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Advancements in Hemodynamic Monitoring for Precision Critical Care Management Logan Alan Department of Health Science, University of Cambridge

Abstract: Hemodynamic monitoring plays a crucial role in the management of critically ill patients, providing valuable insights into cardiovascular function and guiding therapeutic interventions. Recent advancements in technology have revolutionized hemodynamic monitoring, enabling more precise and personalized critical care management. This review explores the latest developments in hemodynamic monitoring, including non-invasive techniques, advanced sensors, and data analytics. The integration of artificial intelligence and machine learning algorithms has further enhanced the interpretation of hemodynamic data, allowing for early detection of abnormalities and tailored treatment strategies. Additionally, the utilization of wearable devices and remote monitoring has extended the reach of hemodynamic assessment beyond the traditional clinical setting. This paper highlights the impact of these innovations on patient outcomes, emphasizing the potential for improved morbidity and mortality in critically ill individuals. As we enter an era of precision medicine, hemodynamic monitoring stands at the forefront, providing a comprehensive and real-time understanding of cardiovascular dynamics for individualized critical care.

Keywords: Hemodynamic Monitoring, Precision Critical Care, Cardiovascular Function, Noninvasive Techniques, Advanced Sensors, Data Analytics, Artificial Intelligence, Machine Learning, Early Detection, Tailored Treatment.

Introduction:

The management of critically ill patients requires a thorough understanding of cardiovascular dynamics, as deviations from normal hemodynamic parameters can significantly impact patient outcomes. Hemodynamic monitoring has evolved as a pivotal tool in critical care, providing clinicians with valuable information about cardiac function, vascular resistance, and fluid status. In recent years, technological advancements have ushered in a new era of precision in critical care management, offering innovative approaches to hemodynamic assessment.

This review aims to explore the cutting-edge developments in hemodynamic monitoring that contribute to precise and individualized critical care. Traditional methods, such as invasive catheter-based measurements, have been complemented and, in some cases, supplanted by non-invasive techniques, advanced sensors, and sophisticated data analytics. The integration of artificial intelligence (AI) and machine learning (ML) algorithms has further refined our ability to interpret complex hemodynamic data, enabling early detection of abnormalities and facilitating tailored therapeutic strategies. [1], [2], [3], [4]

In addition to technological strides, the expanding use of wearable devices and remote monitoring has transformed the landscape of hemodynamic assessment. This shift allows for



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continuous monitoring beyond the confines of the clinical setting, promoting a more comprehensive understanding of patients' cardiovascular status in real-world scenarios.

As we delve into this exploration of advancements in hemodynamic monitoring, it becomes evident that the intersection of technology and medicine holds immense promise for improving patient outcomes. By embracing precision critical care, clinicians can leverage these innovations to optimize interventions, enhance patient safety, and ultimately reduce morbidity and mortality in the critically ill.

This review synthesizes current knowledge to provide a comprehensive overview of recent breakthroughs in hemodynamic monitoring, emphasizing their impact on precision critical care and the potential to usher in a new era of personalized medicine for critically ill individuals. [5], [6], [7].

Literature Review:

Hemodynamic monitoring, a cornerstone of critical care, has witnessed substantial advancements in recent years, driven by a confluence of technological innovation and a growing emphasis on precision medicine. The literature in this field reflects a dynamic landscape characterized by the exploration of novel monitoring techniques, the integration of advanced sensors, and the application of artificial intelligence (AI) and machine learning (ML) algorithms.

Traditional invasive methods, such as pulmonary artery catheterization, have long been the gold standard for assessing hemodynamics. However, recent literature underscores a paradigm shift towards non-invasive approaches. Studies have demonstrated the reliability of non-invasive techniques, such as transthoracic echocardiography and impedance cardiography, in providing accurate hemodynamic measurements without the inherent risks associated with invasive procedures. [8], [9], [10], [11], [12].

Advanced sensors have played a pivotal role in enhancing the precision of hemodynamic monitoring. Micro-electromechanical systems (MEMS) and nanotechnology have enabled the development of miniaturized, high-fidelity sensors capable of real-time data acquisition. These sensors, integrated into various monitoring devices, offer continuous and detailed insights into cardiac output, vascular resistance, and fluid status.

The infusion of AI and ML into hemodynamic monitoring has ushered in a new era of data interpretation. The literature reveals a growing body of evidence supporting the use of these technologies for early detection of hemodynamic instability, prediction of adverse events, and optimization of therapeutic interventions. These intelligent algorithms leverage large datasets to identify subtle patterns and trends that may elude traditional analysis, empowering clinicians to make timely and informed decisions. [13], [14], [15], [16], [17].

Wearable devices and remote monitoring have emerged as game-changers in the literature on hemodynamic assessment. The ability to continuously monitor patients outside the hospital setting provides a more comprehensive understanding of their cardiovascular dynamics in realworld scenarios. This shift towards ambulatory monitoring holds significant implications for early intervention and personalized care.



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The literature consistently highlights the impact of these advancements on patient outcomes. Studies report improved morbidity and mortality rates in critically ill patients when hemodynamic monitoring is integrated with precision medicine approaches. Tailored therapeutic strategies, guided by real-time and accurate hemodynamic data, contribute to a more targeted and effective management of critically ill individuals. [18], [19], [20].

While the literature underscores the promise of these advancements, challenges such as standardization, interoperability, and ethical considerations merit attention. Future research should focus on addressing these issues to ensure the seamless integration of cutting-edge hemodynamic monitoring technologies into routine clinical practice.

In conclusion, the literature on hemodynamic monitoring reflects a dynamic and transformative landscape. Non-invasive techniques, advanced sensors, AI, and wearable devices collectively contribute to the precision and personalization of critical care. The synthesis of these findings lays the foundation for a new era in which hemodynamic monitoring becomes not only a diagnostic tool but a proactive and integral component of precision critical care management. [20], [21], [22].

Results and Discussion:

The integration of advanced hemodynamic monitoring technologies has yielded promising results in the field of critical care, offering clinicians unprecedented insights into cardiovascular dynamics and paving the way for more personalized patient management. This section discusses the key findings and implications of recent advancements in hemodynamic monitoring, emphasizing their impact on patient outcomes, clinical decision-making, and the future trajectory of critical care.

1. Improved Diagnostic Accuracy:

- Studies consistently demonstrate the superior diagnostic accuracy of non-invasive hemodynamic monitoring techniques. Transthoracic echocardiography and impedance cardiography, for instance, provide reliable assessments of cardiac output and fluid status without the associated risks of invasive procedures.
- This heightened accuracy contributes to early identification of hemodynamic abnormalities, allowing for prompt intervention and optimization of patient care.

2. Real-time Data Analytics and Early Detection:

- The incorporation of AI and ML algorithms into hemodynamic monitoring systems enables real-time data analytics and early detection of subtle changes in cardiovascular parameters.
- Intelligent algorithms leverage historical data to predict adverse events, facilitating a proactive approach to patient management and preventing the progression of critical conditions.

3. Tailored Therapeutic Strategies:

• The availability of continuous and precise hemodynamic data empowers clinicians to tailor therapeutic strategies to individual patient needs.



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• Personalized interventions based on real-time monitoring contribute to optimized fluid management, vasopressor titration, and overall hemodynamic stability.

4. Ambulatory Monitoring and Remote Management:

- Wearable devices and remote monitoring have extended the reach of hemodynamic assessment beyond the hospital setting.
- Ambulatory monitoring provides a more comprehensive understanding of patients' cardiovascular dynamics in real-world scenarios, facilitating timely interventions and reducing the risk of complications. [23], [24].

5. Impact on Patient Outcomes:

- Numerous studies report improved patient outcomes, including reduced morbidity and mortality, associated with the integration of advanced hemodynamic monitoring technologies.
- Precision critical care, guided by continuous and accurate hemodynamic data, contributes to better prognoses for critically ill individuals.

6. Challenges and Future Directions:

- Despite the evident benefits, challenges such as standardization, interoperability, and ethical considerations require attention.
- Future research should focus on addressing these challenges to ensure the seamless integration of cutting-edge hemodynamic monitoring technologies into routine clinical practice.

7. Ethical Considerations:

- The use of AI and remote monitoring raises ethical considerations related to data privacy, consent, and the responsible use of technology.
- Ethical frameworks must be established to guide the implementation of these technologies while safeguarding patient autonomy and confidentiality.

In conclusion, the results and discussion highlight the transformative impact of recent advancements in hemodynamic monitoring on critical care. These technologies not only enhance diagnostic precision and early detection but also empower clinicians to tailor interventions, leading to improved patient outcomes. As the field continues to evolve, addressing challenges and ethical considerations will be crucial to realizing the full potential of hemodynamic monitoring in precision critical care management. [25], [26].

Results and Discussion:

1. Improved Hemodynamic Assessment:

- The adoption of advanced hemodynamic monitoring technologies has significantly improved the accuracy and depth of cardiovascular assessments. Non-invasive techniques, such as transthoracic echocardiography and impedance cardiography, offer precise measurements without the invasiveness associated with traditional methods.
- This enhanced accuracy in hemodynamic assessment contributes to a more thorough understanding of a patient's cardiovascular status, enabling clinicians to make informed decisions regarding interventions.



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2. Real-time Monitoring and Early Intervention:

- The integration of artificial intelligence (AI) and machine learning (ML) algorithms has enabled real-time analysis of hemodynamic data. These intelligent systems can detect subtle changes and patterns, allowing for early identification of hemodynamic instability.
- Early intervention based on real-time monitoring results in more timely and targeted therapeutic strategies, potentially preventing the progression of critical conditions and improving patient outcomes.

3. Personalized Treatment Strategies:

- Continuous and precise hemodynamic monitoring facilitates the development of personalized treatment strategies. Clinicians can tailor interventions based on individual patient responses, optimizing fluid resuscitation, vasopressor titration, and other therapeutic measures.
- Personalization of treatment plans contributes to more effective and patient-centered care, acknowledging the unique hemodynamic profiles of individuals.

4. Ambulatory Monitoring and Remote Care:

- Wearable devices and remote monitoring have extended the scope of hemodynamic assessment beyond the confines of the hospital. Patients can now be monitored in real-world settings, providing a more comprehensive view of their cardiovascular dynamics.
- Ambulatory monitoring not only offers continuous insights but also allows for remote care management, reducing the need for frequent hospital visits and enhancing patient convenience.

5. Positive Impact on Patient Outcomes:

- The implementation of advanced hemodynamic monitoring technologies has shown a positive impact on patient outcomes. Reduced morbidity and mortality rates are reported in critically ill patients who undergo precision critical care guided by these innovations.
- The ability to tailor treatments, intervene early, and monitor patients outside the hospital collectively contributes to improved prognosis and overall patient well-being.

6. Challenges and Future Considerations:

- Despite the significant advancements, challenges such as standardization of monitoring protocols, interoperability of devices, and ethical considerations surrounding data privacy and consent persist.
- Addressing these challenges is crucial for the widespread and ethical implementation of advanced hemodynamic monitoring technologies in routine clinical practice.

7. Integration of Multimodal Approaches:

- Combining various monitoring modalities, including imaging, biochemical markers, and hemodynamic parameters, presents an opportunity for a more comprehensive understanding of a patient's condition.
- Future research should explore the synergies between different monitoring techniques to create a holistic approach to hemodynamic assessment in critical care.



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In summary, the results and discussion emphasize the transformative impact of advanced hemodynamic monitoring on critical care. These technologies not only enhance diagnostic capabilities and enable early interventions but also contribute to personalized care and improved patient outcomes. As the field continues to progress, addressing challenges and integrating multimodal approaches will be pivotal for unlocking the full potential of precision hemodynamic monitoring in critical care management. [27], [28].

Conclusion:

The evolution of hemodynamic monitoring technologies represents a paradigm shift in critical care, offering clinicians unprecedented tools to assess cardiovascular dynamics with precision and tailor interventions for improved patient outcomes. As we reflect on the recent advancements discussed in this review, several key points emerge, underscoring the transformative impact and potential future directions of hemodynamic monitoring.

1. Precision and Personalization in Critical Care:

• The integration of non-invasive techniques, advanced sensors, artificial intelligence, and wearable devices has ushered in an era of precision critical care. Clinicians now have access to real-time, accurate hemodynamic data that enables a more nuanced understanding of individual patient needs.

2. Early Detection and Timely Interventions:

• The incorporation of AI and machine learning algorithms facilitates early detection of subtle changes in hemodynamic parameters. This early awareness empowers clinicians to intervene promptly, preventing the progression of critical conditions and optimizing therapeutic strategies.

3. Tailored Treatment Approaches:

• Continuous and precise hemodynamic monitoring allows for the development of personalized treatment plans. Clinicians can adjust interventions based on real-time data, optimizing fluid management, vasopressor titration, and other critical care measures to match the unique physiological responses of each patient.

4. Ambulatory Monitoring and Remote Care:

• Wearable devices and remote monitoring extend the reach of hemodynamic assessment beyond the hospital, providing a more holistic view of patients' cardiovascular dynamics. This shift towards ambulatory monitoring not only enhances patient convenience but also opens avenues for remote care management.

5. Positive Impact on Patient Outcomes:

• Research consistently demonstrates that the integration of advanced hemodynamic monitoring positively influences patient outcomes. Reduced morbidity and mortality rates are observed in critically ill patients when precision critical care strategies guided by these technologies are employed.

6. Challenges and Future Considerations:

• While the advancements are promising, challenges such as standardization, interoperability, and ethical considerations must be addressed. A concerted effort from



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the scientific and healthcare communities is needed to establish guidelines and frameworks that ensure the responsible and ethical use of these technologies.

7. Multimodal Approaches for Comprehensive Assessment:

• The future of hemodynamic monitoring may lie in the integration of various monitoring modalities, combining imaging, biochemical markers, and hemodynamic parameters for a more comprehensive understanding of a patient's condition. Research efforts should explore the synergies between different monitoring techniques to advance holistic patient care.

In conclusion, the recent advancements in hemodynamic monitoring herald a new era of precision and personalized critical care. The ability to continuously and accurately assess cardiovascular dynamics, coupled with the potential for early intervention and tailored treatments, positions these technologies as cornerstone elements in the evolving landscape of critical care medicine. While challenges persist, the positive impact on patient outcomes underscores the transformative potential of advanced hemodynamic monitoring in shaping the future of critical care practice. Continued research, collaboration, and ethical considerations will be paramount in realizing the full benefits of these innovations and ensuring their seamless integration into routine clinical care.

References:

- 1. Sapountzi- Krepia, D., Lavdaniti, M., Psychogiou, M., Arsenos, P., Paralikas, T., Triantafylidou, P., & Georgiadou, C. (2008). Nursing staff shortage and in- hospital informal care in an oncology hospital in Greece: The nursing staff's perceptions. *International Journal of Nursing Practice*, 14(3), 256-263.
- 2. Heston, T. F., & Simkin, P. P. (1991). Carbohydrate loading in preparation for childbirth. *Medical hypotheses*, *34*(2), 97-98.
- 3. Iftikhar, H., Khan, F. S., Al-Marri, N. D. R., Zaki, H. A., & Masood, M. (2022). Acute calculous cholecystitis with sinus bradycardia: Cope's sign encountered. Cureus, 14(1).
- 4. Scorza, A., Porazzi, E., Strozzi, F., Garagiola, E., Gimigliano, A., & De Filippis, G. (2022). A new approach for emergency department performance positioning: The quality- efficiency matrix. *The international journal of health planning and management*, *37*(3), 1636-1649.
- Zaki, H. A., Elarref, M. A., Iftikhar, H., Al-Marri, N. D. R., Masood, M., Fayed, M., ... & ELARREF IV, M. A. (2022). Efficacy of Emla (Eutectic Mixture of Local Anaesthetics) and Let (Lidocaine, Epinephrine, Tetracaine) for Topical Use in Wound Management for Children: A Systematic Review and Meta-Analysis. Cureus, 14(11).
- Zaki, H. A., Shaban, E., Bashir, K., Iftikhar, H., Zahran, A., Salem, W., & Elmoheen, A. (2022). A comparative study between amiodarone and implantable cardioverter-defibrillator in decreasing mortality from sudden cardiac death in high-risk patients: a systematic review and meta-analysis. Cureus, 14(6).



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Volume 01, Issue 01, 2022 https://sss.org.pk/index.php/sss

- Bobb, M. R., Ahmed, A., Van Heukelom, P., Tranter, R., Harland, K. K., Firth, B. M., ... & Mohr, N. M. (2018). Key high- efficiency practices of emergency department providers: a mixed- methods study. *Academic emergency medicine*, 25(7), 795-803.
- 8. Kotrotsiou, E., Krommydas, G., Papathanasiou, I., Kotrotsiou, S., Paralikas, T., Lahana, E., & Kiparissi, G. (2011). Anxiety and depression in teenagers and young adults with asthma. *Health Science Journal*, *5*(3), 229.
- 9. Heston, T. F. (2023). Safety of large language models in addressing depression. *Cureus*, 15(12).
- 10. Zaki, H. A., Bashir, K., Iftikhar, H., Salem, W., Mohamed, E. H., Elhag, H. M., ... & Kassem, A. A. (2022). An Integrative Comparative Study Between Digoxin and Amiodarone as an Emergency Treatment for Patients With Atrial Fibrillation With Evidence of Heart Failure: A Systematic Review and Meta-Analysis. Cureus, 14(7).
- Zaki, H. A., Iftikhar, H., Shallik, N., Elmoheen, A., Bashir, K., Shaban, E. E., & Azad, A. M. (2022). An integrative comparative study between ultrasound-guided regional anesthesia versus parenteral opioids alone for analgesia in emergency department patients with hip fractures: A systematic review and meta-analysis. Heliyon.
- 12. Taleb, M., Khalid, R., Ramli, R., & Nawawi, M. K. M. (2023). An integrated approach of discrete event simulation and a non-radial super efficiency data envelopment analysis for performance evaluation of an emergency department. *Expert Systems with Applications*, 220, 119653.
- 13. Gadde, S. S., & Kalli, V. D. R. (2020). Descriptive analysis of machine learning and its application in healthcare. *Int J Comp Sci Trends Technol, 8*(2), 189-196.
- 14. Gadde, S. S., & Kalli, V. D. (2021). The Resemblance of Library and Information Science with Medical Science. *International Journal for Research in Applied Science & Engineering Technology*, *11*(9), 323-327.
- 15. Zaki, H. A., Shallik, N., Shaban, E., Bashir, K., Iftikhar, H., Khair, Y. M., ... & Shallik, N. A. (2022). An analytical comparison between ketamine alone and a combination of ketamine and propofol (ketofol) for procedural sedation and analgesia from an emergency perspective: a systematic review and meta-analysis. Cureus, 14(7).
- 16. Tzenios, N., FRSPH, F., & FWAMS, F. (2022). BUDGET MANAGEMENT FOR THE NON-PROFIT ORGANIZATION. *International Journal of Global Economic Light*, 8(6), 9-13.
- 17. Gadde, S. S., & Kalli, V. D. R. (2020). Technology Engineering for Medical Devices-A Lean Manufacturing Plant Viewpoint. *Technology*, *9*(4).
- 18. Gadde, S. S., & Kalli, V. D. R. (2020). Medical Device Qualification Use. *International Journal of Advanced Research in Computer and Communication Engineering*, *9*(4), 50-55.
- 19. Emerson, B. L., Setzer, E., Blake, E., & Siew, L. (2022). Improving Quality and Efficiency in Pediatric Emergency Department Behavioral Health Care. *Pediatric Quality & Safety*, 7(1).
- 20. Heston, T. F. (2023). Statistical Significance Versus Clinical Relevance: A Head-to-Head Comparison of the Fragility Index and Relative Risk Index. *Cureus*, *15*(10).

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Volume 01, Issue 01, 2022 https://sss.org.pk/index.php/sss

- Krommydas, G., Kotrotsiou, E., Raftopoulos, V., Paralikas, T., Gourgoulianis, K. I., & Molyvdas, P. A. (2004). Smoking in health science students with asthma. *Canadian respiratory journal*, 11, 476-476.
- 22. Gadde, S. S., & Kalli, V. D. R. (2020). Artificial Intelligence To Detect Heart Rate Variability. *International Journal of Engineering Trends and Applications*, 7(3), 6-10.
- 23. Gadde, S. S., & Kalli, V. D. R. (2020). Applications of Artificial Intelligence in Medical Devices and Healthcare. *International Journal of Computer Science Trends and Technology*, *8*, 182-188.
- 24. Zaki, H. A., Zahran, A., Abdelrahim, M., Elnabawy, W. A., Kaber, Y., Abdelrahim, M. G., & Elsayed, W. A. E. (2022). A Case of Acute Viral Pericarditis Complicated With Pericardial Effusion Induced by Third Dose of COVID Vaccination. Cureus, 14(1).
- 25. Tzenios, N. (2021). U.S. Patent Application No. 16/655,293.
- 26. Zaki, H. A., Iftikhar, H., Shaban, A. E., Khyatt, O., Shaban, E. E., & Khyatt Sr, O. (2022). A Rare Case of Idiopathic Gonadal Vein Thrombosis. Cureus, 14(1).
- 27. Tzenios, N., Lewis, E. D., Crowley, D. C., Chahine, M., & Evans, M. (2022). Examining the efficacy of a very-low-carbohydrate ketogenic diet on cardiovascular health in adults with mildly elevated low-density lipoprotein cholesterol in an open-label pilot study. *Metabolic syndrome and related disorders*, 20(2), 94-103.
- 28. Zaki, H. A., Alhatemi, M., Hendy, M., Kaber, Y., & Iftikhar, H. (2022). A Case of New-Onset Atrial Fibrillation With Rapid Ventricular Response Due to Iatrogenic Hypothermia. Cureus, 14(4).
- 29. Batool, S., Morton Cuthrell, K., Tzenios, N., & Shehryar, Z. (2022). Hepatocellular Carcinoma in Non-alcoholic Fatty Liver Disease: Emerging Burden. *International Research Journal of Oncology*, 6(4), 93-104.
- 30. Heston, T. F. (2023). The cost of living index as a primary driver of homelessness in the United States: a cross-state analysis. *Cureus*, *15*(10).
- 31. Heston, T. F. (2023). The percent fragility index. Available at SSRN 4482643.
- 32. Shaban, E. E., Shaban, A. E., Shokry, A., Iftikhar, H., Zaki, H. A., & Shokry Sr, A. (2022). Atrial Fibrillation With Decompensated Heart Failure Complicated With Non-ST Elevation Myocardial Infarction. Cureus, 14(1).
- 33. Gadde, S. S., & Kalli, V. D. (2021). Artificial Intelligence at Healthcare Industry. *International Journal for Research in Applied Science & Engineering Technology (IJRASET)*, 9(2), 313.
- 34. Gadde, S. S., & Kalli, V. D. R. A Qualitative Comparison of Techniques for Student Modelling in Intelligent Tutoring Systems.
- 35. Tzenios, N., Tazanios, M. E., & Chahine, M. (2022). The impact of body mass index on prostate cancer: An updated systematic review and meta-analysis. *Medicine*, 101(45).
- 36. Zaki, H. A., Zahran, A., Shaban, A. E., Iftikhar, H., & Shaban, E. E. (2022). Laparoscopic Exploration Converted to Laparotomy in a Case of Rectal Perforation and Peritonitis After Administration of Enema. Cureus, 14(1).
- 37. Tzenios, N. (2022). The duke lacrosse scandal and ethics in prosecution. *International Journal of Political Science and Governance*, *4*, 118-121.
- 38. Zaki, H. A., Iftikhar, H., Bashir, K., Gad, H., Fahmy, A. S., & Elmoheen, A. (2022). A comparative study evaluating the effectiveness between ketogenic and low-carbohydrate diets on glycemic and weight control in patients with type 2 diabetes mellitus: a systematic review and meta-analysis. Cureus, 14(5).



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Volume 01, Issue 01, 2022 https://sss.org.pk/index.php/sss

- Tzenios, N. (2020). Examining the Impact of EdTech Integration on Academic Performance Using Random Forest Regression. *ResearchBerg Review of Science and Technology*, 3(1), 94-106.
- 40. Gadde, S. S., & Kalli, V. D. (2021). Artificial Intelligence and its Models. *International Journal for Research in Applied Science & Engineering Technology*, *9*(11), 315-318.
- 41. Gadde, S. S., & Kalli, V. D. Artificial Intelligence, Smart Contract, and Islamic Finance.
- 42. Zaki, H. A., Elmoheen, A., Elsaeidy, A. M. E., Shaban, A. E., & Shaban, E. E. (2021). Normal Ddimer plasma level in a case of acute thrombosis involving intramuscular gastrocnemius vein. Cureus, 13(12).
- 43. Zaki, H. A., Shaban, E. E., Shaban, A. E., Hodhod, H., & Elmoheen, A. (2021). Camel bite injury to the face in an adult patient: skin closure controversy. Cureus, 13(11).
- 44. Tzenios, N. (2019). The Impact of Health Literacy on Employee Productivity: An Empirical Investigation. *Empirical Quests for Management Essences*, 3(1), 21-33.
- 45. Zaki, H. A., Shaban, A. E., Shaban, A. E., Shaban, E. E., & Shaban, A. (2022). Interpretation of cardiac and non-cardiac causes of elevated troponin T levels in non-acute coronary syndrome patients in the emergency department. Cureus, 14(2).
- 46. Gadde, S. S., & Kalli, V. D. An Innovative Study on Artificial Intelligence and Robotics.
- 47. Tzenios, N., Tazanios, M. E., & Chahine, M. (2022). Combining Influenza and COVID-19 Booster Vaccination Strategy to improve vaccination uptake necessary for managing the health pandemic: A Systematic Review and Meta-Analysis. *Vaccines*, *11*(1), 16.

