

# Graph mining approaches for drug selection using fuzzy multi-layer neural perception with marginal subset clustering features

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**Abstract.** The biomedical industry uses graph mining to store a variety of data. It features a feature that makes a lot of info accessible. However, the majority of individuals are mainly concerned with learning about illnesses and medications. Creating drug models and novel chemical molecules in the medical industry is called relational medicine. Patients may have adverse reactions to the medication due to the dissimilarity of the compound's molecules. It suggests that complex molecular characteristics don't affect the dataset's classification and are independent of one another. We aim to increase the effectiveness of graph mining-based drug selection by analyzing the success rate of drug selection using Fuzzy Multilayer Neural Perception (FMNP). Marginal Subset Clustering Features (MSCF), the input used to generate the chosen classes, are processed utilizing these features. The system first preprocessed all patient features and suggested medication molecule compounds to create a consolidated dataset. Distance vector features linked to edge weights are used in feature selection to create relationship patterns. The features are chosen based on the estimated Relational Drug Combination Weight (RDCW). Additionally, the implementation updates the logic rules and gives the neural classifier predictions for feature weights. Using a neural classifier and iterative logic rules, FMNP forecasts training outcomes. The classifier continuously predicts and suggests chemical molecules to lower the possibility of adversative effects.

**Keywords:** drug selection; feature weights; medicatio; neural classifier; RDCW; selection and fuzzy

## 1. Introduction

The system first preprocessed all patient features and suggested medication molecule compounds to create a consolidated dataset. Distance vector features linked to edge weights are used in feature selection to create relationship patterns. The features are chosen based on the estimated Relational Drug Combination Weight (RDCW). Additionally, the implementation updates the logic rules and gives the neural classifier predictions for feature weights (He *et al.* 2020). Using a neural classifier and iterative logic rules, FMNP forecasts training outcomes. The classifier continuously predicts and suggests chemical molecules to lower the possibility of adverse effects. Drug and discriminative feature selection such that the selected drugs and features

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can reasonably approximate the original feature spaces and the critical factors discriminative can be adequately explored (Zhu *et al.* 2022).

The medical community's prescription of drugs is contingent upon the proper residue-free compound analysis as well as the numerous variables that contribute to the deterioration of human health. Advanced graph mining high-quality data to overcome this issue. Data analysis based on selections is needed to find clustered relevant features and enhance creativity and decision-making for precise molecular categorization. Because graph mining can reliably predict structural associations, there are opportunities to apply it at every stage of the drug selection process (Liu *et al.* 2020).

The drug attribute analysis and selection process is depicted in Fig. 1. Predictive biomarkers, digital pathology data analysis, and targeted validation in clinical trials are all included in the system.

Some applied techniques focus on accurate forecasts, insights, and approaches. The description of the selected neural network classifier and the inability to access edge interactions between drug properties are the primary causes of graph mining challenges. Since feature selection is significant in the best possible medicine prescription, all fields must establish systematic and comprehensive high-dimensional profiles. When the same graph mining test, the application, and these issues could lower the failure rates of drug classification, enable data-driven decision-making, and expedite the process (Zhu *et al.* 2020)

The drug discovery process aims to find essential compounds that significantly impact particular biological targets. Drugs work by inhibiting the activity of these factors, which contain proteins that govern disease and are controlled by interactions with other chemicals. Small amounts of chemicals are generated during the drug discovery phase; therefore, lead molecules found there can be optimized through human clinical trials.

Enhancing the lead compound's biological activity is the pharmaceutical goods' primary goal to preserve the drug's qualities. By methodically examining their compound features, molecules of related compounds that lead to compounds are assembled into chemical libraries made up of chemical groups that can be utilized to prescribe safe medications.

Using adaptive neural networks and a system that can identify overlaps between increased features via correlation analysis, this classifier produces the best suggestions. Deep neural networks' feature clustering component must be used to lower the relative analytical dimensionality and network complexity during feature selection. To optimize the output layer generated by neural logic, neural networks give input functions to input layers and use hidden layers to carry out several non-linear transformations by the activation functions (Wang *et al.* 2023).

Logistic weights for drug selections are often trained to discover the closest feature to the difference between the obtained feature and the predicted output—which is logically approximated using a sigmoid function. Every output node is associated with a task (or class) that requires prediction. The related network classifier creates drug classes with class labels in the output layer.

The Contribution is to increase the success rate of medication prescriptions based on patient characteristics by using the molecular analysis of the pertinent components. Analysis of the margin rate-based design strategy to increase the effectiveness of medicinal prescriptions. And enhancing performance predictions of medication combination performance is the goal of fuzzy rule prediction. The prediction rates and optimizing feature selection techniques using graph mining techniques. Design an effective drug composition analysis model considering several parameters such as success rate, impact measures, and pattern analysis. Make optimal drug selections based on continuous measurements, reducing error prediction and time complexity.

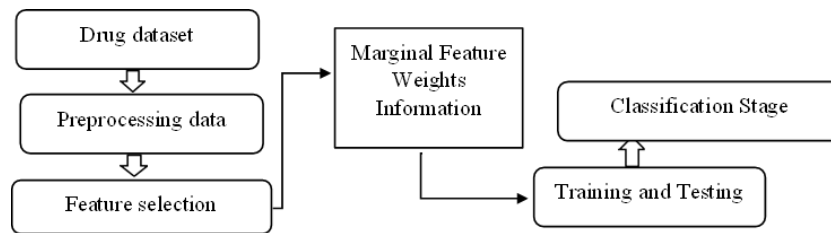


Fig. 1 Introduction diagram Basic Flow

## 2. Related work

In the medical system, Adverse Drug Interactions (ADIs) are a significant cause of hospitalization and death as well as a serious, sometimes fatal issue. ADI prediction using a unified Multi-Attribute Discriminative Representation Learning (MADRL) model. The qualities of each feature are regarded as equal without differentiation, in contrast to previous efforts, and potential interactions between medications are not considered. A serious public health issue is the unfavorable reactions and side effects of taking both drugs at once. Numerous techniques for ADDI prediction have been put out as clinical data becomes more and more accessible.

Gene Expression and Toxicity Data-Driven Multidose Computational Model for Drug- Induced Hepatotoxicity Prediction. Using the post-treatment dose/concentration data to its fullest allows us to present a more informative dose-response relationship in our dose-response curve- based analysis (Su *et al.* 2019). This strategy involves discovering novel uses or indications for previously approved or unproductive drugs. It is reliable and affordable compared to experimental medication development, which is pricy, time-consuming, hazardous, and limited to a few targets (Sadeghi *et al.* 2021).

A clinical system and pharmaceutical selection framework with AI support for the customized selection of NSCLC patients. The method estimates the drug's cost and effectiveness at that specific moment by using the target drug's economic cost as a secondary choice factor and assuming efficacy (Chang *et al.* 2021). Multifunctional Capsule Robot (MCR) has been utilized to address the limitations of robotic-assisted medicine delivery and has the potential to significantly boost the treatment efficacy of intestinal disorders (Zheng *et al.* 2022).

The drug delivery efficiency of the capsule robot is enhanced by its retractable needle, which allows it to inject pharmaceuticals straight into the target tissue. This feature guarantees the drug's complete and quick absorption. The needle can actively extend through the magnetic membrane after being initially concealed within the capsule (Zhou *et al.* 2022).

To assess the applicability and dependability of a novel theoretical entropy measurement for assessing miRNA resistance. Value pairs are used here to express patterns. One denotes the degree of fuzzy membership in a given category, whereas the other denotes distinct membership in the actual category of origin (Pal *et al.* 2021).

An online database of anticancer dug-based Mutation Combination Signatures (dbMCS) that has been carefully curated is used to study the fundamental characteristics of drug sensitivity indicators and develop computational methods to predict the effects of mutations (Shen *et al.* 2021) dependable assessment to distinguish drug-sensitive from drug-resistant epilepsy caused by pathogenic KCNQ2 variants. Electroencephalogram (EEG) and electrooculogram (EOG) signals were subjected to 24 classical time domain and spectral characteristics extraction to distinguish

Author/ Year	Proposed Method	Drawbacks
(Yu <i>et al.</i> 2023)	Adversarial networks with double generation for predicting medication interactions	Computational Error
(Salehi <i>et al.</i> 2018)	Localised Drug Delivery System with Multiple Transmitters	Storage capacity is one of the drug delivery systems' limitations.
(Qureshi <i>et al.</i> 2021)	Principle Component Algorithm (PCA)	One of the leading causes of death is a mutation of the epidermal growth factor receptor (EGFR)
(Jain <i>et al.</i> 2023)	Graph Regularized Probabilistic Matrix Factorization (GRPMF)	Switching between non-convex issues
(Chen <i>et al.</i> 2018)	miRNA-based computational method HNBI	Inappropriate expression Results

between patients with drug-sensitive and drug-resistant epilepsy. Gradient-Boosted Decision Trees (GBDT) were then trained using these features (Zeng *et al.* 2023).

The analytical model takes advantage of the cloud to train Support Vector Machines (SVMs) supplied by providers using drug formularies from various pharmacy formulary providers securely. Our method involves creating a secure computing protocol enabling cloud servers to conduct frequent fractional and integer computations (Liu *et al.* 2020).

Permanent Magnets (PM) or electromagnets have been used in various research to accomplish these objectives. Permanent magnet methods typically involve a mechanical system that must be laborious and challenging to operate to move the permanent magnet and produce a changing magnetic field. To continually make a stable magnetic field, electromagnets often need significant energy (Liu *et al.* 2022). Liangdong Retail Pharmacy employs a profit-maximizing or market-share-maximizing marketing strategy in its long-term market rivalry development in the Internet-driven external environment to increase profits (Li *et al.* 2019).

A relationship between two medications in which the pharmacological impact of one drug is influenced by the other is known as a drug-Drug Interaction (DTI). Positive TDIs typically help patients achieve better treatment outcomes. In contrast, negative TDIs are more likely to induce side effects, result in the withdrawal of a drug from the market, or even result in patient mortality (Yan *et al.* 2022). While the early phases of drug creation involve experimental methods for detecting ADIs, numerous possible ADDIs are currently being investigated clinically, and instances resulting in significant morbidity and mortality are still being investigated. For ADI prediction, several computational models have been developed (Zhu *et al.* 2021).

When numerous treatments are prescribed simultaneously, accurately predicting drug-drug interactions is critical for enhancing the efficacy and safety of drug research. A comprehensive method incorporating several data sources is more effective for high-precision prediction due to the range of data sources explaining the properties and connections between medications (Liu *et al.* 2023). Finding beneficial combinations is hampered by the vast number of combinations among candidate chemicals. Predicting possible drug combinations has been the subject of numerous studies, but the scalability and efficacy of the current approaches are only partially sufficient (Chen *et al.* 2023).

### 2.1 Problem consideration

- The main problem is that compound analysis models need to consider the nature of the parameters related to the compound molecule, which leads to inappropriate feature analysis when prescribing drugs.

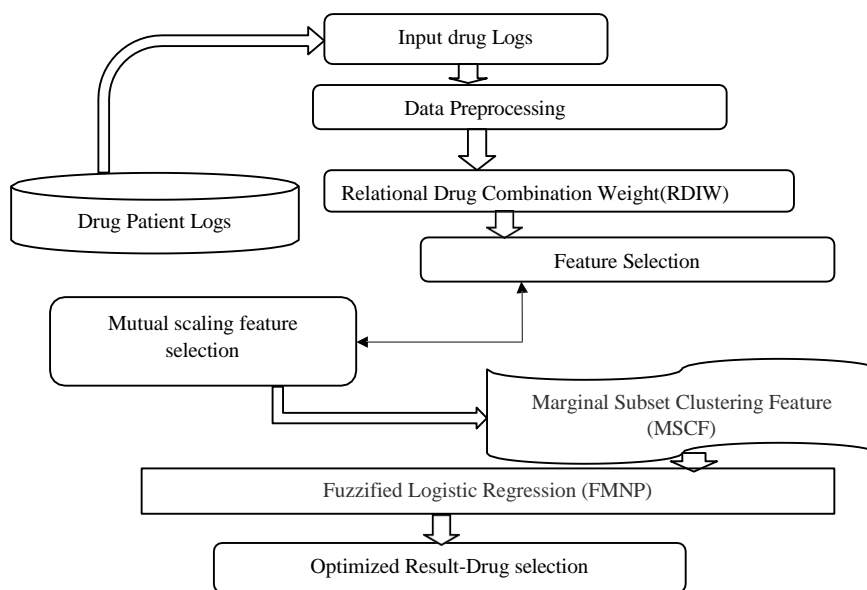


Fig. 2 Proposed Flow diagram

- Previous systems could not analyze the properties associated with the success rate of a compound’s molecules to determine drug prescriptions.
- High-dimensional feature analysis targets broken links in the classification, which leads to inaccurate predictions.
- Considering irrelevant features lowers prediction and success rates. The performance and time complexity of the classifier are low.

### 3. Proposed scheme

Marginal Subset Clustering Features (MSCF) and Fuzzy Multilayer Neural Perception (FMNP) classification screening, which provides data structure data for drug discovery and expands quickly and efficiently, are the foundations of the suggested drug composition analysis.

For drug composition analysis, this combination is essential, and feature selection strategies are necessary for urgent medical datasets. Therefore, pharmacy departments must examine the most effective combination testing strategies to guarantee precise selections for procedures that forecast pertinent characteristics. The Marginal Subgroup Clustering Features (MSCF), which treats a set of compounds as a cluster and chooses a compound or compounds from each group, is one of the most often used techniques for compound selection.

Fig. 2 describes numerous interconnected nodes that make up the Fuzzy Multilayer Neural Perception (FMNP) model based on the Marginal Subset Clustering Features (MSCF). Weights are used to express links between units. The suggested configuration diagram of the MSCF system is displayed in Fig. 2. Transforming inputs into meaningful outputs is the aim of FMNP. An input is a collection of values assigned a vector weight, either positive or negative. My code adds up the weights and associates the result with an output. Weight affects unit effect. Both supervised and unsupervised learning strategies can be used with FMNP. Compare the actual result with the

Variable Name	Description	Sample Data
Age	Patient Age	23; 47; ...
Sex	Gender of patient (male or female)	F; M; ...
BP	Levels of blood pressure (high, normal, or low)	HIGH; NORMAL; LOW; ...
Cholesterol	Levels of cholesterol (high or normal)	1.4; 1.3; ...
Na_to_K	Sodium to potassium ratio in blood	25.355; 13.093; ...
Drug	Type of drug	DrugY; drugC; ...

Fig. 3 Dataset Description

expected output after processing. After that, the fault is transmitted back to the computer for fixing. The data is analyzed numerous times during training to modify the network weights.

### 3.1 Dataset information

This dataset is organized in a tabular format, with each row representing a unique drug and each column representing a different characteristic. These data are obtained from various sources, including clinical trials, pharmacology studies, and regulatory databases.

Fig. 3 shows the dataset comprises the following features:

- Drug ID: A unique number assigned to every medicament.
- Drug moniker: The drug's colloquial moniker.
- Classification according to pharmacological effects: Pharmacological Classification.
- Chemical Class: A grouping of things according to their chemical makeup.
- Therapeutic Class: Groupings according to their planned uses as therapies.
- Route of Administration: The usual method used to administer the medication.
- Legal Status: The drug's status as a controlled substance, over-the-counter, or prescription only.
- Abuse Potential: An evaluation of the drug's likelihood of dependency or abuse.
- Mechanism of Action: The chemical or biological processes that allow a medication to work.
- Combination Status: This shows whether the medication contains a mix of different active components.

### 3.2 Preprocessing data

The process of eliminating imprecise, erroneous, and incomplete data from a data set and substituting missing values is known as data preparation. A primary data preparation procedure is performed in this stage to eliminate noise and look for null values.

The standard deviation method of statistical analysis is the foundation of the Z-score evaluation method, which examines the efficacy of test results for each frequency, as shown in Eq. 1. Let's assume  $A$  – Experimental Values,  $\mu$  – Mean,  $\sigma$  – Standard Deviation.

$$Z = (A - \mu) / \sigma \quad (1)$$

Calculate the mean and standard deviation, as shown in Eqs. 2 and 3.

$$\mu = \frac{\sum_{a=1}^n \sum_{b=1}^{|x_1|} \sum_{c=1}^m Process_{a,b,c}}{|x_1|.m} \tag{2}$$

$$\sigma = \sqrt{\frac{\left(\sum_{a=1}^n \sum_{b=1}^{|x_1|} \sum_{c=1}^m Process_{a,b,c} - \mu\right)^2}{|x_1|.m - 1}} \tag{3}$$

Compute the Presence in relative weights

If  $\int X_c \in DrugID \ \&\& \ X_c \in Molecule \ ID \ \&\& \ X_c \in mean \ weight$

Then

$$Preds = \sum(T_c \in Prds) \cup T_c \tag{4}$$

For  $a = 1,2,3 \dots .n$

For  $b = 1,2, \dots , |x_1|$

For  $c = 1,2,3 \dots .m$

Do

$$\text{Find } Process_{a,b,c} = \left(\frac{Process_{a,b,c}-\mu}{\sigma}\right) \tag{5}$$

End if

End for End for

End for

Calculate the Z-score for each data point on each feature using  $Z = (A-\mu)/\sigma$  for each data point, replacing each original data point with its corresponding Z-score in the data set. The resulting dataset has a mean of 0 and a standard deviation of 1 for each feature, which is suitable for algorithms sensitive to the scale of the input features.

### 3.3 Relational Drug Combination Weight (RDCW)

Time series data are split into subgroups using Relational Drug Combination Weight (RDCW) so that each subgroup can be grouped independently. The dominating clusters in every subset are gathered throughout the thresholding process of the complete dataset. Schemas from the subset cluster are contained in the recently formed reduced database. Subgroups are categorized using Final Relational Drug Combination Weights (RDCW) to ascertain input and output profiles.

This calculates the relational term's average mean weight among its pharmacological characteristics.

Compute the two sets of features as shown in Eq. 4.

$$A = \{a_1, a_2, \dots, a_3\}, \quad B = \{b_1, b_2, \dots, b_3\} \tag{6}$$

Estimate the feature values by summation 1, as shown in Eq. 6. Let's assume  $x_i$ -value of feature,  $p(x_j)$  –probability of feature.

$$\sum_{i=1}^n x_i = 1 \quad \text{and} \quad \sum_{j=1}^m p(x_j) = 1 \tag{7}$$

Calculate the entropy of the associated features using the probability distribution, as shown in the Eq. 7. Let's assume  $H_f$  –entropy feature value,

$$H_f = - \sum_{j=1}^m p(x_j) \cdot \log_2 p(x_j) \quad (4)$$

Evaluate the combination of independent relations from sets connected in a joint relational system, as shown in Eq. 8. Let's assume  $f$  –transformation function.

$$Rel_{combined} = f(A, B, dependencies) \quad (9)$$

Estimate the feature contribution set, as shown in Eqs. 9 and 10. Let's assume  $C(i)$  –binary indicator,  $p(A_i), p(B_j)$  – probability of feature set.

$$C_f(A) = \sum_{i=1}^n (C(i) = 1) \cdot \log_2 p(A_i) \quad (10)$$

$$C_f(B) = \sum_{j=1}^m (C(j) = 1) \cdot \log_2 p(B_j) \quad (11)$$

Calculate the combined properties of sources A and B, as shown in Eq. 11. Let's assume

$$\{A, B\} = \{a_1 b_1, a_2 b_2, \dots, a_n b_m\} \quad (12)$$

As shown in Eq. 12, compute the joint features and their graphical representation. Calculate the collective entropy between feature A and feature B as shown in Eq. 13.

$$\begin{array}{cccc} x_1 y_1 & x_1 y_2 & \dots & x_n y_m \\ s(x_1 b_1) & s(x_1 b_2) & \dots & s(x_n b_m) \end{array} \quad (13)$$

$$H(A, B) = - \sum_{i=1}^n \sum_{j=1}^m x_{ij} \cdot \log_2 (x_{ij}) \quad (14)$$

As shown in Eq. 14, calculate the relative features (RF) in a set of dependent features defined as a combination of relative features. Let's assume  $RI(A, B)$  – mutual information type score.

$$RI(A, B) = C_f(A) + C_f(B) - C(Ab) \quad (15)$$

The entropy value is the best features correlation, often known as correlation features 0 and 1. This relation combines elements from sources A and B's independent relations with the dependents of a common relation. These combined relationship attributes are regarded as extra characteristics for additional categorization.

### 3.4 Marginal scaling feature selection

In this step, the correlation notion is used to analyze the heterogeneity of the drug value data. Since frequently occurring drug values are related to repetition count, it includes the unique content of variables, attributes, and tokens in drug value sentences, which are relatively identifiable through associative relationships between standard features. Relationships between

these drug value factors help to explain how different drug value aspects relate to one another. In order to minimize uncorrelated words, it employs a refinement technique that combines attribute-related variables with the same deviant features. Measure the scaling features and drug information as shown in Eq. 15. Let's assume  $\alpha$  – scalar balance factor, measures different scaling feature,  $C$  – drug information,  $(M_a, A, M_i)$  – Marginal information,  $\alpha, M_i$  and  $M_a$  – data weights.

$$A(MI) = C(m_a, A, M_i) + \alpha \cdot MI(A) \tag{17}$$

$$MI(A; B) = \sum_{a \in B} \sum_{b \in B} C(A = a, B = b) \cdot \log \frac{C(A = a, B = b)}{C(A = a) \cdot C(B = b)}$$

$$MI = S(M_a) + S(A, M_i) - S(M_a, A, M_i) \tag{18}$$

$$S(M_a, A, M_i) = - \sum_a \sum_b S_{a,b} \cdot \log_2 S_{a,b} \tag{19}$$

$$S(M_a) = - \sum_a S_{M_a} \cdot \log_2 S_{M_a} \tag{20}$$

$$S(M_i) = \sum_a \sum_b S_{a,b} \cdot \log_2 M_{a,b} \tag{21}$$

Eqs. 16 and 17 defines and estimates the mutual information between two random variables using their probability density functions. Let's assume

$$MI(A, B) = \int \int f_{a,b}(a, b) \cdot \log \frac{f_{a,b}(a, b)}{f_a(a) f_b(b)} d_a d_b \tag{22}$$

$$f_{a,b}(a, b) = f_a(a) \cdot f_b(b) \Rightarrow MI(A, B) = 0 \tag{23}$$

As shown in Eq. 18 to 20, calculate the entropy. Estimate the edge information based on the parameters. Let's assume

$$S_a = - \int f_a(a) \log f_a(a) d_a \tag{24}$$

$$MI(a; b) = C(a) - C(B|A) \tag{25}$$

$$C(A) = C(B) \Rightarrow MI(A; B) = 0 \tag{26}$$

The MSFS utilises mutual information and entropy to identify and retain the most informative features in drug value data, minimising uncorrelated features and ensuring consistent and meaningful feature selection.

### 3.5 Marginal Subset Clustering Feature (MSCF)

Selecting feature subsets can help find and eliminate as much redundant and unnecessary data as feasible. Measures of target classes and features' marginal information differ from those of statistical persons. The correlation between the features and the target class is estimated nonlinearly. Eliminating redundant and useless features is part of the MSCF feature subset

selection framework. Reduce the MSCF (Mean Subset Clustering Function) to a minimum. Create (K) sets or clusters out of the n observations. It will look like this below.

Calculate the weight of MSCF optimization by clustering, as shown in Eq. 19. Let's assume  $w_b$  –important weight,  $c_a, a', b$  –Euclidean, cosine, or domain-specific

$$\min_{c_1, \dots, c_k} \sum_{x=1}^K \left( \frac{1}{|n_x|^2} \sum_{a, a' \in n_x} \sum_{b=1}^s w_b \cdot c_a, a', b \right) \quad (27)$$

Update the weights repeatedly, as shown in Eq. 20. Let's assume  $w_b^{(i)}$  –weight of feature iteration.

$$\frac{\sum_{b=1}^s |w_b^{(i)} - w_b^{(i-1)}|}{\sum_{b=1}^s |w_b^{(i-1)}|} < 10^{-4} \quad (28)$$

Compute the uniformly initialised feature weights as illustrated in Eqs. 21 and 22. Let's assume  $k$  –number of cluster,  $n_x$  –Set of indices of data,  $a, a'$  –Indices of two observation,  $w_b^{(0)}$  –weight feature index,

$$w_b^{(0)} = \frac{1}{\sqrt{s}} \text{ for all } b = 1, \dots, s \quad (29)$$

$$\min_{c_1, \dots, c_k} \left\{ \sum_{x=1}^k \left( \frac{1}{|n_x|^2} \sum_{a, a' \in n_x} \sum_{b=1}^s w_b \cdot c_a, a', b \right) + \lambda \sum_{b=1}^s |w_b| \right\} \quad (30)$$

The substances were divided into two groups to validate the classification model: a training set (80%, 610 compounds) and a test set (20%, 152 compounds). Through the use of representative functions in both activity classes, an independent selection technique produced a test set with equivalent (20%) percentages of drug (73 compounds) and nondrug (79 compounds) substances. In summary, this method uses simulated annealing optimization to select a selection of objects (compounds) that most closely match the parent library chosen. The model was created on the training set and verified on the test set using seven techniques and cross-validation.

### 3.6 Fuzzified Multilayer Neural Perception (FMNP)

Fuzzified Multilayer Neural Perception (FMNP) considers the input's fuzziness, thereby reducing the impact of fuzzy input on the learning process. A new optimization function, fuzzy gradient descent, is proposed to reflect these dependencies.

#### Formulation of drugs:

The patterns are produced using a preprocessed dataset. The technique finds a list of medications for various illnesses using data collection. Formulations are then created for multiple diseases. Subsequently, the produced patterns are employed to produce fuzzy rules and forecast success rates.

#### 3.6.1 Fuzzy Rule Generation:

To establish the rules, use the pattern set generated in the preceding phase. To accomplish this, the approach determines the total number of instances of each drug for every disease, considering

the number of times the drug component was administered. The approach also computes the success rate and total number of completions. The method adds fuzzy values to the list of rules by generating them using these two values.

*Fuzzy Rule sets*

Consider that  $U$  is the discourse universe, that  $xi \in U$ , that  $\mu A:U \rightarrow [0,1]$  is the membership function of  $A$ , and that the degree of  $x$ 's membership in  $A$  is  $\mu A(x) \in [0,1]$ . For each given fuzzy set  $A \in U$ , its ordered pairings are defined as  $\{(xi, \mu A(xi))\}$ . Fuzzy sets of this sort are called type-  $I$  fuzzy sets.

However, these fuzzy sets cannot represent many uncertainties because their membership functions are crisp. On the other hand, fuzzy membership functions of fuzzy sets can express many uncertainties and are thus fuzzy. One characteristic of a fuzzy set  $A'$  is its membership function  $\mu f'(a, \mu)$ , where  $a \in U$  and  $\mu \in [0,1]$ , and is defined as,

$$F' = \{a, \mu\}, \mu F'(a, \mu) \forall a \in [1,0] \} \tag{31}$$

Where  $0 \leq \mu F'(a, \mu) \leq 1$

It is simple to construct fuzzy sets by first establishing a type I fuzzy set and giving each element a minimum and maximum membership degree.

$$F' = \{a, (a), a, \mu(a) | \mu S(a) \leq \mu(a) \leq \mu U(a) \mu \in [0,1] \} \tag{32}$$

where  $\mu_s$  and  $\mu_u$ , the initial membership represents the lower degree and upper membership degree of the function  $(a)$ , respectively, defined as follows

$$\begin{aligned} \mu S(a) &= [\mu(a)]\alpha \\ (a) &= [(a)]1/\alpha \end{aligned} \tag{33}$$

where  $\alpha \in (1, \infty)$ . In this paper,  $\alpha = 2$  since  $\alpha \gg 2$  is not valuable or valuable data.

**3.6.2 Fuzzified Multilayer Neural Perception (FMNP)**

In the learning process, the multilayer perceptron presented in this study considers each input model's degree of membership in the category of interest. Furthermore, gradient descent benefits from membership values by reducing the impact of ambiguous features (i.e., features with membership 0.5) while updating the (learning) weights. Fuzzy clustering determines membership for every neural network layer except the output layer.

$$\Delta w_x = \eta \cdot (true_x - Pred_x) \cdot A_x \tag{34}$$

$$A(a) = \frac{1}{2} \sum 2(n) \tag{35}$$

It is possible to compare the actual and expected output errors. Consider node 'j' as the output's final data point's error level. Here,  $a \rightarrow$  target value,  $S \rightarrow$ , is created by variable identification. Based on some transformations, it can adjust the weight of each node by reducing the error in the output.

Update the weights on the connection to the neuron, as shown in Eq. 20.

$$\Delta w_{a,b}^{(n)} = -\eta \cdot \frac{\partial S^{(n)}}{\partial S_a^{(n)}} \cdot X_a^{(n)} \cdot \phi'_a(X_a^{(n)}) \tag{36}$$

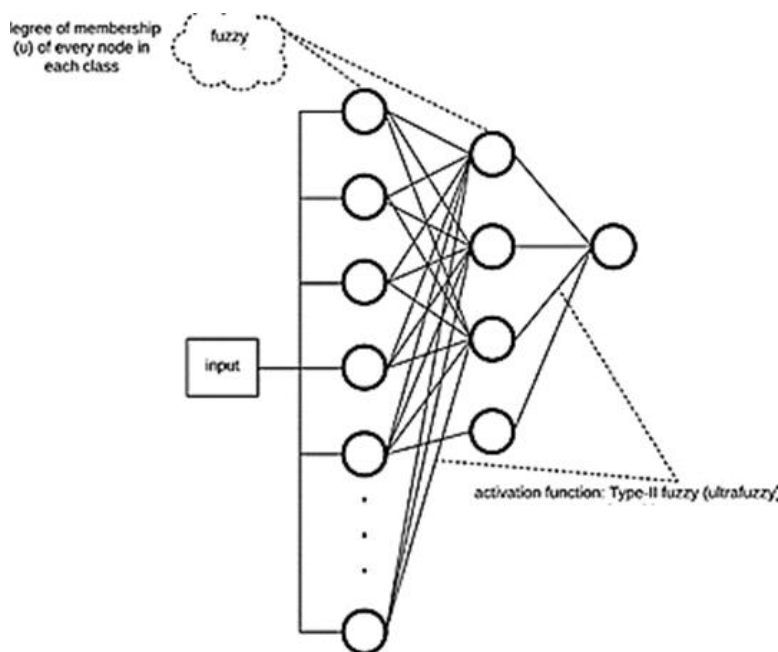


Fig. 4 F-MNP Diagram

Calculate the gradients through multiple layers, as shown in Eq. 33.

$$\Delta w_{a,b}^{(n)} = -\eta \cdot \left( \frac{\partial S^{(n)}}{\partial S_a^{(n)}} \cdot X_a^{(n)} \cdot w_{a,b} \right) \cdot \phi'_a \left( X_a^{(n)} \right) \cdot X_a^{(n)} \quad (37)$$

The activation function's output layer weights may occasionally vary in response to modifications in the hidden layer weights. Consequently, input features are added to ascertain whether a specific neuron terminates, and optimal weights are added based on the available weights. As a result, the multilayer perceptron employs a back propagation technique and a startup function. Drug interactions are predicted using multi-layered perceptrons.

Derivation can also be obtained from membership values by lessening the influence of unclear features (i.e., features with membership 0.5) during the weights' updating (learning) process. As shown in Fig. 4, the membership degree is obtained by fuzzy-summing each neural network layer, except the output layer.

#### 4. Result and discussion

The present work presents a hard-coded model for characterizing drug composition analysis, and its performance was assessed. Use a variety of datasets and samples to determine the method's performance, which is hard-coded in Python and based on marginal subset clustering function (MSCF) estimators. The performance of different procedures, as well as the outcomes gained, are examined and debated. The experimental setup process for assessing the suggested Fuzzy Multilayer Neural Perception (FMNP) algorithm is covered in this part. Support vector machines

Table 3 Logistic regression with Attention Algorithm classification results

Parameters	Values
Tool Used	Anaconda
Language	Python
Name of the Data Set	Drug Data
Number of Records	2000
Training	1500
Testing	500

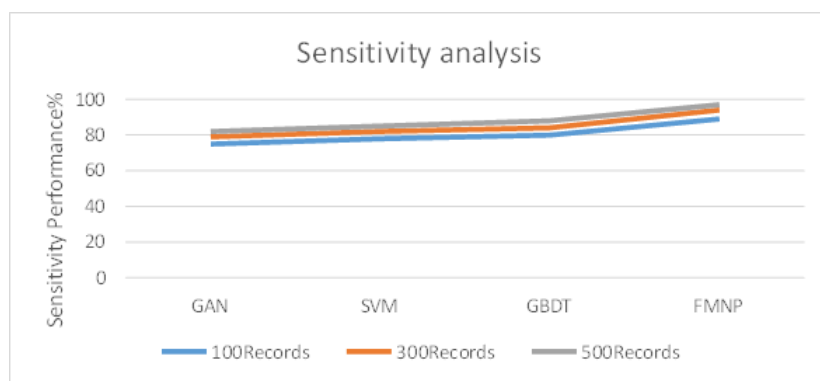


Fig. 5 Performance on Sensitivity

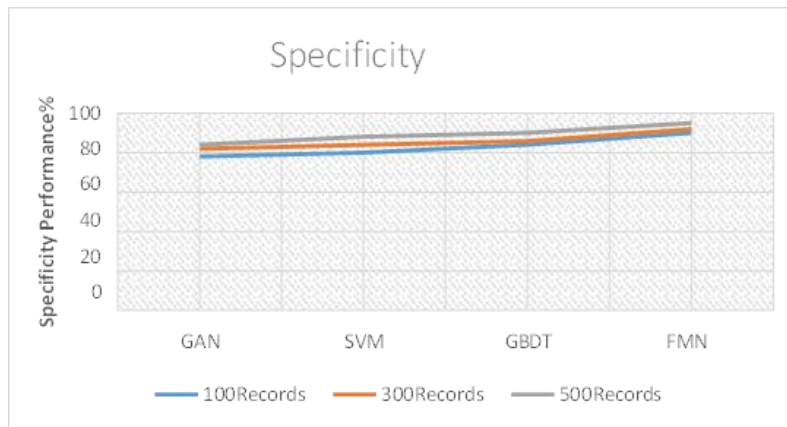


Fig. 6 Performance on Specificity

(SVM), gradient-boosted decision Trees (GBDT), and generative adversarial networks (GAN) are examples of earlier approaches.

Table 1 shows that the dataset is explored through the performance of different techniques.

This section contains the results that were obtained.

Drug sensitivity analysis performance is calculated and compared to the outcomes of alternative techniques. Compared to other approaches, the suggested FMNP algorithm achieved better results in Fig. 5.

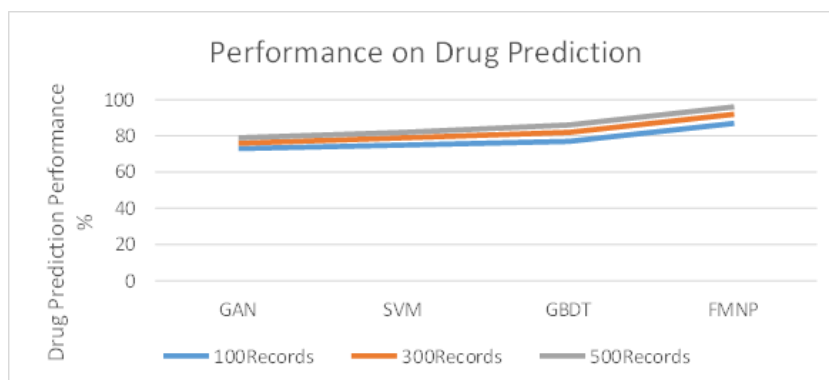


Fig. 7 Drug Composite Prediction

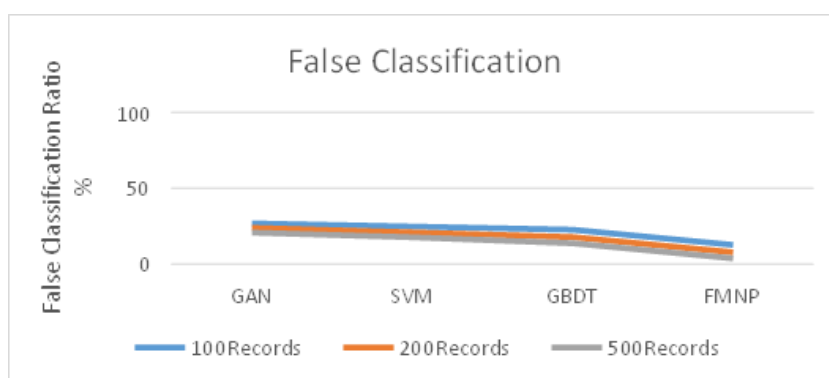


Fig. 8 Performance on false classification ratio

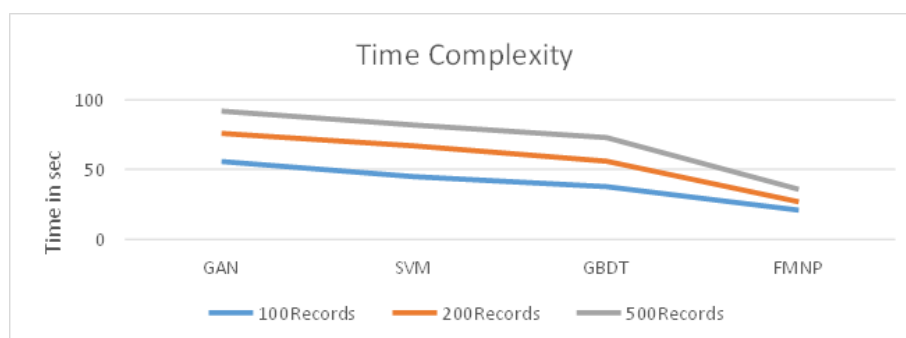


Fig. 9 Performance on Time Complexity

Fig. 6 shows that drug specificity analysis performance is calculated and compared to the findings of other methods. Compared to different approaches, the suggested FMNP algorithm has achieved better results.

Fig. 7 shows the accuracy of the drug compound success rate prediction calculated and compared to the outcomes of alternative techniques. Compared to other approaches, the suggested FMNP algorithm has achieved better results.

The suggested method's erroneous classification or prediction ratio has been calculated and compared to the effectiveness of other approaches. Less value is obtained in the false classification ratio with the FMNP algorithm, shown in Fig. 8.

Fig. 9 describes the degree of intricacy in forecasting the success rate varies among various techniques. When the suggested method's time complexity values were compared, the FMNP algorithm yielded reduced time complexity.

## 5. Conclusions

In conclusion, a successful analytical model for medication selection has been put forth. This technique keeps evidence of drug use at several hospitals intact. This approach preprocesses the traces to eliminate the noisy recordings before using the traces to obtain disease-wise records. This method also allows for the creation of customized dosage forms for various illnesses and medication uses. The approach creates fuzzy rules using the received patterns based on the total number of times the value appears and the number of hits for each pattern. By calculating the FMNP value for each rule using the created regulations, this approach ultimately chooses one mode as the outcome of the prediction. Compared to existing methods, the suggested method increases the accuracy of drug success rate prediction. Medical data classification has a very intricate structure. While other algorithms yield better results, it is the most successful classification strategy for identifying unknown medical data sets. To tackle the problem, employ the FMNP algorithm. The ideal resolution Pharmaceutical datasets or data have better classification accuracy thanks to the FMNP algorithm.

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