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## Adaptive Federated Learning for Privacy-Preserving Personalized Healthcare

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### ABSTRACT

The proliferation of wearable and smart medical devices has enabled personalized healthcare by continuously collecting real-time physiological data. However, transmitting sensitive health data to centralized servers poses significant privacy risks. Federated Learning (FL) has emerged as a promising paradigm to train machine learning models across distributed devices without transferring raw data. This paper proposes an adaptive federated learning approach tailored for personalized healthcare applications. By integrating differential privacy, client importance weighting, and personalized model updates, the system addresses critical challenges such as data heterogeneity, communication efficiency, and model generalization. Experiments conducted on the MIMIC-III and ECG5000 datasets demonstrate superior performance of the proposed method in terms of accuracy, privacy, and communication cost.

\*Index Terms—\*Federated learning, personalized healthcare, machine learning, differential privacy, edge computing.

### I. INTRODUCTION

Healthcare is undergoing a digital transformation driven by advancements in wearable sensors and AI. Continuous data collection from individual users opens new avenues for personalized treatment and preventive diagnostics. However, centralizing this sensitive health data for training machine learning models introduces privacy concerns and regulatory constraints (e.g., HIPAA, GDPR).

Federated Learning (FL) is an emerging paradigm where models are trained collaboratively across multiple devices without sharing the raw data. While FL mitigates privacy issues, it faces challenges including data non-IIDness (non-independent and identically distributed), high communication cost, and personalization needs. This paper presents a novel adaptive FL framework for personalized healthcare, emphasizing:

Differential privacy-preserving updates.

Client-weighted model aggregation.

Local fine-tuning for personalization.

### II. RELATED WORK

FL was first introduced by Google in the context of keyboard prediction, and has since expanded into healthcare. Existing work includes FedAvg, a simple averaging method for model updates, and FedProx, which addresses client heterogeneity. However, many FL algorithms still assume IID data distribution and lack personalization support.

Recent works like Per-FedAvg and pFedMe have attempted to introduce personalized FL mechanisms, but they often suffer from increased computation or privacy trade-offs. Our approach builds on these foundations by introducing adaptive components for better healthcare model training.

### III. METHODOLOGY

#### A. Framework Overview

The system consists of a central server and multiple edge clients (wearable devices). Each client trains a local model on its data and shares only encrypted gradients. The central server performs adaptive aggregation using three core components:

Client Weighting: Clients are scored based on data volume, variance, and update frequency.

Differential Privacy (DP): Gaussian noise is added to gradients to protect sensitive patterns.

Personalized Fine-tuning: Each client receives a global model and fine-tunes locally using transfer learning.

#### B. Adaptive Aggregation

Let  $\mathbf{w}_i$  be the model parameters from client  $i$ , and  $\alpha_i$  the corresponding importance weight. The aggregated model is:

$$\mathbf{w} = \sum_{i=1}^N \alpha_i \mathbf{w}_i + \mathcal{N}(\mathbf{0}, \sigma^2)$$

#### C. Privacy Guarantee

We employ  $(\epsilon, \delta)$ -differential privacy using Gaussian Mechanism, ensuring that individual records cannot be reconstructed from gradients even with access to model parameters.

## IV. EXPERIMENTS

#### A. Datasets

**MIMIC-III**: A large dataset of ICU patients with time-series features.

**ECG5000**: Contains ECG recordings labeled as normal or abnormal.

#### B. Metrics

We evaluate:

- Accuracy of prediction tasks (e.g., disease classification).
- Communication cost per round.
- Privacy loss measured via  $\epsilon$ .

#### C. Baseline Models

- FedAvg
- FedProx
- Per-FedAvg
- Local-only training

#### D. Results

Mode 1	Accuracy (ECG)	Accuracy (MIMIC)	Privacy	Comm. Cost
Local only	78.2%	75.9%	$\infty$	Low
FedAvg	85.1%	81.4%	3.2	Medium
Per-FedAvg	86.5%	82.0%	2.8	High
Proposed	88.3%	84.7%	1.9	Low

The proposed approach improves accuracy by ~3% over FedAvg while reducing the privacy leakage by 40%.

## V. CONCLUSION

This paper presents an adaptive federated learning approach optimized for personalized healthcare applications. The method combines privacy preservation, communication efficiency, and personalization, making it suitable for real-world deployment. Future work will investigate multi-modal data integration and on-device federated learning using neuromorphic hardware.

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