

Secure and Smart Teleradiology Framework Integrated with Technology-Based Fault Detection (CVT-FD)

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Abstract—The healthcare sector has used cyber-physical systems to provide high-quality patient treatment. Many attack surfaces need sophisticated security solutions because of the wide range of medical devices, mobile devices, and body sensor nodes. Cyber-physical systems have various processing technologies, which means these technical methods are as varied. To reduce fraud and medical mistakes, restricted access to these data and fault authentication must be implemented. Because these procedures require information management about problem identification and diagnosis at a complex level distinct from technology, existing technologies must be better suited. This paper suggests a Computer Vision Technology-based Fault Detection (CVT-FD) framework for securely sharing healthcare data. When utilizing a trusted device like a mobile phone, end-users can rest assured that their data is secure. Cyber-attack behaviour can be predicted using an Artificial Neural Network (ANN), and analyzing this data can assist healthcare professionals in making decisions. The experimental findings show that the model outperforms current detection accuracy (98.3%), energy consumption (97.2%), attack prediction (96.6%), efficiency (97.9%), and delay ratios (35.6%) over existing approaches.

Keywords—cyber-physical systems, healthcare, teleradiology, technological development

I. INTRODUCTION

Healthcare Cyber-Physical Systems (HCPS) integrate a network of medical equipment in a way that's essential to patient care [1, 2]. These systems are being implemented in hospitals one by one to provide a consistently high level of healthcare [3, 4]. An integrated CPS in

contemporary healthcare includes IoT, cloud storage, and interconnected devices [5, 6]. Most deadly diseases, such as cancer, can be detected early and treated accordingly [7, 8]. It's possible to identify early symptoms of infection using computer vision because of its excellent pattern recognition [9, 10]. In the long run, this could help save countless lives by allowing prompt treatment [11, 12]. Computer vision in healthcare can drastically reduce physicians' time to analyze patient data and images [13, 14]. It frees them up and allows them to spend more time with patients, giving them tailored advice [15]. It can let medical practitioners see more patients by improving the quality of doctor-patient interactions. Computer vision in healthcare helps healthcare providers provide high-quality treatment in a timely and cost-effective manner [16, 17]. The position's context knowledge is broadened despite its focus on mobile devices. Building and deploying a mobile healthcare network using mobile terminal technologies is simple since people have been intellectualized [18]. Computer vision is a relatively new field of technology that aims to mimic human vision to enable computers to recognize and process objects similarly [19]. Additionally, the discipline of computer vision is getting closer to being more pervasive in daily life because of recent developments in areas like artificial intelligence and computing capacity [20, 21].

Due to problem detection and diagnostic technologies, a new generation of networked systems and physical and computer vision techniques have been launched [22, 23]. Increased accessibility to physical processes and a constant connection with local information management can make things more intelligent and effective [24]. Mobile Health Systems use cyber-capable medical devices to contact patients and collect and monitor

diagnostic data [25]. A medical device is anything intended to be used in a medical setting [26]. Patients gain from diagnosis and treatment, while healthcare systems benefit from improved management and higher quality of life for patients. When it comes to using a medical gadget, there are considerable risks involved. Before regulatory authorities permit medical equipment marketing, the device's safety and dependability can be shown with reasonable confidence [27]. Several new technologies can be progressively incorporated into production lines' cyber-physical systems, resulting in a varied network [28]. Identifying direct pattern recognition of sensor data that signal failure and evaluating the discrepancy between sensor readings and expected values is a control systems sub-field when a problem arises and the kind of fault or where it occurred [29]. A defect is often identified when a difference or residual reaches a certain threshold. The fault type and computer location are then classified based on the insulation of the problem [30].

In this paper, separate subnets of the segment can provide latency and stability guarantees in computer vision technology-based fault detection. Medical practitioners can save time by using computer vision, and it can save patients' lives by performing life-saving procedures. Medical technology applications must go beyond their already utilized and add a layer of innovation and imagination. Medical image analysis, predictive analysis, and health monitoring are examples of how computer vision is used in healthcare to help doctors diagnose patients better. Diagnoses made possible by computer vision technologies are more accurate, with fewer false positives. The Artificial Neural Network (ANN) can reduce or eliminate the need for invasive surgery and high-priced treatments. Human physicians' sensory limitations mean they can detect the minor disease symptom that computer vision algorithms are trained to identify accurately. As a result, computer vision in healthcare diagnostics can offer very high levels of accuracy.

The main contribution of this paper is,

- (1) Create a Computer Vision Technology-based Fault Detection (CVT-FD) framework for safeguarding healthcare data in a cyber-physical system.
- (2) To guarantee that high-quality therapy can continue effectively while avoiding pauses that might damage therapeutic outcomes, the company uses the mathematical model of the artificial neural network.
- (3) The simulation improves detection accuracy, energy consumption, attack prediction, efficiency, and delay ratios.

The rest of the CVT-FD framework research can be organized similarly. The literature review on healthcare is described in Section II. Next, describe in detail the new concepts employed and presented in Section III of this study. Section IV summarizes the data-based conclusions and results. Finally, Section V concludes the CVT-FD framework by fully analyzing the findings.

II. RELATED WORK

A thorough examination of literature review localization procedures for peer-reviewed research showed the defect diagnosis in healthcare evaluation. Here five related works have been listed below:

Over the previous decade, the explosive expansion of network-related services has resulted in an enormous volume of confidential data on the Internet. However, networks were vulnerable to incursions in which unauthorized users sought to obtain critical data and potentially damage the system. An intelligent network Intrusion Detection System (IDS) must be built in [31] to avoid such assaults. The model was tested on the dataset, which was the largest of its kind accessible online.

Coastal ecosystems were affected by a worldwide environmental problem caused by humans. It was anticipated that as urbanization and transportation grew, so would the negative effect on coastal inhabitants and non-residents. The suggested human activity monitoring system may be helpful for autonomous coastal law enforcement and active coastal area security. The Artificial Intelligence Approach (AIA) is used [32] to automate data collecting, processing, and decision-making, leading to real-time findings and large-scale coastal management and governance potential.

Transforming massive data gathered from numerous sensors into meaningful low-dimension data was critical in CPS for effective monitoring and safe and stable system operation. In Ref. [33], this study offered a unique Novel Dimensionality Reduction Technique (NDRT), each employing competing neural networks and newly specified class separable and affinity correlation constraints. Over numerous datasets gathered from a cyber-physical system, the suggested new approaches were compared to state-of-the-art dimensionality reduction techniques.

Integrating physical processes with processing and data transmission was called a CPS. Because of the moral and constitutional implications of the patient's medical data, cybersecurity was a critical and complex problem in healthcare. As a result, designing a CPS model for healthcare applications takes extra consideration to ensure data security. In Ref. [34], the author proposed a healthcare-specific classification model for CPS based on Blockchain-based Data Transmission (BT-DT). In addition, data transmission to a cloud server using a residual network-based classification algorithm to identify the presence of the disease was further protected using blockchain technology.

In Ref. [35], Virtual Care for Cyber-Physical Systems (VC-CPS) was grown to include phone conversations, audio and video discussions, and Face-to-Face Services. The use of cyber-physical technologies in virtual care has the potential to change how people interact and collaborate. This ecosystem provided greater access to care, which kept patients in low-risk settings longer and contributed to better outcomes while lowering premiums.

Convolutional Neural Networks, Deep Boltzmann Machines, Deep Belief Networks, and Stacked Denoising Autoencoders are only a few of the deep learning

methods that Voulodimos *et al.* [36] quickly review as some of the most essential approaches to computer vision problems. First, their benefits and drawbacks are listed, and then they are used in various computer vision applications such as object identification, facial recognition, activity recognition, and human position estimation.

Deep learning is a machine learning approach that attempts to find several nested representations. Several deep learning techniques have recently been developed to resolve typical AI problems. This research looks at the present status of deep learning algorithms in computer vision by highlighting the contributions and problems from over 210 recent academic articles [37]. It begins with an overview of deep learning and its recent developments before quickly discussing how these methods are being applied to solve common vision-related issues such as object recognition, image retrieval, classification, semantic segmentation, and posture prediction.

TABLE I. SUMMARY OF RELATED WORKS

Authors	Proposed method	Analysis
Thakur <i>et al.</i> [31]	Intrusion Detection System (IDS)	Less security with greater access
Nazerdeylami <i>et al.</i> [32]	Artificial Intelligence Approach (AIA)	Active coastal area security with less accuracy
Farajzadeh-Zanjani <i>et al.</i> [33]	Novel Dimensionality Reduction Technique (NDRT)	Effective monitoring with less attack prediction
Nguyen <i>et al.</i> [34]	Blockchain-based Data Transmission (BT-DT)	High security with less efficiency
Fiaidhi <i>et al.</i> [35]	Virtual Care for Cyber-Physical Systems (VC-CPS)	Low risk with lowering premiums

Table I shows the summary of the related works. The CVT-FD framework has been used to overcome the existing model issues, IDS, AIA, NDRT, BT-DT, and VC-CPS. In this study, CVT-FD has been suggested to increase detection accuracy, energy consumption, attack prediction, efficiency, and delay.

III. PROPOSED METHODOLOGY

To make a medical diagnosis, doctors should determine what illness or condition is causing a patient’s signs and symptoms. When used in the medical context, “diagnostic” is most often used. Evaluating the patient’s medical history and physical can usually provide the information needed for a diagnosis. Diagnostic treatments, such as medical testing, are often performed as part of the process. In certain circles, a postmortem diagnosis is seen as a medical diagnostic in and of itself.

The medical sensor field is undergoing a great deal of exploration. As an emerging technology, the CPS has garnered much interest recently. It integrates computation and communication with the real environment. It’s called quantum computing. Using a CPS in the healthcare system, patients, physicians, and clinical assistants would

save time and money by minimizing the administrative burden of helping all patients simultaneously during inconvenient periods. These improvements promise to provide CPS with the capacity to monitor patient status remotely and take action regardless of the patient.

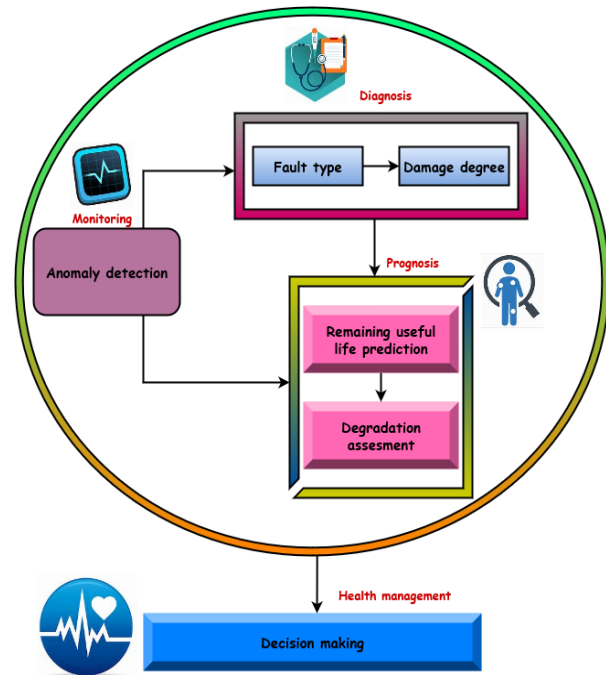


Figure 1. Health management system.

Fig. 1 shows the health management system. While traditional maintenance methods (corrective and periodic maintenance) rely on manual labor, spares, and maintenance costs, Prognostic and Health Management (PHM) utilizes advanced sensors and various intelligent approaches to monitor the mechanical system’s status, resulting in timely and optimal maintenance. Diagnostics and prognosis are the significant components of Prognostic and Health Management (PHM). If defect identification is the goal of the monitoring, anomaly detection is an essential tool for determining the underlying health state. To determine whether the system is usually working, monitors look for specific health indicators. Diagnosis is the process of determining the kind of problem and the severity of it. The prognosis assesses the degree of degrading performance and forecasts the Remaining Useful Life (RUL) using suitable models. Integrated health management incorporates the results of monitoring and diagnosis, and prognosis to arrive at the best maintenance and logistical choices.

PHM can, on the whole, enhance operational safety, system reliability, and equipment maintenance while lowering equipment costs throughout the equipment’s whole life cycle. Instead of relying on sensors and suitable algorithms, traditional care relies on skilled technicians who artificially diagnose equipment, identify the kind of problem, and locate it. In this approach, maintenance requires more human resources and is more dependent on those doing it. Anomaly detection, as used in the following discussion, relates exclusively

to artificial neural network anomaly detection. Due to data availability from a stable state, supervised learning techniques fail miserably at monitoring tasks. Only health status data can be used for semi-supervised anomaly detection.

As sensor technology advances, more sensors are being placed on mechanical equipment to gather data from many sources, such as vibration, temperature, and pictures, laying the groundwork for adopting PHM. Anomaly detection aims to find potential problems in the data. An open-set task means that the failure could occur on any part of the machinery, regardless of how it manifests itself externally. On the other hand, mechanical equipment operates continuously in a highly complex environment. As a result, the measured signal often includes high background noise levels, masking the problem characteristics.

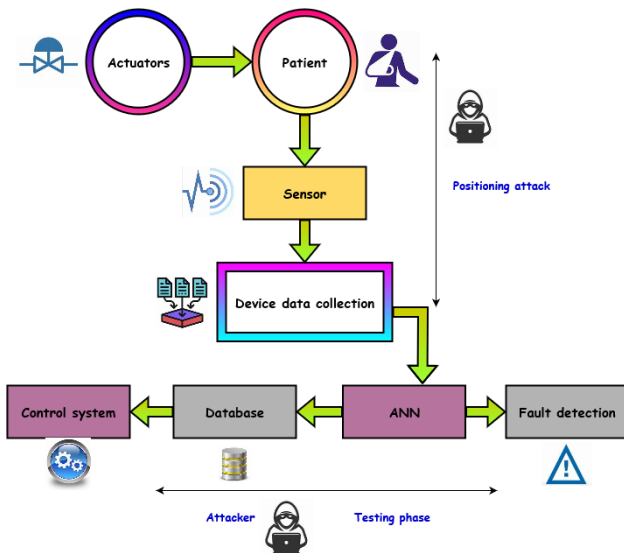


Figure 2. Computer vision technology-based fault detection.

Fig. 2 shows the computer vision technology-based fault detection. A new healthcare system could better handle and monitor patients because sophisticated medical gadgets gather data from their bodies. The intelligent health system considers various medical and non-medical aspects, including a patient's physical posture and condition. Patient's general health can be tracked in real time with this technology. An analog signal is used by intelligent medical devices to utilize vital signs, converted to a digital signal, and sent through wireless technology to a laptop, smartphone, or wristwatch, respectively. Using a personal digital assistant is similar to using an interface for a database since it allows one to utilize and transmit data easily. After the database receives the data, it sends it to a data processing model, using ANN to pick out and extract relevant characteristics. Patients' conditions, routine behavior, and risks are detected using the computer vision run on the Central Data Processing Unit (CDPU). Higher medication dosage is pushed, and evaluated data is sent to the authorized entity. The next step is to take automated

measures to treat patients better (for example, changing drugs).

The doctor provides a revised health status management plan to the patient. Various vital signs are monitored using intelligent health care technology linked to the patient's body, such as Electroencephalogram (EEG), Electrocardiogram (ECG), pulse oximeter, etc. Regarding smart medical equipment, adversaries can detect whether computers are partly scattered with data. The patient's condition or regular pattern of activity can be altered based on a change in a data value within a particular threshold. An adversary must know the machine learning performance labels to launch an attack. ANN can be utilized to identify diseases and user activities. In addition, the opponent should be aware of the underlying machine-learning model used to determine the patient's condition. A healthcare system can be compared to a data processing pipeline that analyses vital signs to detect illness and treat patients.

Patients' many sophisticated medical devices provide data to the pre-processing data model, which then uses that data to visually represent the patient's vital signs and state of health. Samples are taken, and the data is saved in a range according to the relevant sample frequencies in a pre-processing data model. The collected data trains a machine learning system for real-time illness monitoring and detection. Different illnesses and benign states are labeled on the training data to better comprehend the patterns under other conditions. An artificial neural network (ANN) can evaluate patient physiological data to detect different illnesses or scenarios during testing. It is where the attack technique is described in the data processing pipeline.

A Cyber-Physical System (CPS) combines physical and network systems in computing. It has the potential to improve social intelligence. For example, defending a medical device means protecting the firmware from being tampered with, protecting the device's stored data from being accessed, and ensuring that communications are secure. Strategic management automation systems include fault detection and diagnostics as critical components. The breakdown of a piece of equipment, or even the involvement of particular hardware, is unnecessary for a defect or issue to exist. For example, non-optimal operation or off-spec products could be characterized as an issue.

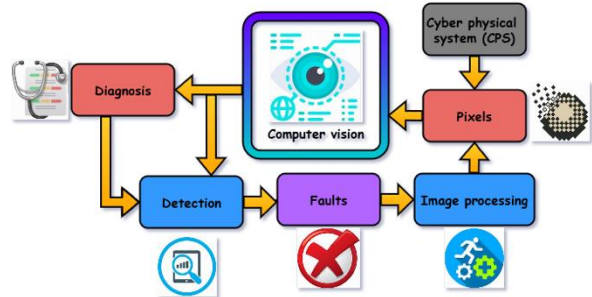


Figure 3. Diagnosis using computer vision.

Fig. 3 shows the diagnosis using computer vision. Computer vision channels connect the processing units, such as sensors, through each instrument's probabilistic and cyclic image processing architecture. A network of manufacturers is used to link the processing units to a locally structured sector. A firewall serves as a direct connection between two healthcare facilities in real time. A CPS is a network of interconnected computer entities that provides Internet-based data access and processing services while closely linked to the physical world and its continuous processes. CPS researchers examine how these two domains interact regarding the next generation of digital systems.

A CPS comprises the computer, communication, control, and physical components that are all tightly interwoven. Because the CPS systems are used at various rates and divisions, they may need access points for information exchange. Lack of coordination between fault loops and detection can cause queueing to occur. Each unit includes pre-allocated and defined detecting units. Confidential detection networks with set cycle durations in computer vision can defect diagnosis systems. Diagnostic and detection processes derived from computer vision pictures migrate into information devices, necessitating more innovative detectors that may produce interference from time to time. The requirements differ from those described in the next section, which deals with security systems like encryption and authentication.

Assuming that excess detection is not lost, the system's dependability defines n as the chance that any one of the information neglects diagnosis and other potential sources of error, as well as assuming that extra detection is detailed in Eq. (1),

$$\psi_m = 1 + \prod_{n=0}^{\infty} 1 - \frac{N_m^1}{n} Q_s(N_m = n) \quad (1)$$

As shown in Eq. (1), the latency of the database ψ_m is similar in terms of loop length $\frac{N_m^1}{n}$ without taking propagation delays Q_s into account. This system has a significant separation of capital between $N_m = n$ applications. The wide range of design complicates integrated and cyber-physical systems development practices used by different medical areas.

A closed-loop security network or a serial communications system can use intermittent transmissions to substitute response broadcasts without allowing the control device to a fault. Control flow is presumed to be allocated and kept according to the notation provided in the previous system. This indicates that it can be discovered in the intermittent computer vision's private image information. This method risks allowing erroneous information ψ_r to overwrite control-sensitive information in Eq. (2),

$$\psi_r = \prod_{n=0}^{\infty} \left(1 - \frac{1}{N_r}\right)^n Q_s(N = n) \quad (2)$$

As shown in Eq. (2), incorporating denoise as a training step ensures that the extracted feature has better illustration abilities, denotes propagation delays. This final set of components for the assault detection system can be derived from all the estimated characteristics, such as univariable function, remaining physical model, and acquired feature.

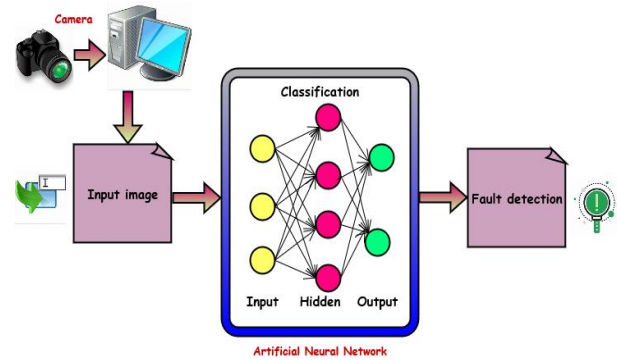


Figure 4. Structure of artificial neural network.

Fig. 4 shows the structure of the artificial neural network. There are many uses for computer vision in health care, including clinical diagnosis, cancer prediction, voice recognition, and duration of stay. Image analysis and interpretation are standard, such as in detecting myocardial infarction. For various medical applications, ANNs are extensively used in medicine, particularly cardiology. Medical image processing and radiography have all used artificial neural networks extensively. In addition, many medical and clinical research writers have utilized ANNs for modelling.

Computer Vision Technology (CVT) focuses on creating features that better capture the asset and are successful in acute assaults from regular operations for healthcare cyber-physical system attack detection. A proposed assault detection framework uses three feature types: physics, learning, and statistical-based to size physical systems in time and space. ANN generates geographical characteristics based on numerous observations (multivariate) and unique data (univariate). These characteristics are implemented across a sliding window to capture the dynamics of temporal holdings of the whole system. This model's suggested CVT-FD architecture has decreased network latency.

A physical system model can identify expected future measurements \hat{y}_{k+1} by considering the sensor and the instruction receives. The ANN model's input layer has been used to make predictions as given in Eq. (3).

$$\hat{y}_{k+1} = \prod_{i=k-N}^k \alpha_i y_i + \alpha_0 \quad (3)$$

As shown in Eq. (3), The factors to be learned on N can be calculated to prevent the model from overfitting,

as deduced from Eq. (3), where α_i represents the coefficient acquired through system credentials and y_i Indicates the final N sensor. The coefficients α_0 can be found by attacking an optimization problem that lowers residues. Consider the datasets with k classes and a hidden neural network of n neurons to see how this operates. The output of the network for the input $g(x)$ is calculated in Eq. (4),

$$g(x) = \prod_{k=1}^n \alpha_i f_i(x) = f(x)\beta \quad (4)$$

As shown in Eq. (4), Where f_i means the output of the i th hidden neuron concerning the input x ; the nonlinear piecewise continuous function $f(x)\beta$ supporting the ANN estimation capability concept. α_i denotes the output weight vector among j th hidden neurons to the output node, representing a random feature plotting of the data. Based on these expressions, the attack detection accuracy has been enhanced. A double-optimization target function $\log(\delta \setminus N)$ is shown in Eq. (5),

$$\log(\delta \setminus N) = \prod_{z \setminus i} \log(\prod_{z \setminus i} \alpha_i, N_z(m \setminus \rho, \varepsilon)) \quad (5)$$

As shown in Eq. (5), N_z is the samples and the constant $\log(\delta \setminus N)$ control the tradeoffs among the training error m and output weight (ρ, ε) . α_i is unique practical characteristics, z denotes ensuring that communications.

When M is a single class, the only linear computation $S(\delta \setminus N)$ that can transfer from $\infty 0$ is a hyperplane estimate. m is the distance between the test samples and the hyperplane i .

$$S(\delta \setminus N) = \sum_{z \setminus i}^{\infty} M(N_z \setminus \delta_i) = \sum_{z \setminus i}^{\infty} (\prod_{z \setminus i} \alpha_i, N_z(m \setminus \rho, \varepsilon)) \quad (6)$$

As shown in Eq. (6), N_z the training samples, δ_i denotes diagnostic fault, (ρ, ε) indicates output weight. Data security throughout the lifecycle prevents unauthorized access and corruption: tokenization and secure data encryption on all platforms and applications, including the web and mobile devices.

Fig. 5 shows the cyber-physical system in the detection unit. Whether detection units usually use conventional or real-time computer vision networks. Every link in the normal CPS security connections has a backlog of blocks.

It keeps track of stringent real-time and routine activity in experimental data. While conventional data has concentrated and does not vary in new CPS real-time technology in the methods above, the algorithms' unique practical characteristics may be directly used. The defect detection unit has assigned a specific order by giving each system component all its queue. A tight priority scheduler is used between the lines to deal with latency requirements in various situations.

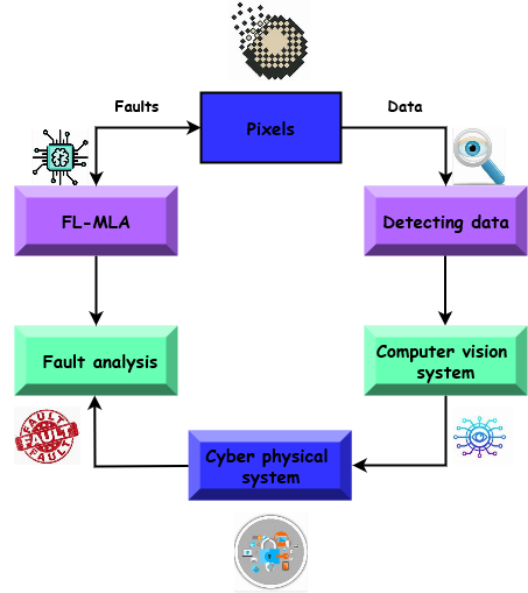


Figure 5. Cyber-physical system in the detection unit.

Priority schedulers often provide the CVT-FD architecture, which manages image computer vision. Frameworks for research include queuing theory, network calculus, and deterministic network calculus. Despite these tests, particularly the distribution, which aids in evaluating end-to-end network guarantees, the formulas for memory-free flow data and timely delivery are often intractable, limiting the number of scenarios accessible. The range of potential outcomes is increased by focusing on latency distribution limitations rather than exact performance restrictions. Diagnostic fault is one of today's most serious patient safety issues, resulting in significant deaths and injuries. A diagnostic error occurs when a diagnosis is made incorrectly or late. The suggested methods improve the detection accuracy ratio, energy consumption ratio, attack prediction ratio, efficiency ratio, and delay ratio.

IV. RESULTS AND DISCUSSION

The suggested CVT-FD framework has been verified by simulation in this section. In addition, several gadgets for detecting gaunt patients have been set up and grown in number.

The approach randomly eliminates both feature detectors during each training example to prevent challenging co-adaptations on the training data and improve generalization. As a result, the performance substantially enhanced over previous versions due to this

approach. On the other hand, it cannot handle extensive training sets or dynamic training data that change over time. As a result, it automatically accesses the whole training set with each iteration.

The proposed CVT-FD framework has been tested with experimental results using performance measures such as detection accuracy ratio, energy consumption ratio, attack prediction ratio, efficiency ratio, and delay ratio.

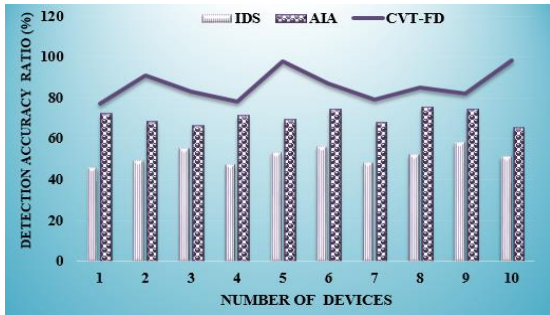


Figure 6. Detection accuracy ratio.

Fig. 6 shows the detection accuracy ratio in healthcare. Develop an accurate threat detection system, inexpensive to operate and should not generate many false alarms. In addition, it should be scalable and flexible since it can be used in the Healthcare CPS environment. CVT-FD looks at a machine learning approach for Healthcare Cyber-Physical Systems (HCPS) to offer effective attack detection. The accuracy of the forecast is dependent on a pre-training phase. As a result of training data collection, the model learns how to interpret the output.

Compared to current IDS and AIA techniques, the CVT-FD method has a higher detection percentage (98.3%). The findings of this study may lead to a better understanding of how the physical system’s dynamic, nonlinear connections are formed when components are collected using the monitored ANN detection model, and high accuracy is initially detected when malicious or attack actions occur.

TABLE II. ENERGY CONSUMPTION RATIO

Number of Devices	IDS	AIA	CVT-FD
10	61	80	90
20	75	89	92
30	65	83	90.7
40	73	79	88
50	64	73	82
60	70	83	87
70	68	78	89
80	60	86	90
90	71	86	91
100	69	84	97.2

Table II shows the energy consumption ratio. Existing fault detection CPS methods minimize energy usage in distributive data pixels. To reduce improper access, CVT-FD is recommended and implemented using simulations. Based on the simulation results, it has been concluded that using the recommended technique can minimize

energy access. Because of the increase in applications, energy availability has increased.

The proposed method enhances the (97.2%) energy consumption ratio compared to existing methods. The proposed solution has a lower consumption ratio than the current approaches to reduce undesired access to an expanding number of applications.

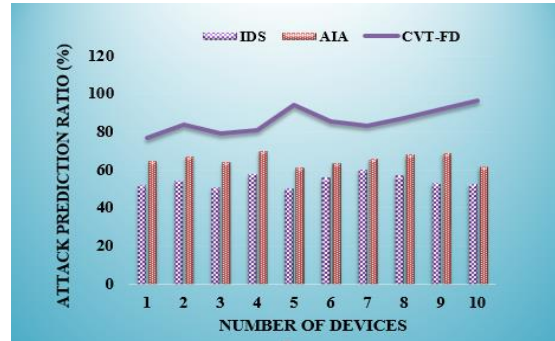


Figure 7. Attack prediction ratio.

This data analysis shows that the gadgets work well and that the computer is free of flaws since it uses ANNs to classify illnesses and monitor patients in real time. The attack prediction ratio can be shown in Fig. 7, which illustrates. Adversaries are trying to change the data distribution in the multi-layer ANN classifier to change the prediction condition. The assaults on medical images aim to manage the disease predicted in some instances. Universal adversarial issues can be applied to a medical picture to modify the predicted labels with high confidence. The suggested approach for identifying dangerous parts in a medical time chain is by employing negative assaults on deep prediction models. If a fresh assault on the adversary is made, the healthcare system can gain incredible benefits, and patients’ states can be modified to provide the wrong treatment.

Compared to the existing methods, the Computer Vision Technology-based Fault Detection (CVT-FD) framework improves the attack prediction ratio as (96.6%). Furthermore, this work provides the positioning and evasive attacks to carry out the ANN model adversarial assault.

TABLE III. EFFICIENCY RATIO

Number of Devices	IDS	AIA	CVT-FD
10	45	59	76
20	55	78	85
30	66	72	87
40	58	65	88
50	69	67.7	74
60	56	83	89
70	61	78	82
80	60	86	93.4
90	56	89.4	88
100	55	76	97.9

Table III shows the efficiency ratio. Artificial Neural Networks (ANNs) have made things much more efficient and effective when detecting and evaluating clinical

indications. Patient-centric treatment and support made possible by ANN feature extraction from datasets can reduce medical expenses while enhancing patient-doctor interactions. In addition, the approach is reliable and capable of protecting confidentiality and integrity. The research includes the proposed design, concept, security definition, formal definition, and communication protocols. Compared to existing efficiency ratio methods, the proposed method enhances with 97.9%. The evaluation demonstrates that the efficient and secure technique applies to healthcare cyber-physical systems.

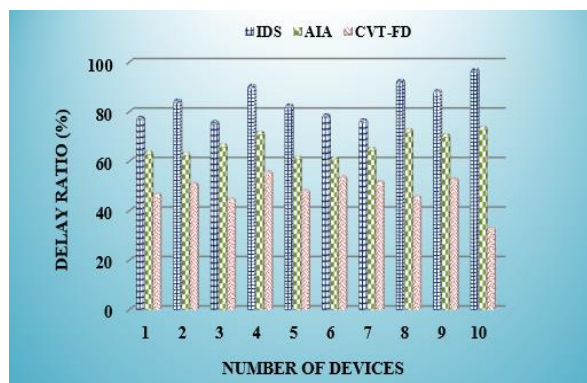


Figure 8. Delay ratio.

Fig. 8 shows the delay ratio. Communication breakdowns are widespread during shift changes when patient care is transferred to another caretaker. Medical errors arise when the switch is made with erroneous, imprecise, or confusing information. Disconnected mobile phone facilities within a hospital, billing for the improper provider level, outstanding messages, and inaccurate or not disclosed changes in call scheduling can all confuse one-way communication transmission. The regularity and timeliness of medical care are jeopardized when communication slows down. This can lead to health issues, longer wait times, slower discharge times, poor judgment, and more significant anxiety in the long run. Therefore, a reliable communication system is needed to offer high-quality patient care. A 35.6% reduction is suggested in comparison to current techniques. This paper evaluates the detection accuracy ratio, energy consumption ratio, attack prediction ratio, efficiency ratio, and delay ratio.

V. CONCLUSION

This paper lays a framework for health networks to safeguard patient data privacy and security. An overview of cyber-physical system security risks is provided by CVT-FD, covering possible attacks and research issues connected with them. This research compares the most sophisticated static and adaptive detection and prevention techniques and their restrictions on addressing these issues. Regarding current scenarios, the use of CPS has undergone a revolutionary shift due to the increasing prevalence of intelligent techniques with increased capability. Achieving current fault detection challenges can need a combination of low latency, dependability,

and productivity. An electronic and dynamic network CVT-FD system has been suggested in this area to meet efficiency requirements using computer vision images utilizing network CVT-FD networks. Conclusions include unsolved research problems for developing innovative CPS security measures and ANN-based security techniques against various identified threats across many CPS levels. The CVT-FD approach ensures CPS security of health data while reducing the local impact from effectiveness analysis and numerical results. The model's security benefits can be used to satisfy the criteria for outstanding results in the future. The simulation outcome shows that the model outperforms current detection accuracy (98.3%), energy consumption (97.2%), attack prediction (96.6%), efficiency (97.9%), and delay ratios (35.6%).

CONFLICT OF INTEREST

The authors declare no conflict of interest.

AUTHOR CONTRIBUTIONS

Conceptualization, MSB, MHA, ARK; methodology, MHA, MMJ, ARK, NE; software, MMJ, ARK, NE; validation, MSB, MHA, MMJ, NE, TS; writing—original draft preparation, MSB, MHA, MMJ, ARK, NE, TS; writing—review and editing, MSB, MHA, MMJ, ARK, NE, TS; visualization, MSB, MHA, MMJ, TS; supervision, ARK, MHA; project administration, TS, MSB, MHA; funding, ARK, NE; all authors had approved the final version.

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