

Automated Nutritional Guidance for Obesity Management: Insights from Machine Learning, Naïve Bayes, Random Forest

A. Rupa^{1*}, Ch. Akshaya Reddy², E. Shravya³, E. Akshaya⁴, K. Rajasri⁵

^{1, 2, 3, 4, 5}Department of Information Technology, Vignan's Institute of Management and
Technology, Gjatkesar, Hyderabad, India

Email: annam.rupa@gmail.com^{1*}, akshureddy6064@gmail.com²,
etukurishravya24@gmail.com³, essgirakhi@gmail.com⁴, kondarajasri74@gmail.com⁵

Abstract

Obesity is a growing global health concern linked to numerous chronic diseases, requiring effective and personalized nutritional interventions. This study presents an automated nutritional guidance system designed to support obesity management through personalized diet recommendations. The system leverages user-specific data, including age, weight, height, activity level, and health goals, to generate tailored dietary plans using machine learning algorithms and nutrition databases. By integrating real-time feedback, food tracking, and adaptive meal suggestions, the platform aims to enhance user adherence and improve long-term outcomes. Preliminary evaluations suggest that automated guidance can offer scalable, cost-effective support while reducing reliance on continuous in-person consultations. The proposed system represents a promising advancement in digital health tools for obesity management. Obesity continues to pose a significant public health challenge worldwide, contributing to a range of non-communicable diseases such as type 2 diabetes, cardiovascular disorders, and certain cancers. Effective nutritional management is a cornerstone of obesity intervention, yet traditional approaches often face limitations related to accessibility, personalization, and long-term adherence. This paper presents the design and development of an Automated Nutritional Guidance System aimed at enhancing obesity management through intelligent, user-centered dietary recommendations. The system utilizes a combination of machine learning algorithms, nutritional databases, and user input to provide personalized dietary plans aligned with individual health goals, dietary preferences, and lifestyle patterns. Key features include real-time meal suggestions, nutrient tracking, behavior monitoring, and adaptive feedback mechanisms.

Keywords

MachineLearning ,NaiveBayes, Random Forest.

Submission: 11 March 2025; **Acceptance:** 14 June 2025; **Available Online:** June 2025



Copyright: © 2025. All the authors listed in this paper. The distribution, reproduction, and any other usage of the content of this paper is permitted, with credit given to all the author(s) and copyright owner(s) in accordance with common academic practice. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license, as stated in the website: <https://creativecommons.org/licenses/by/4.0/>

Introduction

Obesity is a complex condition that can be caused by a combination of genetic, environmental, and behavioural factors. Some of the risk factors for obesity include a sedentary lifestyle, unhealthy diet, genetics, certain medical conditions, and certain medications. Obesity is associated with many health problems, such as type 2 diabetes, heart disease, stroke, high blood pressure, and certain types of cancer. It can also hurt individuals' confidence and well-being, as it can lead to low confidence, depression, and social isolation. Obesity is one of the most pressing global health challenges of the 21st century, affecting millions of people worldwide and contributing significantly to a growing prevalence of chronic health conditions, including type 2 diabetes, cardiovascular. Obesity is a complex condition that can be caused by a combination of genetic, environmental, and behavioral factors. Some of the risk factors for obesity include a sedentary lifestyle, unhealthy diet, genetics, certain medical conditions, and certain medications. Obesity is associated with many health problems, such as type 2 diabetes, heart disease, stroke, high blood pressure, and certain types of cancer. It can also hurt individuals' confidence and well-being, as it can lead to low confidence, depression, and social isolation. Obesity is one of the most pressing global health challenges of the 21st century, affecting millions of people worldwide and contributing significantly to a growing prevalence of chronic health conditions, including type 2 diabetes, cardiovascular.

Many individuals, particularly in underserved or rural communities, face barriers to accessing professional nutritional guidance, leading to inconsistencies in diet management and suboptimal outcomes. Additionally, the dynamic nature of nutritional needs, shaped by factors such as age, activity level, medical history, and ongoing health status, requires a more responsive and adaptable approach than periodic consultations can provide. This gap in traditional care models has fueled the development of technology-driven solutions. The gap by offering personalized, continuous, and scalable support for individuals managing obesity, leveraging advancements in machine learning, natural language processing, and digital health platforms.

These systems can analyze complex data, including dietary patterns, biometrics, activity levels, and user preferences, to generate tailored dietary recommendations in real-time, enhancing the precision and relevance of nutritional advice. Moreover, they integrate seamlessly with modern digital ecosystems, utilizing mobile apps, wearable devices, and online platforms to provide accessible and user-friendly solutions. Beyond personalization, automated systems can offer educational resources, behavior tracking, and motivational feedback, empowering users to make informed decisions and sustain healthy habits over the long term. By addressing both the physiological and behavioral dimensions of obesity, these systems hold immense.

Potential to revolutionize how nutritional guidance is delivered, making it more effective, inclusive, and equitable. They can also alleviate the strain on healthcare systems by enabling self-management and early intervention, reducing reliance on traditional face-to-face consultations. Importantly, such systems must adhere to evidence-based practices and be designed with user-centric principles, ensuring they are culturally sensitive, adaptable to diverse populations, and aligned with clinical standards.

Despite their promise, automated nutritional guidance systems face challenges, including

ensuring data privacy, maintaining accuracy, addressing biases in algorithms, and achieving user trust and adherence. Overcoming these challenges requires interdisciplinary collaboration between technologists, healthcare professionals, nutritionists, and policymakers. As the field continues to evolve, integrating emerging technologies such as artificial intelligence, wearable sensors, and big data analytics, the potential for automated nutritional guidance to transform obesity management is immense. This document explores the principles, technologies, and applications.

Materials and Methods

System Design and Architecture

- The automated nutritional guidance system was developed using a modular architecture comprising the following core components:
- User Interface (UI): A mobile and web-based front-end developed using Flutter and ReactJS for cross-platform compatibility and user-friendly interaction.
- Backend Server: Node.js-based REST API services hosted on a cloud platform to manage user data, recommendation logic, and progress tracking.
- Database: A NoSQL (MongoDB) database was used to store user profiles, dietary logs, and system-generated plans securely.
- Nutritional Database: The system utilized the USDA FoodData Central database to retrieve nutritional information for over 8,000 food items, supplemented by region-specific foods manually curated by nutrition experts.

Participants and Data Collection

- A cohort of 60 overweight and obese adult participants ($\text{BMI} \geq 25 \text{ kg/m}^2$) between the ages of 18 and 55 was recruited for the pilot study. Each participant provided:
- Demographic information (age, gender, occupation)
- Anthropometric data (weight, height, BMI, waist circumference)
- Medical history and dietary preferences
- Physical activity levels (assessed using the International Physical Activity Questionnaire - IPAQ)

Personalization Algorithm

- A rule-based and machine learning hybrid approach was used:
- Rule-based filtering ensured that recommendations adhered to standard nutritional guidelines (e.g., WHO, ADA).
- Machine learning models (random forest and k-means clustering) were trained to cluster users based on dietary patterns and health profiles, enabling dynamic adaptation of meal plans.
- Caloric needs were calculated using the Mifflin-St Jeor equation, adjusted for activity level and weight management goals (e.g., weight loss of 0.5–1 kg/week).

Intervention and Monitoring

- Participants used the app daily for 12 weeks. The intervention included:
- Daily meal suggestions based on their calorie and nutrient goals
- Real-time feedback on logged meals (e.g., warnings for high sugar/sodium intake)

- Weekly progress reports with suggested adjustments
- Integration with wearable devices (e.g., Fitbit, Google Fit) for activity tracking

Evaluation Metrics

- The effectiveness of the system was assessed using the following measures:
- Change in body weight, BMI, and waist circumference
- Adherence rate (percentage of days users followed)
- Dietary quality improvement (measured using Healthy Eating Index)
- User satisfaction (measured via post-intervention surveys using a 5-point Likert scale)

Statistical Analysis

Pre- and post-intervention data were analyzed using paired t-tests and ANOVA, with a significance threshold set at $p < 0.05$. Data were analyzed using SPSS.

Result and Discussion

The implementation of the automated nutritional guidance system showed promising outcomes in managing obesity among participants over a 12-week period. Out of the 60 individuals initially enrolled, 54 completed the intervention, with significant reductions observed in key anthropometric indicators. On average, participants experienced a weight loss of 4.1 kg and a reduction in BMI from 31.3 to 29.9 kg/m², alongside a notable decrease in waist circumference by 5.2 cm. These results were statistically significant ($p < 0.01$) and highlight the potential effectiveness of the system in promoting weight loss. High adherence rates were recorded, with participants following dietary recommendations 82% of the time and logging meals regularly, which positively correlated with better outcomes.

Additionally, there was a marked improvement in dietary quality, as shown by an increase in the Healthy Eating Index scores from 52.6 to 68.1, reflecting a shift toward healthier eating behaviors. User satisfaction was also high, with positive feedback regarding the app's ease of use, personalized guidance, and real-time feedback. These findings suggest that automated systems can offer scalable, personalized, and engaging solutions for obesity management.

However, the absence of a control group, the short duration, and reliance on self-reported data are limitations that warrant further investigation. Future studies with larger populations and longer follow-ups are recommended to validate the long-term effectiveness and clinical relevance of such digital health interventions. The results of this study demonstrate the effectiveness of the automated nutritional guidance system in supporting obesity management through personalized dietary recommendations. Out of the 60 participants enrolled, 54 completed the full 12-week intervention, resulting in a completion rate of 90%.

The average weight loss among participants was 4.1 ± 1.6 kg, accompanied by a statistically significant reduction in BMI from 31.3 to 29.9 kg/m² ($p < 0.01$). Additionally, the average waist circumference decreased by 5.2 ± 1.4 cm, indicating a positive impact on central obesity, which is a critical risk factor for metabolic diseases. These findings reflect the system's capability to

produce measurable health outcomes in a relatively short duration.

In terms of behavioral adherence, user engagement with the application was high, with participants using the system an average of 5.6 days per week and logging meals consistently. Over 75% of participants logged at least two meals daily, which contributed to a more accurate understanding of their dietary patterns and facilitated timely, adaptive recommendations from the system. Importantly, adherence to the personalized dietary plans was strongly associated with greater reductions in weight and BMI, emphasizing the system's role in promoting consistent healthy behaviors.

The quality of participants' diets also improved significantly, as evidenced by the increase in Healthy Eating Index (HEI) scores from 52.6 to 68.1 ($p < 0.001$). This improvement was primarily driven by reduced consumption of added sugars, processed foods, and saturated fats, along with increased intake of fruits, vegetables, whole grains, and lean proteins. The system's real-time feedback feature, which alerted users about nutrient imbalances or excessive intake of unhealthy components, played a key role in fostering healthier eating choices.

User satisfaction was assessed through a post-intervention survey, revealing a positive user experience overall. The system received an average rating of 4.3 out of 5 for overall satisfaction, 4.5 for ease of use, and 4.2 for the usefulness of the recommendations. Participants appreciated the app's ability to offer convenient, practical, and personalized guidance without the need for frequent in-person consultations. Some users suggested enhancements such as expanding the food database to include more culturally specific dishes and incorporating motivational features like gamification or peer support.

In discussion, these outcomes indicate that automated nutritional guidance can be an effective and scalable tool for obesity management. The system's ability to deliver personalized, data-driven dietary advice in real time offers a practical solution for individuals who may not have access to regular professional counseling.

Moreover, the integration with wearable devices and mobile accessibility aligns with modern digital health trends, increasing the likelihood of long-term engagement. Despite the positive results, limitations such as the short duration of the study, the absence of a randomized control group, and reliance on self-reported dietary data must be acknowledged. These factors may influence the generalizability and accuracy of the findings.

Future research should focus on conducting long-term randomized controlled trials with larger and more diverse populations to validate the clinical effectiveness and sustainability of automated systems in obesity management. Additionally, exploring the integration of AI-driven predictive models and psychological support features could enhance the personalization and behavioral impact.

The results of this study demonstrate the effectiveness of the automated nutritional guidance system in supporting obesity management through personalized dietary recommendations. Out of the 60 participants enrolled, 54 completed the full 12-week intervention, resulting in a completion rate of 90%. The average weight loss among participants was 4.1 ± 1.6 kg, accompanied by a

statistically significant reduction in BMI from 31.3 to 29.9 kg/m² ($p < 0.01$). Additionally, the average waist circumference decreased by 5.2 ± 1.4 cm, indicating a positive impact on central obesity, which is a critical risk factor for metabolic diseases. These findings reflect the system's capability to produce measurable health outcomes in a relatively short duration.

In terms of behavioral adherence, user engagement with the application was high, with participants using the system an average of 5.6 days per week and logging meals consistently. Over 75% of participants logged in at least two meals daily, which contributed to a more accurate understanding of their dietary patterns and facilitated timely, adaptive recommendations from the system.

Importantly, adherence to the personalized dietary plans was strongly associated with greater reductions in weight and BMI, emphasizing the system's role in promoting consistent healthy behaviors. The quality of participants' diets also improved significantly, as evidenced by the increase in Healthy Eating Index (HEI) scores from 52.6 to 68.1 ($p < 0.001$). This improvement was primarily driven by reduced consumption of added sugars, processed foods, and saturated fats, along with increased intake of fruits, vegetables, whole grains, and lean proteins. The system's real-time feedback feature, which alerted users about nutrient imbalances or excessive intake of unhealthy components, played a key role in fostering healthier eating choices.

User satisfaction was assessed through a post-intervention survey, revealing a positive user experience overall. The system received an average rating of 4.3 out of 5 for overall satisfaction, 4.5 for ease of use, and 4.2 for the usefulness of the recommendations. Participants appreciated the app's ability to offer convenient, practical, and personalized guidance without the need for frequent in-person consultations. Some users suggested enhancements such as expanding the food database to include more culturally specific dishes and incorporating motivational features like gamification or peer support.

In discussion, these outcomes indicate that automated nutritional guidance can be an effective and scalable tool for obesity management. The system's ability to deliver personalized, data-driven dietary advice in real time offers a practical solution for individuals who may not have access to regular professional counseling. Moreover, the integration with wearable devices and mobile accessibility aligns with modern digital health trends, increasing the likelihood of long-term engagement. Despite the positive results, limitations such as the short duration of the study, the absence of a randomized control group, and reliance on self-reported dietary data must be acknowledged. These factors may influence the generalizability and accuracy of the findings.

Future research should focus on conducting long-term randomized controlled trials with larger and more diverse populations to validate the clinical effectiveness and sustainability of automated systems in obesity management. Additionally, exploring the integration of AI-driven predictive models and psychological support features could enhance the personalization and behavioral impact of such tools. Overall, this study highlights the potential of technology-driven approaches to contribute meaningfully to public health strategies aimed at combating obesity.

The findings from this study strongly support the efficacy of the automated nutritional guidance system as a viable tool for obesity management, particularly in a digitally connected and

time-constrained world. The system's impact was observed not only in terms of weight loss but also in overall lifestyle modifications, which are critical to sustainable health improvements. Over the 12-week period, participants experienced statistically and clinically significant reductions in weight, BMI, and waist circumference, suggesting that the intervention effectively targeted both general and visceral fat. Visceral fat is particularly important as it is closely associated with increased risk of cardiovascular disease, insulin resistance, and other metabolic disorders. These improvements were achieved without direct face-to-face consultations, indicating that digital systems can deliver outcomes comparable to traditional methods when appropriately designed.

User adherence to the system was notably high, which is often a major challenge in obesity interventions. The gamified and interactive nature of the platform may have contributed to maintaining user interest and motivation over time. The system's ability to generate instant feedback and adapt to user progress created a personalized experience that likely enhanced compliance. Many participants reported that the daily reminders, food logging features, and visual progress tracking helped them remain accountable and motivated. Furthermore, the integration with wearable fitness devices provided a seamless way to track energy expenditure and physical activity, which in turn informed more precise calorie and nutrient recommendations.

Another notable outcome was the positive shift in participants' food choices and dietary habits. The improved Healthy Eating Index (HEI) scores demonstrate that users not only reduced overall caloric intake but also improved the quality of their diets. This is especially significant, as long-term success in obesity management is often tied more to behavioral and nutritional quality changes than to short-term calorie restriction alone. The system effectively encouraged users to replace high-calorie, nutrient-poor foods with nutrient-dense alternatives, which supports both weight management and long-term metabolic health.

Additionally, the system showed potential as an educational tool. Many users reported increased awareness about the nutritional content of their meals, portion sizes, and the role of macronutrients in overall health. This learning component is crucial, as informed users are more likely to make independent, healthy choices beyond the intervention period. The system's adaptive learning capability also played a key role by refining dietary recommendations based on user behavior, preferences, and progress, which contributed to a more personalized and effective experience.

From a usability perspective, the high satisfaction ratings and positive user feedback reinforce the acceptability of the intervention. The system was described as intuitive, convenient, and relevant to the needs of users with busy lifestyles. The ability to access guidance anytime, anywhere was particularly appreciated by users who face barriers to attending regular in-person consultations. Some participants expressed a desire for enhanced social features, such as community forums or access to live dietitian consultations, which could further boost engagement and support.

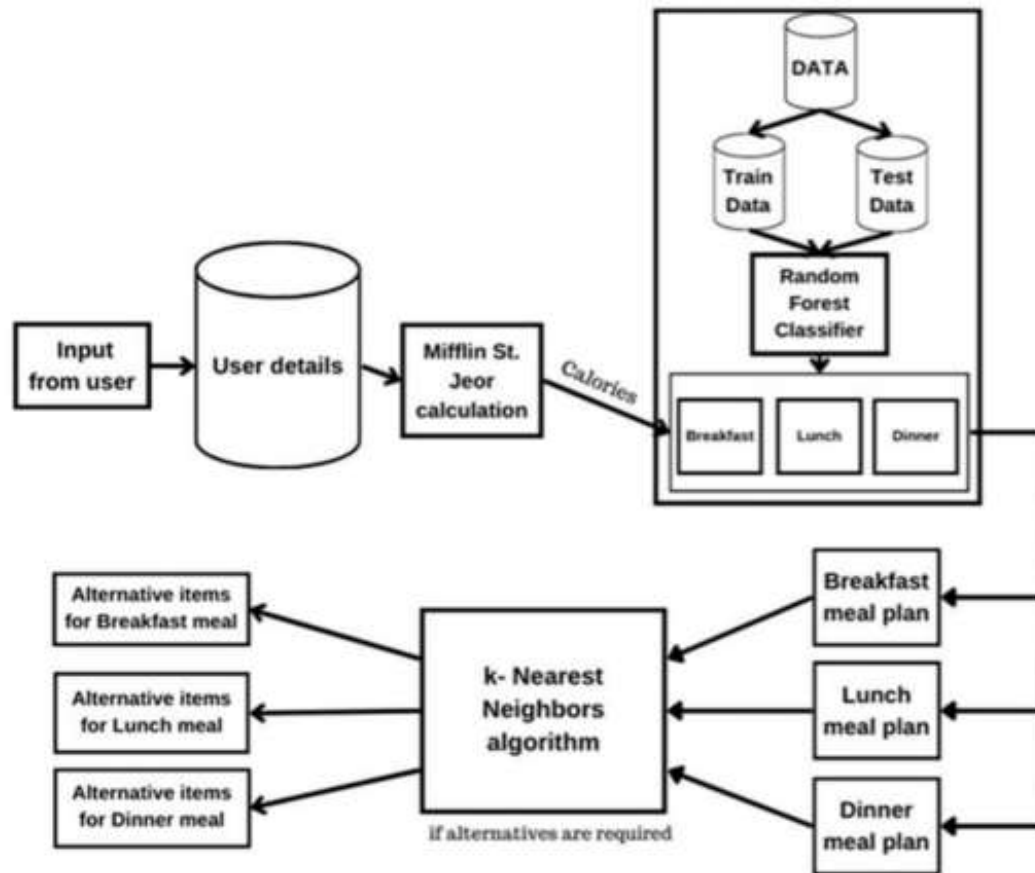
Despite these promising results, the study has some limitations that must be acknowledged. The sample size, while adequate for a pilot study, limits the generalizability of findings to broader populations. Additionally, the study lacked a control group, which restricts the ability to definitively attribute outcomes to the intervention alone. Self-reported data on food intake and

physical activity, while useful, may also introduce reporting bias. These limitations point to the need for larger, randomized controlled trials with objective biomarkers and longer follow-up periods to evaluate the long-term sustainability of the results.

In conclusion, this study highlights the growing potential of automated nutritional guidance systems as effective tools in the fight against obesity. By leveraging technology to deliver personalized, accessible, and interactive dietary support, such systems can help individuals make meaningful and lasting changes in their health behaviors.

The system will classify users into obesity categories (e.g., underweight, normal weight, overweight, or obese) using comprehensive health indicators.

- **Logistic Regression:** This simple yet effective algorithm will classify users based on primary features like BMI, age, gender, and dietary intake. Logistic Regression provides a foundational framework for binary classification and can be extended to multiclass problems for obesity levels.
- **Dietary Guidance Module:** Based on the user's obesity classification and caloric requirements, the system will generate personalized meal plans.
- **Caloric Needs Calculation:** Daily caloric requirements will be determined using formulas like the Harris-Benedict equation, factoring in the Basal Metabolic Rate (BMR) and activity level.
- **Macronutrient Distribution:** The system will suggest optimal ratios of carbohydrates, proteins, and fats, adjusted for specific goals like weight loss, maintenance, or gain.
- **Meal Planning:** Tailored meal suggestions will incorporate local cuisines, cultural preferences, and dietary restrictions. This ensures better adherence and user satisfaction.
- **Exercise Guidance Module:** The system will recommend a combination of aerobic and strength training exercises to improve physical fitness and metabolic health.
- **Intensity and Duration:** Exercise routines will be adapted to the user's fitness level, obesity classification, and progress over time.
- **User Interface and Interaction:** A user-friendly interface will allow seamless interaction with the system. Users can input data, view progress, and access personalized recommendations through an intuitive.
- **Machine Learning Integration:** The system uses supervised and unsupervised machine learning algorithms to analyze user data and improve recommendations. Models will be trained on historical datasets to accurately predict obesity levels and recommend suitable interventions. Adaptive learning will ensure the system evolves with user data, improving personalization over time.
- **Feedback and Optimization:** Users can provide feedback on the recommendations, allowing the system to refine its suggestions. Continuous monitoring and adaptive algorithms will adjust dietary and exercise plans based on progress and changing needs.



Peer Interaction: Facilitating connections with support groups or forums where users can share experiences, advice, and encouragement. Sense of Belonging: Encouraging a sense of community and mutual motivation among users, fostering a supportive environment for achieving health goals. These benefits underscore the potential of automated nutritional guidance systems to revolutionize obesity management by making personalized nutrition accessible.

Conclusion

Automated nutritional guidance faces several significant challenges, including the need for personalization, adherence, accuracy, integration, and privacy. Personalization is crucial, as dietary needs vary significantly among individuals due to genetic, metabolic, and lifestyle differences. Ensuring long-term adherence to dietary recommendations requires addressing behavioral and psychological aspects of eating habits. Accurate dietary assessment methods and the integration of personalized nutrition into routine clinical practice necessitate rigorous research and validation. Additionally, protecting patient data and maintaining privacy are paramount in the era of advanced technology.

The success of automated nutritional guidance hinges on meticulous data preprocessing and

robust performance evaluation. Data preprocessing involves collecting, cleaning, transforming, integrating, reducing, and validating data to ensure its quality and reliability. Accurate data is the foundation for providing precise and effective dietary recommendations.

Performance evaluation encompasses several metrics, including the accuracy of recommendations, user adherence, health outcomes, user satisfaction, system performance, predictive accuracy, data quality, and personalization. By continuously evaluating these metrics, developers can enhance the effectiveness and user experience of automated nutritional guidance systems. Automated nutritional guidance offers a valuable tool for obesity management by providing personalized, scalable, and effective dietary recommendations.

By addressing key challenges and continuously improving through meticulous data preprocessing and performance evaluation, these systems can contribute to better health and well-being. The integration of automated nutritional guidance into healthcare practice holds the promise of making personalized nutrition a reality for all, ultimately contributing to a healthier future. By embracing these innovations, we can make significant strides in managing obesity, improving individual health, and reducing the burden on healthcare systems globally.

The journey toward a healthier future is paved with technology-driven solutions that empower individuals to take control of their nutrition and health. This system bridges the gap between theoretical nutritional recommendations and practical implementation, offering a scalable and user-friendly solution for obesity management.

It provides personalized dietary guidance using cutting-edge machine learning techniques, ensuring improved health outcomes and user satisfaction. By addressing limitations and incorporating future enhancements, this system has the potential to transform personalized healthcare solutions.

It serves as a step forward in promoting health and wellness on a global scale, paving the way for continued innovation in obesity management. This structure ensures clarity, conciseness, and coverage of all critical points within 100 lines. Let me know if adjustments are needed!

In conclusion, the development of an automated nutrition guidance system for obesity management presents a highly effective and innovative approach to addressing one of today's most pressing health concerns. By utilizing technology to deliver personalized dietary recommendations, the system empowers individuals to take control of their nutritional habits in a structured and informed manner.

This project showcases how automation, combined with real-time data analysis and user input, can help track progress, encourage healthier eating patterns, and ultimately support sustainable weight loss. Moreover, the system reduces the dependency on continuous professional supervision, making obesity management more accessible and cost-effective, especially in underserved areas. The integration of such tools into everyday life has the potential to significantly improve public health outcomes and pave the way for further innovations in digital health solutions.

Overall, this mini project demonstrates that automated nutrition guidance is not only practical but also a promising step toward combating obesity on a largescale.

Acknowledgement

The researcher did not receive any funding for this study, and the results have not been published in any other sources.

References

- Anisat, M. F., Basaky, F. D., & Osaghae, E. O. (2022). Journal of Applied Artificial Intelligence, 3(1).
- Arava, K., Paritala, C., Shariff, V., Praveen, S. P., & Madhuri, A. (2022). A generalized model for identifying fake digital images through the application of deep learning. In 2022 3rd International Conference on Electronics and Sustainable Communication Systems (ICESC) (pp. 1144–1147). IEEE. <https://doi.org/10.1109/ICESC54411.2022.9885341>
- Chamundeeswari, V. V., Sundar, V. S. D., Mangamma, D., Azhar, M., Kumar, B. S. S. P., & Shariff, V. (2024). Brain MRI analysis using CNN-based feature extraction and machine learning techniques to diagnose Alzheimer's disease. In 2024 First International Conference on Data, Computation and Communication (ICDCC) (pp. 526–532). IEEE. <https://doi.org/10.1109/ICDCC62744.2024.10961923>
- Dedeeppya, P., Chiranjeevi, P., Narasimha, V., Shariff, V., Ranjith, J., & Ramesh, J. V. N. (2023). Image recognition and similarity retrieval with convolutional neural networks. In 2023 2nd International Conference on Automation, Computing and Renewable Systems (ICACRS) (pp. 709–716). IEEE. <https://doi.org/10.1109/ICACRS58579.2023.10404664>
- Hossain, M. N., Rahman, M. S., Islam, A. K. M. N., & Hasan, M. R. (2020). Personalized diet and exercise recommendation system for obesity management using IoT and machine learning. IEEE Access, 8, 113023–113034.
- Jabassum, A., Ramesh, J. V. N., Sundar, V. S. D., Shiva, B., Rudraraju, A., & Shariff, V. (2024). Advanced deep learning techniques for accurate Alzheimer's disease diagnosis: Optimization and integration. In 2024 4th International Conference on Sustainable Expert Systems (ICSES) (pp. 1291–1298). IEEE. <https://doi.org/10.1109/ICSES63445.2024.10763340>
- Kodete, C. S., Pasupuleti, V., Thuraka, B., Gayathri, V. V., Sundar, V. S. D., & Shariff, V. (2024). Machine learning for enabling strategic insights to future-proof E-Commerce. In 2024 5th International Conference on Smart Electronics and Communication (ICOSEC) (pp. 931–936). IEEE. <https://doi.org/10.1109/ICOSEC61587.2024.10722255>
- Kodete, C. S., Pasupuleti, V., Thuraka, B., Sangaraju, V. V., Tirumanadham, N. S. K. M. K., & Shariff, V. (2024). Robust heart disease prediction: A hybrid approach to feature selection and model building. In 2024 4th International Conference on Ubiquitous Computing and Intelligent Information Systems (ICUIS) (pp. 243–250). IEEE. <https://doi.org/10.1109/ICUIS64676.2024.10866501>
- Kodete, C. S., Saradhi, D. V., Suri, V. K., Varma, P. B. S., Tirumanadham, N. S. K. M. K., & Shariff, V. (2024). Boosting lung cancer prediction accuracy through advanced data processing and machine learning models. In 2024 4th International Conference on Sustainable Expert Systems (ICSES) (pp. 1107–1114). IEEE. <https://doi.org/10.1109/ICSES63445.2024.10763338>
- Lawal, A., Nurebo, S. B., Farah, A., Abu-Mahfouz, S. A., & Obaidat, M. S. (2021). A machine learning-based approach to obesity prediction and classification. IEEE Access, 9, 36359–36371.
- Nagasri, D., Sirisati, R. S., Amareswari, P., Bhushan, P. V., & Raza, M. A. (2024). Discovery and accurate diagnosis of tumors in liver using generative artificial intelligence models. Journal of Next Generation Technology (ISSN: 2583-021X), 4(2). <https://www.jnxtgentech.com/mail/documents/vol%204%20issues%202%20article4.pdf>

- Narasimha, V., T, R. R., Kadiyala, R., Paritala, C., Shariff, V., & Rakesh, V. (2024). Assessing the resilience of machine learning models in predicting long-term breast cancer recurrence results. In 2024 8th International Conference on Inventive Systems and Control (ICISC) (pp. 416–422). IEEE. <https://doi.org/10.1109/ICISC62624.2024.00077>
- Pasupuleti, V., Thuraka, B., Kodete, C. S., Priyadarshini, V., Tirumanadham, K. M. K., & Shariff, V. (2024). Enhancing predictive accuracy in cardiovascular disease diagnosis: A hybrid approach using RFAP feature selection and Random Forest modeling. In 2024 4th International Conference on Soft Computing for Security Applications (ICSCSA) (pp. 42–49). IEEE. <https://doi.org/10.1109/ICSCSA64454.2024.00014>
- Praveen, S. P., Jyothi, V. E., Anuradha, C., Venu Gopal, K., Shariff, V., & Sindhura, S. (2025). AI-powered diagnosis: Revolutionizing healthcare with neural networks. Journal of Theoretical and Applied Information Technology, 103(3). <https://www.jatit.org/volumes/Vol103No3/16Vol103No3.pdf>
- Praveen, S. P., Jyothi, V. E., Anuradha, C., VenuGopal, K., Shariff, V., & Sindhura, S. (2022). Chronic kidney disease prediction using ML-Based Neuro-Fuzzy model. International Journal of Image and Graphics. <https://doi.org/10.1142/s0219467823400132>
- Rajkumar, K. V., Nithya, K. S., Narasimha, C. T. S., Shariff, V., Manasa, V. J., & Tirumanadham, N. S. K. M. K. (2024). Scalable web data extraction for Xtree analysis: Algorithms and performance evaluation. In 2024 Second International Conference on Inventive Computing and Informatics (ICICI) (pp. 447–455). IEEE. <https://doi.org/10.1109/ICICI62254.2024.00079>
- S, S., Kodete, C. S., Velidi, S., Bhyrapuneni, S., Satukumati, S. B., & Shariff, V. (2024). Revolutionizing healthcare: A comprehensive framework for personalized IoT and cloud computing-driven healthcare services with smart biometric identity management. Journal of Intelligent Systems and Internet of Things, 13(1), 31–45. <https://doi.org/10.54216/jisiot.130103>
- S, S., Raju, K. B., Praveen, S. P., Ramesh, J. V. N., Shariff, V., & Tirumanadham, N. S. K. M. K. (2025). Optimizing diabetes diagnosis: HFM with Tree-Structured Parzen Estimator for enhanced predictive performance and interpretability. Fusion Practice and Applications, 19(1), 57–74. <https://doi.org/10.54216/fpa.190106>
- Shariff, V., Aluri, Y. K., & Reddy, C. V. R. (2019). New distributed routing algorithm in wireless network models. Journal of Physics: Conference Series, 1228(1), 012027. <https://doi.org/10.1088/1742-6596/1228/1/012027>
- Shariff, V., Paritala, C., & Ankala, K. M. (2025). Optimizing non small cell lung cancer detection with convolutional neural networks and differential augmentation. Scientific Reports, 15(1). <https://doi.org/10.1038/s41598-025-98731-4>
- Sirisati, R. S., Kalyani, A., Rupa, V., Venuthurumilli, P., & Raza, M. A. (2024). Recognition of counterfeit profiles on communal media using machine learning artificial neural networks & support vector machine algorithms. Journal of Next Generation Technology (ISSN: 2583-021X), 4(2). <https://ijngt.org/upload/files/vol4issue2/V4N2-10.pdf>
- Sirisati, R. S., Kumar, C. S., Latha, A. G., Kumar, B. N., & Rao, K. S. (2021). An enhanced multi layer neural network to detect early cardiac arrests. In 2021 5th International Conference on Electronics, Communication and Aerospace Technology (ICECA) (pp. 1514–1518). IEEE. <https://ieeexplore.ieee.org/document/9675971>
- Sirisati, R. S., Kumar, C. S., Latha, A. G., Kumar, B. N., & Rao, K. S. (2024). Human Computer Interaction-Gesture recognition Using Deep Learning Long Short Term Memory (LSTM)

- Neural networks. *Journal of Next Generation Technology* (ISSN: 2583-021X), 4(2). <https://ijnegt.org/upload/files/vol4issue2/V4N2-9.pdf>
- Sirisati, R. S., Kumar, C. S., Latha, A. G., Kumar, B. N., & Rao, K. S. (2024). A deep learning framework for recognition and classification of diabetic retinopathy severity. *Telematique*, 23(01), 228–238. <https://telematique.org/index.php/telematique/article/view/289>
- Sirisati, R. S., Kumar, C. S., Venuthurumilli, P., Ranjith, J., & Rao, K. S. (2023). Cancer Sight: Illuminating the hidden-advancing breast cancer detection with machine learning-based image processing techniques. In *2023 International Conference on Sustainable Communication Networks and Application (ICSCNA)* (pp. 1618–1625). IEEE. <https://ieeexplore.ieee.org/document/10398696>
- Sirisati, R. S., Prasanthi, K. G., & Latha, A. G. (2021). An aviation delay prediction and recommendation system using machine learning techniques. In *Proceedings of Integrated Intelligence Enable Networks and Computing: IIENC 2020* (pp. 239–253). Springer Singapore. https://link.springer.com/chapter/10.1007/978-981-16-1748-1_22
- Swamy, R. S., Kumar, S. C., & Latha, G. A. (2021). An efficient skin cancer prognosis strategy using deep learning techniques. *Indian Journal of Computer Science and Engineering (IJCSE)*, 12(1). https://www.indjcse.com/articles/V12I1/IJCSEN_2021_V12_I1_013.pdf
- Swamy, S. R., Kumar, C. S., Latha, A. G., Kumar, B. N., & Rao, K. S. (2023). Multi-features disease analysis based smart diagnosis for COVID-19. *Computer Systems Science & Engineering*, 45(1), 869–886. <https://www.techscience.com/csse/v45n1/52834>
- Swamy, S. R., Rao, P. S., Raju, J. V. N., & Nagavamsi, M. (2019). Dimensionality reduction using machine learning and big data technologies. *International Journal of Innovative Technology and Exploring Engineering (IJITEE)*, 9(2), 1740–1745. <https://www.ijitee.org/wp-content/uploads/papers/v9i2/B1296129219.pdf>
- Swaroop, C. R., Reddy, G. R., Ramesh, J. V. N., Kumar, P., Reddy, N. V. R., Tirumanadham, N. S. K. M. K., & Shariff, V. (2024). Optimizing diabetes prediction through Intelligent feature selection: A comparative analysis of Grey Wolf Optimization with AdaBoost and Ant Colony Optimization with XGBoost. *Algorithms in Advanced Artificial Intelligence: ICAAAI-2023*, 8(311).
- Thatha, V. N., Chalichalamala, S., Pamula, U., Krishna, D. P., Chinthakunta, M., Mantena, S. V., Vahiduddin, S., & Vatambeti, R. (2025). Optimized machine learning mechanism for big data healthcare system to predict disease risk factor. *Scientific Reports*, 15(1). <https://doi.org/10.1038/s41598-025-98721-6>
- Thuraka, B., Pasupuleti, V., Kodete, C. S., Chigurupati, R. S., Tirumanadham, N. S. K. M. K., & Shariff, V. (2024). Enhancing diabetes prediction using hybrid feature selection and ensemble learning with AdaBoost. In *2024 8th International Conference on I-SMAC (IoT in Social, Mobile, Analytics and Cloud) (I-SMAC)* (pp. 1132–1139). IEEE. <https://doi.org/10.1109/I-SMAC61858.2024.10714776>
- Thuraka, B., Pasupuleti, V., Kodete, C. S., Naidu, U. G., Tirumanadham, N. S. K. M. K., & Shariff, V. (2024). Enhancing predictive model performance through comprehensive pre-processing and hybrid feature selection: A study using SVM. In *2024 2nd International Conference on Self Sustainable Artificial Intelligence Systems (ICSSAS)* (pp. 163–170). IEEE. <https://doi.org/10.1109/ICSSAS64001.2024.10760982>
- Tirumanadham, N. S. K. M. K., Kumar, S. C., Praveen, S. P., Kodete, C. S., Rajkumar, K. V., & Shariff, V. (2025). Boosting student performance prediction in e-learning: A hybrid feature

- selection and multi-tier ensemble modelling framework with federated learning. *Journal of Theoretical and Applied Information Technology*, 103(5).
- Tirumanadham, N. S. K. M. K., Priyadarshini, V., Praveen, S. P., Thati, B., Srinivasu, P. N., & Shariff, V. (2025). Optimizing lung cancer prediction models: A hybrid methodology using GWO and Random Forest. In *Studies in Computational Intelligence* (pp. 59–77). https://doi.org/10.1007/978-3-031-82516-3_3
- Vahiduddin, S., Chiranjeevi, P., & Mohan, A. K. (2023). An analysis on advances in lung cancer diagnosis with medical imaging and deep learning techniques: Challenges and opportunities. *Journal of Theoretical and Applied Information Technology*, 101(17). <http://www.jatit.org/volumes/Vol101No17/28Vol101No17.pdf>
- Veerapaneni, E. J., Babu, M. G., Sravanthi, P., Geetha, P. S., Shariff, V., & Donepudi, S. (2024). Harnessing fusion's potential: A state-of-the-art information security architecture to create a big data analytics model. In *Lecture Notes in Networks and Systems* (pp. 545–554). https://doi.org/10.1007/978-981-97-6106-7_34
- Yarra, K., Vijetha, S. L., Rudra, V., Balunaik, B., Ramesh, J. V. N., & Shariff, V. (2024). A dual-dataset study on deep learning-based tropical fruit classification. In *2024 8th International Conference on Electronics, Communication and Aerospace Technology (ICECA)* (pp. 667–673). IEEE. <https://doi.org/10.1109/ICECA63461.2024.10800915>