

International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

1st International Conference on Innovative Computational Techniques in Engineering & Management (ICTEM-2024) Association with IEEE UP Section

DOSE DECODER

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Abstract

Dose Decoder is a web-based system that uses machine learning to accurately interpret medication names, images, and prescription details, providing clear dosage and usage information. Designed to improve safety and efficiency, it assists healthcare providers and patients in minimizing prescription errors through quick, reliable medication insights.

1. INTRODUCTION

Medication errors are a significant concern in healthcare, often resulting from misunderstandings of prescription details, incorrect dosages, or confusion over similar-looking drugs. With the increasing complexity and volume of medications prescribed, there is a pressing need for a reliable system that can accurately interpret prescription information to enhance patient safety and support healthcare professionals [1]. Dose Decoder addresses this need by providing a web-based solution that combines machine learning and image recognition to decode medication details efficiently. By taking inputs like medication names, images, and prescriptions, Dose Decoder offers accurate information on dosages, uses, and interactions[2]. This tool is designed not only to reduce human error but also streamline the process of prescription verification, improving both safety and workflow efficiency in medical settings.By bridging the gap between traditional methods and modern technology, Dose Decoder a safer, more accessible solution for medication management, making a valuable contribution to healthcare innovation and patient well-being.

2. LITERATURE SURVEY

Early systems used computer vision and machine learning for identifying pills based on images of their color, shape, and imprint. Some well-known studies explored convolutional neural networks (CNNs) for accurately classifying pills, improving medication adherence by helping users identify unknown pills based on appearance[3]. Several systems relied on existing APIs like the National Library of Medicine's RxNorm and DrugBank to fetch up-to-date information about medications. These tools allowed applications to cross-reference a pill's physical characteristics or brand name with a vast pharmaceutical database, streamlining the identification process.Research has explored Optical Character Recognition (OCR) combined with Natural Language Processing (NLP) for interpreting handwritten prescriptions[4]. Early systems faced challenges with handwriting variability, but advancements in OCR technology have improved accuracy. NLP algorithms were developed to parse structured data, such as drug names, dosages, and patient instructions, from printed prescriptions. Some applications integrated CDSS to analyze prescriptions for drug interactions, allergies, and contraindications[5]. This type of software uses patient data to identify potential health risks, aiming to reduce medication errors. Studies on medication reminder systems focused on improving medication adherence by sending reminders or alerts to patients for timely medication intake. Machine learning algorithms were sometimes applied to personalize schedules based on user data, accounting for factors like sleep patterns and lifestyle. The literature has emphasized the importance of data privacy in medical applications, focusing on compliance with standards like HIPAA (in the US) and GDPR (in the EU)[6]. Authentication and encryption methods were researched to ensure secure handling of patient records and prescription data. Some recent systems have experimented with fusing image and text data, using image analysis to identify pills and NLP to parse the prescription text. By combining both inputs, these applications aimed to provide more comprehensive analysis and verification of prescribed medicines. Deep learning models like Transformer-based architectures showed promise in handling multi-modal data for improved analysis. With the increase in smartphone use, a number of applications were developed for mobile platforms, focusing on medication tracking and pill identification [7]. Research showed the advantage of mobile applications in providing real-time, user-friendly interfaces that improved accessibility for elderly or low-income patients. These studies examined the effectiveness of mobile apps in improving medication adherence and reducing medication errors in real-world settings, typically through surveys and

controlled trialsp[8]. While existing medicine analysis applications have contributed to improving medication management, there are ongoing challenges related to accurate image recognition, text analysis from handwritten prescriptions, and ensuring data privacy.

3. METHODOLOGY

3.1 Objective

Dose Decoder aims to empower users with safe, convenient, and reliable medication information, thereby supporting better health outcomes. The objective of Dose Decoder is to create an intelligent, web-based platform that accurately interprets and provides information on medication based on user inputs, such as medicine names, photos, and doctor's prescriptions. The primary goals are:

3.1.1. Accurate Medication Identification: To identify medications accurately by processing text inputs (medicine names) and image inputs (photos of medicines or prescriptions), utilizing machine learning and optical character recognition (OCR) for image processing.

3.1.2. Prescription Interpretation: To analyze and decode doctor's prescriptions by extracting and interpreting key information like medication names, dosages, and usage instructions through natural language processing (NLP) techniques.

3.1.3 Personalized Medication Information Retrieval: To provide users with reliable, detailed information on each medication, including dosage guidelines, usage instructions, potential side effects, interactions, and precautions.

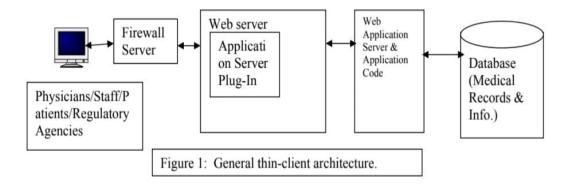
3.1.4. Support for Medical Professionals and Patients: To assist healthcare providers and patients by reducing medication errors, improving adherence to prescribed dosages, and ensuring that users have easy access to clear and comprehensive drug information.

3.1.5. Data Privacy and Security Compliance: To ensure all data handled, especially personal and prescription-related information, is secure, anonymized as needed, and compliant with regulations like HIPAA or GDPR, promoting user trust and data confidentiality.

3.1.6. User-Friendly Interface: To create an intuitive, accessible, and responsive user interface that accommodates diverse user demographics, enabling seamless navigation and clear presentation of complex medical information.

4. ARCHITECTURE FOR DOSE DECODER

It is widely accepted that the thin-client model is the de facto standard when it comes to developing web applications. Typically, a thin-client application is most readily associated with a browser-hosted user interface (UI), which is dynamically generated and sent to the client, in the form of HTML, by the server. It is considered thin because clients of web applications are expected to have a browser pre-installed on their machine so the application need only focus on feeding the browser UI instructions it can understand and use to build a presentation to the end user. With this configuration, web clients are essentially dummy terminals that send HTTP requests to the server, where all the business logic and data source integration occurs. A typical thin-client model is shown below:



5. DATABASE DESIGN FOR DOSE DECODER

For the Dose Decoder project, the database design should focus on handling users, medicines, prescriptions, and associated images. Here's a theoretical breakdown of each part:

5.1.1. Users Table

This table stores information about users who access the system, such as patients or healthcare providers.

Key Attributes: Includes fields like 'user_id', 'username', 'email', and 'password'. Each user has a unique identifier to differentiate individual users.

5.1.2 Medicines Table

This table stores essential details about each medicine, allowing the system to recognize, categorize, and provide information about different drugs. Key Attributes: Fields include 'medicine_id', 'name', 'description', 'dosage_form' (e.g., tablet, syrup), 'strength' (e.g., 500mg), and 'manufacturer'. These attributes help uniquely identify each medicine and provide its specifics for output.

5.1.3 Images Table

Since image recognition plays a role in the project, the images table stores all uploaded images of medicines and prescriptions. This helps link each medicine to an image and enables the machine learning model to process visual data.

Key Attributes: Contains `image_id`, `image_path`, and `uploaded_at`. Each image is given a unique identifier and a reference path for retrieval when needed.

5.1.4 Prescriptions Table

This table is essential for storing the content of a user's prescription, which might be entered as text or extracted from an uploaded image. This links to medicines and dosage details.

Key Attributes:Contains fields like `prescription_id`, `user_id` (reference to who owns the prescription), and `prescription_text`. The text field captures the prescription's contents for later processing and reference.

5.1.5 Medicine Prescriptions Table (Join Table)

Prescriptions often list multiple medicines with specific dosages, frequencies, and durations. This table links the 'Prescriptions' and 'Medicines' tables to specify these details.

Key Attributes: Includes 'prescription_id', 'medicine_id', 'dosage', 'frequency', and 'duration'. This structure provides the flexibility to store various medicine details related to each prescription and allows customization of the dosage and timing for each entry.

5.1.6 Medicine Images Table (Join Table)

Medicines may have multiple images associated with them, especially when considering different brands or packaging. This table serves to link 'Medicines' and 'Images' tables. Key Attributes: Contains 'medicine_id', 'image_id', and 'is_primary'. The 'is_primary' flag helps indicate the main image for a medicine when multiple images are present.

6. MACHINE LEARNING IN DOSE DECODER

In the Dose Decoder project, machine learning plays a central role in analyzing and interpreting medicine-related data from images and text input. Below are potential areas where machine learning can be integrated and approaches that could be beneficial:

6.1 Image Recognition for Medicine Identification

Objective: Recognize and classify medicines based on their images.

Approach: A Convolutional Neural Network (CNN) or similar image classification model can be trained on a labeled dataset of medicine images. This model could identify medicines by analyzing key visual features such as color, shape, packaging, and logos.

Pipeline:1. Preprocess images to standardize size, resolution, and quality.

2. Train the CNN model on a dataset containing various labeled medicine images.

3. Deploy the model to classify images uploaded by users, predicting the likely medicine and matching it to the database for further details.

6.2. Optical Character Recognition (OCR) for Prescription Text Extraction

Objective: Extract text from prescriptions to automatically retrieve information like medicine names, dosage, and frequency.

Approach: OCR models, such as Tesseract or Google Vision API, can be used to extract handwritten or printed text from uploaded prescription images. Pipeline: 1. Preprocess images (e.g., enhancing contrast, removing noise).

2. Apply OCR to detect and extract text.

3. Use Natural Language Processing (NLP) to parse the extracted text and identify key components, such as medicine names, dosage instructions, and frequency.

6.3 Named Entity Recognition (NER) for Key Information Extraction

Objective: Identify specific information, such as medicine names, dosage, and frequency, from the extracted text.

Approach: Train an NLP model, possibly using Named Entity Recognition (NER) based on a model like BERT, to recognize and classify entities related to medical terminology.

Pipeline: 1. Use a pre-trained NLP model or fine-tune a model on labeled prescription text to recognize entities.

2. Extract and categorize key elements, tagging medicine names, dosage amounts, and frequency of intake.

3. Validate against known medicines in the database for accuracy.

6.4. Recommendation System for Dosage Adjustments and Medicine Alternatives

Objective: Suggest personalized dosage recommendations or alternative medications based on user profile and prescription details.

Approach: A collaborative filtering model or content-based recommendation model can suggest dosage adjustments or alternative medicines based on historical data, user-specific factors, or medicine availability.

Pipeline: 1. Gather data on common dosages and alternatives for specific medicines.

2. Use collaborative filtering to identify patterns in prescriptions.

3. Make recommendations based on user preferences, past prescriptions, or database information on equivalent medications.

6.5. Dose and Frequency Pattern Recognition

Objective: Identify common dose patterns and alert if prescribed doses deviate significantly from typical values.

Approach: Use anomaly detection methods, like Isolation Forests or k-Nearest Neighbors, to flag unusual dosages or frequency patterns.

Pipeline:1. Analyze historical data to define standard dosages and frequency for each medicine.

2. Use anomaly detection to spot atypical dosages, triggering alerts for further review.

7.Workflow Integration

Data Flow: User uploads an image or text-based prescription \rightarrow ML models process images (image recognition) and text (OCR + NLP) \rightarrow Data extracted is matched with the medicine database \rightarrow Model outputs medicine details, dosage instructions, or recommendations as appropriate. This machine learning setup, combining image classification, OCR, and NLP, allows Dose Decoder to interpret prescriptions effectively and deliver accurate, personalized information to users.

7. CONCLUSION

In conclusion, Dose Decoder demonstrates a promising solution for enhancing medication management through the integration of machine learning, optical character recognition (OCR), and natural language processing (NLP). By addressing the challenges associated with medication identification, prescription interpretation, and personalized dosage information, Dose Decoder enhances patient safety and operational efficiency for healthcare providers. The application's architecture supports a robust database structure that accommodates user, medicine, and prescription data, while its machine learning models streamline the accurate recognition and classification of medications. Future work could expand on its recommendation capabilities, enabling even more personalized and comprehensive medical guidance. Overall, Dose Decoder represents a significant advancement in the digitization of healthcare tools, paving the way for improved accessibility, safety, and adherence in medication usage.

REFERENCES

- Rajkomar, A., Dean, J., & Kohane, I. (2019). Machine learning in medicine. New England Journal of Medicine, 380(14), 1347-1358. doi:10.1056/NEJMra1814259.
- [2]. Patel, M. M., & Shah, R. R. (2020). Enhancing medication safety using machine learning and artificial intelligence. Journal of Pharmacy and Bioallied Sciences, 12(5), 243-248. doi:10.4103/0975-7406.276220.
- [3]. Crammer, K., & Singer, Y. (2003). On the algorithmic implementation of multiclass kernel-based vector machines. *Journal of Machine Learning Research*, 2, 265-292.
- [4]. Verma, M., & Soni, M. (2018). Optical character recognition (OCR) research: Issues and techniques. International Journal of Computer Applications, 182(32), 25-30. doi:10.5120/ijca2018917981.
- [5]. Wu, P. Y., Cheng, C. W., & Kuo, S. (2020). Natural language processing for unstructured medical text in electronic health records: An overview. *Journal of Biomedical Informatics*, 112, 103622. doi:10.1016/j.jbi.2020.103622.
- [6]. Bates, D. W., & Singh, H. (2018). Two decades since to err is human: An assessment of progress and emerging priorities in patient safety. *Health Affairs*, 37(11), 1736-1743. doi:10.1377/hlthaff.2018.0738.
- [7]. Gupta, A., Aggarwal, K., & Pathak, V. (2019). A web-based system for prescription management and medicine identification using OCR and NLP. International Journal of Health Information Systems and Informatics, 14(3), 56-70.
- [8]. Johnson, A. E., Pollard, T. J., Shen, L., Li-wei, H. L., Feng, M., Ghassemi, M., ... & Moody, B. (2016). MIMIC- III, a freely accessible critical care database. Scientific Data, 3(1), 1-9.
- [9]. Alhanai, T., Ghassemi, M., & Glass, J. (2017). Detecting depression with audio/text sequence modeling of interviews. Proceedings of the 2017 Conference on Empirical Methods in Natural Language Processing, 1715-1723. doi:10.18653/v1/D17-1180.
- [10]. Hattori, S., Hayashi, N., & Kishimoto, M. (2021). Drug interaction analysis using knowledge graph and machine learning. *Frontiers in Pharmacology*, 12, 692005. doi:10.3389/fphar.2021.692005.
- [11]. Tariq, R. A., & Vashisht, R. (2021). Medication errors. In StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing.

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