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REVIEW ARTICLE

Revolutionising Clinical Trials with Artificial Intelligence: A Paradigm Shift in Drug Development

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ABSTRACT

AI is revolutionising clinical trials by improving efficiency, accuracy, and decision-making throughout the study process. Traditional clinical trials are frequently time-consuming, expensive, and constrained by factors such as patient recruiting delays, protocol complexity, data management concerns, and high dropout rates. To solve these limitations, AI technologies such as machine learning, natural language processing, predictive analytics, and deep learning are increasingly being integrated into clinical trials. AI-powered solutions offer quick patient identification and recruitment by analysing electronic health records, real-world data, and genomic databases. Predictive modelling enhances trial design by identifying the best outcomes, stratifying patient populations, and projecting potential dangers. During trial execution, AI improves real-time data monitoring, anomaly detection, and adverse event prediction, resulting in improved patient safety and regulatory compliance. Furthermore, decentralised and virtual trials benefit from AI-powered wearable devices and remote monitoring systems, which provide continuous data collection and increased participant involvement. It will be necessary to fully grasp the advantages of AI in clinical research. Despite its benefits, AI deployment in clinical trials poses problems such as data privacy concerns, algorithmic bias, regulatory uncertainties, and the necessity for uniform validation methods. Ethical issues and openness in AI models are essential for preserving confidence and achieving equitable healthcare results. Overall, AI has the potential to significantly accelerate medication development, cut costs, and improve clinical trial success rates. Continued collaboration between researchers, regulatory agencies, technology developers, and healthcare institutions will be required to fully exploit the benefits of AI in clinical research.

Keywords: AI, Clinical Trials, Machine Learning, Predictive Analytics, Patient Recruitment, Real-World Data, Deep Learning, Natural Language Processing (NLP), Drug Development, Digital Health, Decentralised Trials, Data Monitoring, Healthcare Innovation

INTRODUCTION

Artificial intelligence (AI) is the emulation of human intellectual processes by computer systems, such as learning, reasoning, problem solving, and decision making¹. In the healthcare sector, AI has emerged as a transformational tool, notably in clinical trials. Clinical trials are critical for determining the safety and efficacy of novel medications and medical equipment. However, traditional clinical trial processes are frequently complex, time-consuming, costly, and prone to operational inefficiencies².

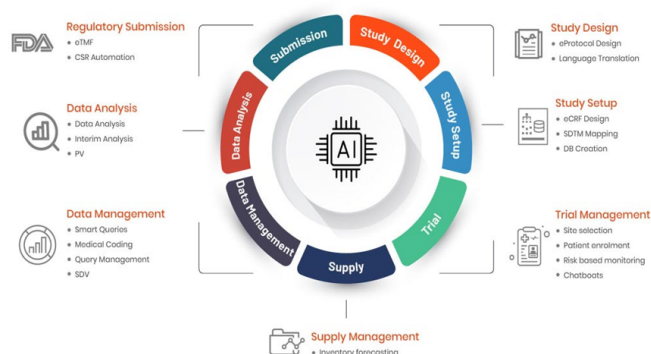
AI technologies, including machine learning (ML), deep learning, natural language processing (NLP), and predictive analytics, are increasingly being used in various stages of clinical trials. These tools allow researchers to analyse massive amounts of structured and unstructured data, such as electronic health records (EHRs), genomic data, imaging data, and real-world evidence. AI can use advanced algorithms to more efficiently identify eligible participants, refine study designs, forecast patient outcomes, and improve data monitoring processes.

AI technology has made substantial contributions to clinical trials by improving patient recruitment and retention, which are two of the most common causes of trial delays. AI-powered systems can quickly screen potential participants based on eligibility requirements and estimate dropout risks³. Additionally, AI supports adaptive trial designs, real-time safety monitoring, and decentralised clinical trials through wearable devices and remote patient monitoring technologies.

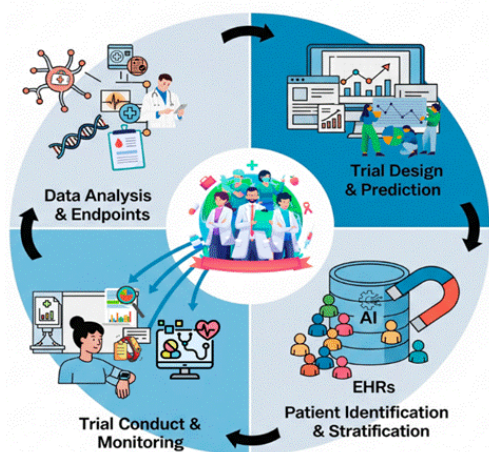
Despite its high promise, implementing AI in clinical trials necessitates careful consideration of data protection, regulatory compliance, ethical standards, and algorithm openness. As regulatory authorities and research institutions attempt to build frameworks for AI validation and governance, AI is likely to play an increasingly important role in speeding up drug development and enhancing clinical research outcomes.

To summarise, artificial intelligence is a strong tool that improves clinical trial efficiency, precision, and innovation, opening the way for more personalised and data-driven healthcare solutions.

AI & ML in Clinical Trials



The AI-Powered Clinical Trial Lifecycle



OBJECTIVES

AI in clinical trials aims to improve efficiency, accuracy, safety, and cost-effectiveness. The main objectives are listed below:

Improve patient recruitment and selection⁴

- Used electronic health records to quickly identify eligible participants
- Matching patients to appropriate studies using inclusion and exclusion criteria.
- Increasing diversity and representation in clinical studies.

Optimise clinical trial design

- Use predictive modelling to optimise sample size and endpoints.
- Enable adaptive trial designs that adjust based on interim outcomes.
- To limit the probability of failure, simulate trial outcomes before implementation.

Enhance Data Collection and Management

- Automate data entry, cleaning, and validation processes
- Analyse enormous amounts of structured and unstructured data efficiently.
- Detect anomalies and discrepancies in real time.

Improve patient monitoring and safety

- Real-time monitoring of undesirable events with AI algorithms.
- Identify potential safety issues before they become critical.
- Use wearable gadgets for continual remote monitoring.

Reduce the time and cost of drug development

- Streamline operations to speed up trial schedules.
- Reduce manual workload and operational inefficiencies.
- Increase clinical trial success rates.

Support regulatory compliance and reporting⁵

- Ensure clear documentation and data transparency.
- Help generate regulatory reports efficiently.
- Ensure consistent data quality during approval processes.

Enable personalised and precise medicine

- Identify patient subgroups with improved treatment outcomes.

- Support biomarker-based research designs.
- Improve treatment outcomes with tailored therapies.

CLINICAL TRIALS GUIDELINES⁶

Clinical trial guidelines are regulations that govern the ethical conduct, safety, and scientific validity of human clinical research. These standards apply globally to testing novel medications, vaccines, and medical devices.

International Guidelines:

The most generally accepted global guidelines are: The International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH). It Provides ICH-GCP (Good Clinical Practice) recommendations. Ensures trial participant safety and data dependability.

ICH-GCP Guidelines include:

ICHE6-GCP: In order to ensure ongoing relevance in the face of continuous technological and methodological improvements, ICH E6 incorporates novel requirements intended to apply across a variety of clinical trial types and situations⁷. This guideline offers a new vocabulary to support technological, operational, and clinical trial design advancements. Fit-for-purpose solutions are promoted by encouraging a risk-based and balanced approach to clinical studies. Through clinical trial registration and result reporting, it promotes transparency and provides more assistance to improve the informed consent procedure.

ICHE6(R3)⁸ : The ICH E6 Good Clinical Practice (GCP) Guideline has a major influence on patients and trial participants and is extensively used by clinical trial researchers outside of ICH's membership and regional representation. The ICH Management Committee is making available a draft, work-in-progress version of the revised principles that are presently being developed by the ICH E6(R3) Expert Working Group (EWG) in recognition of the extensive and significant impact of ICH E6. To ensure ethical trial conduct, participant safety, and trustworthy clinical trial outcomes, the interdependent principles should be taken into account as a whole.

ICHE8: The goal of our in-depth course on ICH guideline E8 (R1) General Considerations for Clinical Studies is to provide you with a thorough understanding of the most recent guidelines for clinical research studies. This course covers every crucial component of the International Council for Harmonisation's (ICH) E8 guideline, which offers a thorough framework for the planning, execution, analysis, and reporting of clinical investigations⁹. Throughout the course, you will learn about the internationally recognised principles and practices in the design and conduct of clinical

studies that will facilitate data acceptance, as well as the revised main concepts and principles of ICH (E8).

ICHE3¹⁰ : This International Conference on Harmonisation (ICH) document makes recommendations on information that should be included in a core clinical study report of an individual study of any therapeutic, prophylactic, or diagnostic agent conducted in human subjects. The guideline is intended to assist sponsors in the development of a report that is complete, free from ambiguity, well-organised and easy to review.

PHASES OF CLINICAL TRIALS

There are typically four stages to clinical trials¹¹:

1. Phase Objective

Phase I: Test dose and safety in a small group of 20–100 individuals

Phase II: Assess side effects and efficacy

Phase III: Verify efficacy in sizable populations

Phase IV: Safety monitoring after marketing

2. Moral Principles

The sources of ethical values are:

- The Helsinki Declaration- developed by the World Medical Association, it emphasises human research ethics.

3. Authorities in Charge¹²

Clinical trials are regulated by agencies in many countries:

- The Central Drugs Standard Control Organisation (CDSCO) of India
- The Food and Drug Administration (FDA) of the United States
- Europe: The European Medicines Agency (EMA)

These organisations examine trial data, oversee safety, and authorise studies.

4. Important Clinical Trial Documents

Important records consist of:

- Protocol for clinical trials
- A brochure for investigators
- ICF, or informed consent form¹³
- Forms for case reports (CRF)

- Clinical study report (CSR)

Table 1: Important clinical steps

Country / Region	Regulatory Authority	Application Name	Steps to Apply	Key Documents Required
USA	Food and Drug Administration (FDA)	IND (Investigational New Drug Application)	1. Prepare IND dossier 2. Submit to the FDA 3. Wait 30 days review 4. Start trial if no hold	Protocol, IB, Preclinical data, CMC data, ICF
Europe (EU)	European Medicines Agency (EMA)	CTA (Clinical Trial Application)	1. Submit via CTIS portal 2. Ethics approval 3. Regulatory review 4. Trial approval	Protocol, IMPD, IB, ICF
India	Central Drugs Standard Control Organization (CDSCO)	Form CT-04 / CT-06	1. Apply through SUGAM portal 2. Ethics Committee approval 3. CDSCO review 4. Permission (CT-05)	Protocol, IB, ICF (regional), Preclinical data
UK	Medicines and Healthcare products Regulatory Agency (MHRA)	CTA	1. Submit via MHRA system 2. Ethics approval 3. Review 4. Authorization	Protocol, IB, ICF
Japan	Pharmaceuticals and Medical Devices Agency (PMDA)	CTN (Clinical Trial Notification)	1. Submit notification 2. 30-day waiting period 3. Start trial	Protocol, IB, Preclinical data
Australia	Therapeutic Goods Administration (TGA)	CTN / CTA	1. Ethics approval 2. Submit CTN/CTA 3. Acknowledge/Review 4. Start trial	Protocol, IB, ICF

CLINICAL TRIAL APPLICATION PROCESS ACROSS DIFFERENT COUNTRIES

United States (USA):

- **Regulatory Authority:** Food and Drug Administration (FDA)
- **Application Name:** Investigational New Drug (IND) Application
- **Steps to Apply:**
 1. Prepare IND dossier
 2. Submit to the FDA
 3. Wait for 30-day review period
 4. Start trial if no clinical hold is issued

Key Documents Required:

Protocol, Investigator's Brochure (IB), Preclinical data, Chemistry Manufacturing and Controls (CMC) data, Informed Consent Form (ICF)

Europe (EU):

- **Regulatory Authority:** European Medicines Agency (EMA)
- **Application Name:** Clinical Trial Application (CTA)
- **Steps to Apply:**
 1. Submit via Clinical Trials Information System (CTIS) portal
 2. Obtain Ethics Committee approval
 3. Undergo regulatory review
 4. Receive trial approval

- **Key Documents Required:**
Protocol, Investigational Medicinal Product Dossier (IMPD), IB, ICF

India:

- **Regulatory Authority:** Central Drugs Standard Control Organization (CDSCO)
- **Application Name:** Form CT-04 / CT-06
- **Steps to Apply:**
 1. Apply through SUGAM portal
 2. Obtain Ethics Committee approval
 3. CDSCO review
 4. Receive permission (CT-05)
- **Key Documents Required:**
Protocol, IB, ICF (regional languages), Preclinical data

United Kingdom (UK):

- **Regulatory Authority:** Medicines and Healthcare products Regulatory Agency (MHRA)
- **Application Name:** Clinical Trial Application (CTA)
- **Steps to Apply:**
 1. Submit via MHRA system
 2. Obtain Ethics approval
 3. Undergo review
 4. Receive authorization
- **Key Documents Required:**
Protocol, IB, ICF

Japan:

- **Regulatory Authority:** Pharmaceuticals and Medical Devices Agency (PMDA)
- **Application Name:** Clinical Trial Notification (CTN)
- **Steps to Apply:**
 1. Submit notification
 2. Wait for 30-day period
 3. Start trial
- **Key Documents Required:**
Protocol, IB, Preclinical data

Australia:

- **Regulatory Authority:** Therapeutic Goods Administration (TGA)
- **Application Name:** CTN / CTA
- **Steps to Apply:**
 1. Obtain Ethics approval
 2. Submit CTN/CTA
 3. Acknowledgement or review by TGA
 4. Start trial

- **Key Documents Required:**
Protocol, IB, ICF

Safety Observation

- Reporting of Adverse Events (AE)
- Reporting of Serious Adverse Events (SAEs)
- Institutional Review Board (IRB) and Ethics Committee oversight.

STAGES IN CLINICAL DEVELOPMENT

- AI Tools Used in Trial Design
- AI Tools Used in Patient Recruitment
- AI Tools Used in Trial Monitoring
- AI Tools Used in Data Management
- AI Tools Used in Safety Monitoring

Table 2: Tools Used in Trial Design¹⁴

AI Tool / Platform	Purpose in Trial Design
nQuery	Calculates sample size, statistical power, and adaptive trial designs for clinical studies.
Panacea	Uses large datasets to assist in trial design, eligibility criteria creation, and endpoint selection ¹⁵ .
TrialMatchAI	Matches patients to trials using machine learning and NLP, improving recruitment planning.
Oracle Clinical	Helps design case report forms, study protocols, and clinical data structures.
1000minds	Uses decision modelling to prioritise endpoints and treatment strategies in trial planning.

AI TOOLS AND PLATFORMS USED IN CLINICAL TRIAL DESIGN

nQuery

- **Purpose:**
Calculates sample size, statistical power, and supports adaptive trial design for clinical studies. It helps researchers ensure that trials are statistically valid and efficient.

Panacea

- **Purpose:**
Uses large datasets and artificial intelligence to assist in trial design, including creating eligibility criteria and selecting appropriate endpoints.

TrialMatchAI

- **Purpose:**
Matches patients to clinical trials using machine learning and natural language processing (NLP), improving recruitment planning and efficiency.

Oracle Clinical

- **Purpose:**
Helps design case report forms (CRFs), study protocols, and clinical data structures, ensuring proper data collection and management.

1000minds

- **Purpose:**
Uses decision modeling techniques to prioritize endpoints and treatment strategies during trial planning, aiding better decision-making.

Table 3: AI Tools Used in Patient Recruitment¹⁶

AI Tool	Purpose in Patient Recruitment
Deep 6 AI	Uses AI to scan electronic health records (EHRs) and quickly identify eligible patients for clinical trials.
IBM Watson for Clinical Trial Matching	Applies NLP to analyse patient medical records and match them with suitable clinical trials ¹⁷ .
TriNetX	Uses real-world patient data from hospitals to identify potential trial participants.
Antidote	An AI-powered system that connects patients with appropriate clinical trials based on health data.
Mendel.ai	Extracts clinical information from medical records ¹⁸ to find eligible trial participants.

AI Tools Used in Patient Recruitment:

Deep 6 AI: Deep 6 AI uses artificial intelligence to scan electronic health records (EHRs) and quickly identify eligible patients for clinical trials, significantly reducing the time required for recruitment.

IBM Watson for Clinical Trial Matching: This tool applies natural language processing (NLP) to analyze patient medical records and match them with suitable clinical trials, improving accuracy in patient selection.

TriNetX: TriNetX leverages real-world patient data from hospitals and healthcare organizations to identify and recruit potential participants for clinical trials.

Antidote: Antidote is an AI-powered platform that connects patients with appropriate clinical trials based on their health data, making it easier for patients to find relevant studies.

Mendel.ai: Mendel.ai extracts and structures clinical information from medical records to efficiently identify eligible participants for clinical trials.

Medidata Rave: Medidata Rave uses artificial intelligence and advanced analytics to support remote monitoring, risk-based monitoring, and real-time tracking of clinical trial data, helping ensure data quality and faster decision-making.

CluePoints: CluePoints applies statistical algorithms and AI to detect data anomalies, inconsistencies, and protocol deviations, improving the reliability and integrity of clinical trial data.

IBM Watson Health: IBM Watson Health analyzes clinical trial data to monitor patient safety and predict potential adverse events, enabling proactive risk management.

Saama Life Science Analytics Cloud: This platform provides AI-driven clinical data monitoring and automated quality checks, ensuring accuracy and compliance throughout the trial process.

Veeva Vault Clinical: Veeva Vault Clinical supports trial monitoring, document management, and regulatory compliance, streamlining clinical operations and improving oversight.

Table 4: AI Tools Used in Trial Monitoring

AI Tool / Platform	Purpose in Trial Monitoring
Medidata Rave ¹⁹	Uses AI and analytics for remote monitoring, risk-based monitoring, and real-time data tracking.
CluePoints	Uses statistical algorithms and AI to detect data anomalies and protocol deviations.
IBM Watson Health	Analyses clinical trial data to monitor patient safety and predict adverse events.
Saama Life Science Analytics Cloud	Provides AI-driven clinical data monitoring and automated quality ²⁰ checks.
Veeva Vault Clinical	Helps in trial monitoring, document management, and regulatory compliance.

Table 5: AI Tools Used in Data Management²¹

AI Tool / Platform	Purpose in Data Management
Medidata Rave	Collects and manages electronic clinical trial data and ensures data quality.
Oracle Clinical	Used for data capture, validation, and clinical data processing.
Veeva Vault Clinical	Manages clinical documents, trial data, and regulatory information.
OpenClinica	Provides AI-supported electronic data capture (EDC) and data management ²² .
Saama Life Science Analytics Cloud	Uses AI for data integration, cleaning, and advanced clinical data analytics.

MECHANISM FOR APPROVING CLINICAL TRIALS²⁴

Preparation of the Protocol → Ethics Committee Approval → CDSCO Submission → DCGI Review → CTRI Registration → Trial Commencement → Safety Monitoring

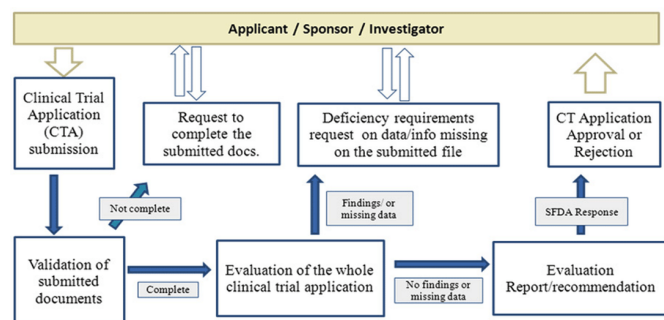


Table 6: AI Tools Used in Safety Monitoring²²

AI Tool / Platform	Purpose in Safety Monitoring
Oracle Argus Safety	Uses AI to detect, manage, and report adverse drug reactions (ADRs) during clinical trials.
VigiFlow	Supports the collection and analysis of safety reports for monitoring drug safety.
ArisGlobal LifeSphere Safety	An AI-based system used for automated case processing and signal detection.
IQVIA Smart Safety ²³	Uses AI to identify safety signals and predict adverse events from clinical data.
Medidata Detect	Uses machine learning to identify unusual safety patterns and data risks.

CASE STUDIES FOR AI IN CLINICAL TRIALS²⁶

1. Insilico Medicine – AI-Designed Drug (Rentosertib)

- **Company:** Insilico Medicine
- **Drug:** Rentosertib
- **Disease:** Idiopathic Pulmonary Fibrosis (IPF)

AI role

- Used generative AI to identify drug targets and design molecules.
- AI platforms generated potential drug compounds and selected the best candidate²⁷.

Results

- The AI-designed drug moved from discovery to human clinical trials in less than 30 months.

Table 7: AI tools are used in clinical trials²⁵

Clinical Trial Phase	Purpose of Phase	AI Technologies Used	Example AI Tools
Phase I	Test drug safety and determine the correct dosage in a small group of volunteers	Machine Learning, data monitoring	Medidata Clinical Cloud, Deep 6 AI
Phase II	Evaluate drug effectiveness and observe side effects	Predictive Analytics, data analysis	Tempus Platform, Saama Life Science Analytics Cloud
Phase III	Confirm effectiveness in large populations and monitor adverse reactions	Artificial Intelligence for patient recruitment and trial management	IBM Watson for Clinical Trial Matching, Oracle Clinical One, TriNetX
Phase IV	Post-marketing surveillance to monitor long-term safety and effectiveness	Natural Language Processing, real-world data analysis	Antidote Match, Unlearn AI

- Phase II clinical trial results showed good safety and promising improvement in lung function.

Significance

- One of the first AI-designed drugs tested in humans.

2. Deep 6 AI – Patient Recruitment for Clinical Trials

- **Tool:** Deep 6 AI
- **Hospital:** Cedars-Sinai Medical Centre

AI role

- AI analysed electronic health records (EHR) to find eligible patients for trials.

Results

- Researchers had recruited only 2 patients in 6 months using traditional methods.
- Using AI, they identified 16 qualified patients in about one hour.

Significance

- Shows how AI dramatically speeds up patient recruitment.

Table 8: Major Global Regulatory Authorities²⁹

Regulatory Authority	Country/Region	Role in AI and Clinical Trials
Food and Drug Administration (FDA)	United States	Provides guidance for AI-based medical software and clinical trial data evaluation
European Medicines Agency (EMA)	Europe	Regulates AI use in drug development and clinical trials in the EU
Central Drugs Standard Control Organisation (CDSCO)	India	Approves clinical trials and monitors AI-supported research
Pharmaceuticals and Medical Devices Agency (PMDA)	Japan	Evaluates AI-based healthcare technologies and clinical data
Medicines and Healthcare products Regulatory Agency (MHRA)	United Kingdom	Provides regulatory guidance for AI medical technologies

FUTURE PRESPECTIVE IN REGULATORY AFFAIRS³⁰

The future outlook for regulatory affairs is centred on how globalisation, new technologies, and quicker medication development may alter regulatory procedures in the years to come. Regulatory experts will be crucial in maintaining the safety, efficacy, and compliance of pharmaceuticals and medical devices with international standards.

- a. Automation and Artificial Intelligence
- b. Submissions for Digital Regulation
- d. International Regulation Harmonisation. Advanced Therapies and Personalised Medicine
- e. Empirical Data (RWE)

METHODOLOGY

Simulation-Based Methodology

Simulation-based methodology involves the use of computational tools to replicate clinical trial scenarios and optimize outcomes before actual implementation.

1. Data Collection and Categorization

Data was collected and categorized

[illegible]

2. Data Entry and Processing

A	B	C	D
AGE	BLOOD PRESSURE	SUGAR	STATUS
25	Normal	Normal	Healthy
28	Normal	High	Moderate
30	Normal	Normal	Healthy
32	High	Normal	At Risk
35	Normal	High	Moderate
38	High	High	Critical
22	Normal	Normal	Healthy
40	Normal	High	Moderate
42	High	Normal	At Risk
45	High	High	Critical
47	Normal	High	Moderate
50	High	Normal	At Risk
52	High	High	Critical
55	High	Normal	Critical
58	High	High	Critical
60	High	High	Critical
62	High	Normal	Critical
65	High	High	Critical
68	High	High	Critical
70	High	High	Critical
24	Normal	Normal	Healthy
27	Normal	High	Moderate
29	Normal	Normal	Healthy
31	High	Normal	At Risk
34	Normal	High	Moderate
36	High	High	Critical
39	Normal	High	Moderate
41	High	Normal	At Risk
43	High	High	Critical

3. Eligibility Criteria Simulation

A rule-based formula was applied

=IF(AND(A2>40, LOWER(B2)="" HIGH", LOWER(C2)="" YES"), " ELIGIBLE", " NOT ELIGIBLE")

	AGE	BLOOD PRESSURE	SUGAR	STATUS	E
1	25	Normal	Healthy	Healthy	
2	26	Normal	High	Moderate	
3	30	Normal	Normal	Healthy	
4	32	High	Normal	At Risk	
5	35	Normal	High	Moderate	
6	38	High	High	Critical	
7	22	Normal	Normal	Healthy	
8	40	Normal	High	Moderate	
9	45	High	High	Critical	
10	42	High	Normal	At Risk	
11	48	High	High	Critical	
12	47	Normal	High	Moderate	
13	50	High	Normal	At Risk	
14	52	High	High	Critical	
15	55	High	Normal	Critical	
16	58	High	High	Critical	
17	60	High	High	Critical	
18	62	High	Normal	Critical	
19	65	High	High	Critical	
20	68	High	High	Critical	
21	70	High	High	Critical	
22	24	Normal	Healthy	Healthy	
23	27	Normal	High	Moderate	
24	29	Normal	Normal	Healthy	
25	31	High	Normal	At Risk	
26	34	Normal	High	Moderate	
27	36	High	High	Critical	
28	39	Normal	High	Moderate	
29	41	High	Normal	At Risk	
30	43	High	High	Critical	

Based on the formula, the eligibility criterion differentiates:

	AGE	BLOOD PRESSURE	SUGAR	STATUS	E
1	25	Normal	Healthy	Healthy	NOT ELIGIBLE
2	26	Normal	High	Moderate	NOT ELIGIBLE
3	30	Normal	Normal	Healthy	NOT ELIGIBLE
4	32	High	Normal	At Risk	NOT ELIGIBLE
5	35	Normal	High	Moderate	NOT ELIGIBLE
6	38	High	High	Critical	NOT ELIGIBLE
7	22	Normal	Normal	Healthy	NOT ELIGIBLE
8	40	Normal	High	Moderate	NOT ELIGIBLE
9	45	High	High	Critical	NOT ELIGIBLE
10	42	High	Normal	At Risk	NOT ELIGIBLE
11	48	High	High	Critical	NOT ELIGIBLE
12	47	Normal	High	Moderate	NOT ELIGIBLE
13	50	High	Normal	At Risk	NOT ELIGIBLE
14	52	High	High	Critical	ELIGIBLE
15	55	High	Normal	Critical	NOT ELIGIBLE
16	58	High	High	Critical	NOT ELIGIBLE
17	60	High	High	Critical	ELIGIBLE
18	62	High	Normal	Critical	NOT ELIGIBLE
19	65	High	High	Critical	ELIGIBLE
20	68	High	High	Critical	ELIGIBLE
21	70	High	High	Critical	ELIGIBLE
22	24	Normal	Healthy	Healthy	NOT ELIGIBLE
23	27	Normal	High	Moderate	NOT ELIGIBLE
24	29	Normal	Normal	Healthy	NOT ELIGIBLE
25	31	High	Normal	At Risk	NOT ELIGIBLE
26	34	Normal	High	Moderate	NOT ELIGIBLE
27	36	High	High	Critical	NOT ELIGIBLE
28	39	Normal	High	Moderate	NOT ELIGIBLE
29	41	High	Normal	At Risk	NOT ELIGIBLE
30	43	High	High	Critical	ELIGIBLE

Criteria Applied:

- Age > 40
- Condition level = High
- Consent status = Yes

Outcome

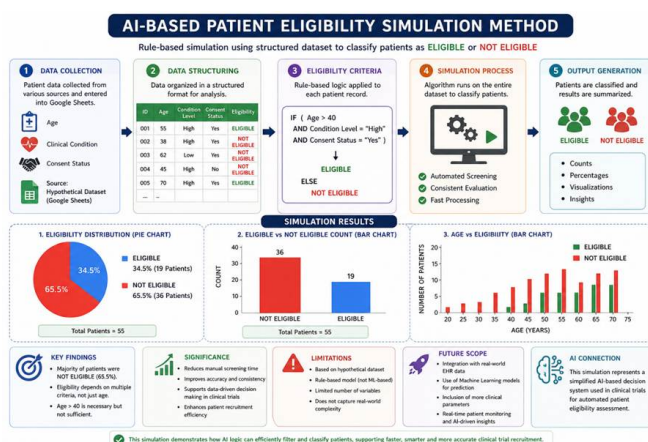
- All conditions satisfied → Eligible
- Otherwise → Not Eligible

Simulation Outcome

- Automated patient filtering
- Improved screening efficiency
- Reduced manual effort

Significance of Simulation

- Demonstrates AI-based recruitment logic
- Provides practical validation of methodology
- Supports decision-making in clinical trial



CONCLUSION

AI is revolutionising the planning, execution, and evaluation of clinical studies. AI enhances clinical research efficiency, accuracy, and decision-making through cutting-edge technologies such as machine learning, deep learning, and natural language processing. Faster patient recruitment, better clinical trial design, enhanced data analysis, and early adverse event detection are all made possible by AI. These features improve patient safety and trial success rates while cutting down on the time and expense needed for drug development. AI also aids in the creation and analysis of data for regulatory organisations, including the Central Drugs Standard Control Organisation, the European Medicines Agency, and the Food and Drug Administration.

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