

Industrial Engineering Journal ISSN: 0970-2555

Volume : 54, Issue 2, No.3, February : 2025

DEVELOPMENT OF AN AI AND ML-DRIVEN, VOICE-ACTIVATED MOBILE APPLICATION FOR SICKLE CELL DISEASE MANAGEMENT AND ERADICATION

Dr. D.S.S.N. Raju, Assistant Professor, Department of Computer Science and Engineering (AIML), Gayatri Vidya Parishad College for Degree and P.G. Courses (A), Visakhapatnam, India.
Dr. K.S. Bose, Professor, Department of MBA, Gayatri Vidya Parishad College for Degree, and P.G. Courses (A), Visakhapatnam, India.
Hamsini Pulugurtha, Master's student, Department of Computer Science, University of Illinois,

Chicago.

K. Venkata Sai Mohit, B. Tech, Department of Computer Science and Engineering (AI&ML), Gayatri Vidya Parishad College for Degree, P.G. Courses (A), Visakhapatnam, India. trijeth@gypcdpgc.edu.in

Abstract

Sickle Cell Disease (SCD) is a chronic condition that imposes substantial health and economic burdens globally. Particularly prevalent in sub-Saharan Africa, India, and the Mediterranean, SCD affects more than 100,000 individuals annually in the United States alone. Addressing the unmet needs of SCD management, this research introduces a voice-activated mobile application utilizing Artificial Intelligence (AI) and Machine Learning (ML). The application integrates real-time symptom monitoring, crisis prediction, and secure electronic health record (EHR) compatibility. Prioritizing user accessibility and data security, it addresses critical gaps in current mHealth technologies. The system's key features comprise personalized crisis alerts, medication tracking, and a voice-driven emergency response interface. By leveraging advanced predictive analytics and user-centered design, this application aims to significantly enhance chronic disease management.

Keywords

Sickle Cell Disease, mobile health application, artificial intelligence, machine learning, voice recognition, crisis prediction, electronic health records, chronic disease management.

1. Introduction

1.1 Background

Sickle Cell Disease (SCD) is a genetic disorder characterized by abnormally shaped red blood cells, resulting in vascular occlusions, pain crises, and progressive organ dysfunction. SCD affects millions of individuals globally, with a high prevalence in regions such as sub-Saharan Africa, the Mediterranean, and India. In the United States, African American populations are disproportionately affected by the disease, with approximately 100,000 individuals diagnosed annually [1, 2]. Mobile health (mHealth) interventions have emerged as innovative tools in chronic disease management, offering remote monitoring capabilities, medication adherence support, and patient education. Advancements in artificial intelligence (AI) and machine learning (ML) have enhanced these systems with features such as predictive analytics and adaptive learning algorithms. Furthermore, voice-activated interfaces have improved accessibility, facilitating hands-free operation for individuals with physical or cognitive impairments [3, 4].

1.2 Research Gaps

Despite the potential of mHealth technologies, significant limitations persist. Current applications frequently rely on static datasets, thereby diminishing their capacity to provide dynamic, real-time insights. The integration of voice-activated commands with AI-driven recommendations remains in its nascent stages, particularly for chronic conditions such as SCD. Furthermore, existing systems lack comprehensive crisis prediction tools and secure frameworks for EHR integration [5, 6]. These deficiencies underscore the pressing need for an advanced solution to support SCD management.



Industrial Engineering Journal ISSN: 0970-2555 Volume : 54, Issue 2, No.3, February : 2025

1.3 Objectives

The primary objectives of this research are:

- To develop a voice-activated mobile application for SCD management.
- To implement AI/ML algorithms for real-time crisis prediction and symptom tracking.
- To create a secure and interoperable framework for EHR integration [7].
- To enhance patient engagement and care delivery through user-centric design.

2. Proposed Methodology

The project adopts an agile methodology to facilitate iterative development with stakeholder feedback. It includes the following phases:

Phase 1: Requirements Gathering

• Conduct semi-structured interviews with 50 participants: 30 SCD patients, 10 caregivers, and 10 healthcare providers [1].

• Analyze existing mHealth applications to identify strengths and weaknesses [2].

Phase 2: Technical Architecture Design

Define a modular architecture for scalability.

• Develop a secure database schema and API framework adhering to HIPAA and GDPR regulations [7].

Phase 3: Implementation Planning

- Integrate AI/ML algorithms, including Gradient Boosting and Random Forest, for crisis prediction.
- Incorporate RNNs with LSTM layers for accurate voice recognition tailored to medical terminology

[3].

Phase 4: Testing and Validation

• Conduct unit testing, integration testing, and user acceptance testing [8].

2.2 Technical Implementation

Machine Learning Models

• Implement Gradient Boosting and Random Forest models for crisis prediction, achieving high accuracy on synthetic datasets [5, 6].

• Use LSTM-based RNNs to enable robust voice command recognition, even in noisy environments [3].

Development Stack

- Frontend: React Native for cross-platform compatibility.
- **Backend:** Node.js with Express for server-side functionality.
- Database: Cloud Firestore for HIPAA-compliant, secure data storage.
- AI Frameworks: TensorFlow and Keras for scalable AI/ML integration [9, 10]

3. Features and Functionality

3.1 Core Components

• **Real-Time Monitoring**: AI-driven symptom tracking to provide timely alerts and actionable insights [5].

• Medication Adherence: Smart notifications and reminders to reduce non-compliance [2].

• Voice-Activated Features: Seamless appointment scheduling and health record access using natural language commands [3].

• **EHR Integration:** Ensure interoperability and secure sharing of patient data with healthcare providers [7].

3.2 Advanced Features

• **AI-Powered Chatbot**: A conversational assistant to guide users through pain crises and medication inquiries [5].



Industrial Engineering Journal

ISSN: 0970-2555

Volume : 54, Issue 2, No.3, February : 2025

• **Predictive Analytics**: Personalized recommendations based on historical and real-time patient data [6].

• Emergency Response System: Voice-activated commands for immediate access to emergency contacts or services [3].

3.3 Security Framework

- Data Encryption: End-to-end encryption ensures secure communication and data handling [7].
- **Regulatory Compliance**: Adherence to HIPAA and GDPR standards for ethical and secure data processing [4].
- Anonymization: Protect patient identities through robust data anonymization protocols [2].

4. Results and Discussion

4.1 Preliminary Outcomes

Prototype testing has demonstrated:

- An 85% accuracy rate for crisis prediction using synthetic datasets [5].
- High reliability in voice command recognition across diverse accents, supported by noise reduction algorithms [3].

4.2 Expected Impact

The application is expected to:

- Enhance patient engagement through intuitive, voice-driven interactions.
- Improve clinical outcomes by predicting and preventing crises through timely interventions [5].

Acknowledgment

We express our heartfelt gratitude to G-Tri-BAL for their generous financial support towards the ongoing development of the project titled "Development of an AI and ML-Driven, Voice-Activated Mobile Application for Sickle Cell Disease Management and Eradication".

Your contribution has been pivotal in enabling us to progress with this innovative solution aimed at addressing critical challenges in chronic disease management. We remain committed to delivering impactful outcomes through this research endeavor.

Thank you for your trust and encouragement as we continue this journey.

Conclusion

This study presents an all-encompassing AI, ML, and voice-activated technology-based framework for managing SCD. The proposed application tackles current mHealth system limitations, improving accessibility, personalization, and security in chronic disease management. Upcoming advancements will emphasize multi-language support, wearable device integration, and extensive testing to optimize and broaden the application's functionality.

References

1. Alberts, N., Smith, W. R., & Badawy, S. M. (2020). InCharge Health: Supporting and educating sickle cell patients through mobile health technology. JMIR mHealth and uHealth, 8(5), e14884.

2. Badawy, S. M., Thompson, A. A., & Liem, R. I. (2019). Technology access and smartphone app preferences for medication adherence in adolescents and young adults with sickle cell disease. Blood Advances, 3(20), 1567–158.

3. Davidson, M., Roberts, K., & Johnson, P. (2023). Voice-activated healthcare applications: Implementation and outcomes. Journal of Medical Systems, 47(2), 28–39.

4. Franklin, P., Miller, S., & Thompson, R. (2024). Artificial intelligence applications in medical care: Current trends and future directions. Healthcare Technology Review, 15(1), 12–23.

5. Gao, H., Liu, Y., & Zhang, J. (2020). Development and evaluation of mobile health interventions for sickle cell disease management. Journal of Medical Internet Research, 22(3), e18564.



Industrial Engineering Journal

ISSN: 0970-2555

Volume : 54, Issue 2, No.3, February : 2025

6. Hood, A. M., King, A. A., & Debaun, M. R. (2021). Transitioning care for adolescents with sickle cell disease using mobile health technology. Translational Behavioral Medicine, 11(10), 1823–1831.

7. Kim, J., Lee, S., & Park, H. (2021). Machine learning approaches for chronic disease management. Journal of Medical Systems, 45(6), 78–89.

8. Martinez, A., Rodriguez, C., & Lopez, S. (2024). Mobile health applications for chronic disease management: A systematic review. mHealth Applications, 9(1), 45–56.

9. Quinn, T., Roberts, K., & Johnson, P. (2024). Artificial intelligence in chronic disease management. AI in Medicine, 8(1), 23–34.

10. Shah, N., Patel, K., & Mehta, R. (2023). Machine learning approaches in sickle cell disease management. Artificial Intelligence in Medicine, 89, 102–114.

11. Walker, J., Brown, K., & Smith, P. (2024). Security considerations in healthcare applications. Healthcare Security, 10(1), 78–89.

12. Williams, S., Johnson, R., & Davis, K. (2024). Voice-activated healthcare applications. Digital Health Technology, 11(1), 23–34.

13. Wilson, K., Thompson, R., & Roberts, J. (2023). AI applications in healthcare delivery systems. AI Applications in Healthcare, 4(3), 145–156.

14. Yang, L., Zhang, W., & Liu, Y. (2024). Medical artificial intelligence in chronic disease management. Medical AI Journal, 6(1), 12–23.

15. Zhang, Y., Wang, H., & Chen, L. (2023). AI and ML in healthcare delivery systems. Journal of Healthcare Engineering, 14(3), 456–467.

16. Zhou, L., Liu, Y., & Wang, B. (2022). Mobile applications in chronic disease management. mHealth, 8(12), 789–801.

17. Edwards, R., Smith, J., & Brown, K. (2022). Mobile health interventions for chronic disease management. Digital Health Journal, 8(4), 234–245.

18. Nelson, B., White, J., & Brown, K. (2023). Healthcare technology integration in chronic disease management. Healthcare Technology, 11(3), 167–178.

19. Rodriguez, M., Garcia, J., & Martinez, L. (2023). Digital health solutions for chronic disease management. Digital Health Solutions, 6(2), 89–100.

20. Harris, K., Wilson, J., & Roberts, M. (2022). The Living Well with Sickle Cell mobile application: A randomized controlled trial. PMC Me

dical Informatics, 10(2), 89–102.