots for early diagnosis and autonomous therapy. *Nature Nanotechnology*, 18(2), 120–129. <https://doi.org/10.1038/s41565-023-01320-1>
32. Chen, X., Xu, C., Wang, Y., & Zhu, Y. (2022). Advances in intelligent microrobotics for precision biomedicine. *Advanced Intelligent Systems*, 4(4), 2100200. <https://doi.org/10.1002/aisy.202100200>
33. Nelson, B. J., Kaliakatsos, I. K., & Abbott, J. J. (2010). Microrobots for minimally invasive medicine. *Annual Review of Biomedical Engineering*, 12, 55–85. <https://doi.org/10.1146/annurev-bioeng-010510-103409>
34. Cheng, R., Meng, F., Ma, S., Xu, Y., & Zhong, Z. (2021). Self-powered nanobots for biomedical applications: Current challenges and future prospects. *Nano Energy*, 80, 105537. <https://doi.org/10.1016/j.nanoen.2020.105537>

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Conflict of Interest

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