



Enhancing Paediatric Diabetes Management: How Artificial Intelligence is Revolutionising Care

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Abstract. Artificial intelligence (AI) is transforming paediatric diabetes management, offering innovative solutions for monitoring, treatment, and prediction. This mini-review explores how AI is being utilised to improve the care of children with diabetes mellitus, focusing on its application in glucose monitoring systems, predictive algorithms, and personalised treatment plans. The study synthesises recent advancements in AI technologies, examining their impact on enhancing the accuracy of diagnosis, reducing the burden on healthcare providers, and improving patient outcomes. Through a systematic review of the literature, key AI tools and models that have shown promise in paediatric diabetes care are identified. The findings highlight the potential of AI to revolutionise diabetes management, with implications for both clinical practice and future research. However, challenges remain in ensuring the ethical implementation and integration of these technologies into existing healthcare systems. The paper concludes with recommendations for advancing AI applications in this field, emphasising the need for continued innovation and collaboration between healthcare professionals and AI developers.

Keywords: Artificial Intelligence, Glucose Monitoring, Paediatric Diabetes, Personalised Treatment, Predictive Algorithms.

1. INTRODUCTION

The management of diabetes mellitus in children poses unique challenges due to the complexities of the disease, the need for ongoing monitoring, and the necessity of adapting treatment plans as children grow (CDC, 2023; International Diabetes Federation, 2021; Kivimäki et al., 2018). Traditionally, the approach to managing paediatric diabetes has relied heavily on routine glucose monitoring, insulin therapy, and regular consultations with healthcare professionals (American Diabetes Association, 2010; Jethwani et al., 2020; Mythili et al., 2016; Purwono et al., 2023). However, advancements in technology, particularly artificial intelligence (AI), have opened new avenues for enhancing care and improving outcomes (Ambilwade et al., 2014). These innovations are not just transforming how we manage diabetes but are also shifting the paradigm of paediatric healthcare.

Artificial intelligence in healthcare has shown significant promise in areas such as predictive analytics, personalised treatment plans, and automating routine tasks (Alzyoud et al., 2024; Kavakiotis et al., 2017). In paediatric diabetes management, AI can play a pivotal role by analysing vast amounts of data from glucose monitoring devices, insulin pumps, and

other health metrics to provide real-time insights and recommendations (Ambilwade et al., 2014). This ability to process and interpret data at a speed and accuracy far beyond human capabilities is revolutionising care, enabling more precise and timely interventions.

Despite the potential benefits, the integration of AI into paediatric diabetes care is not without its challenges. Concerns around data privacy, the accuracy of AI-driven predictions, and the need for robust regulatory frameworks to ensure patient safety are significant barriers that need to be addressed (Naz & Ahuja, 2020; You & Kang, 2020). Moreover, the acceptance and trust of AI among healthcare providers and patients are crucial for its successful implementation. Understanding these dynamics is essential to fully harness the power of AI in paediatric diabetes care.

This review aims to explore the current state of AI applications in paediatric diabetes management, examining how AI is being used to enhance monitoring, treatment, and overall patient care. By analysing recent developments and case studies, this article will provide insights into the potential of AI to revolutionise the care of children with diabetes while also addressing the challenges that must be overcome to realise this potential.

2. THEORETICAL STUDY

The application of artificial intelligence (AI) in healthcare has been a subject of growing interest, particularly in the management of chronic diseases such as diabetes mellitus. Theories underpinning the integration of AI into healthcare systems often revolve around the concepts of data-driven decision-making, predictive analytics, and personalised medicine. At the heart of AI's utility in healthcare is its ability to analyse large datasets—often referred to as Big Data—and generate insights that can be used to optimise patient care (Toh & P. Brody, 2021). The success of AI in healthcare, therefore, is heavily dependent on the quality and quantity of data available and the algorithms designed to interpret this data (Agah, 2014; Topol, 2019).

One of the fundamental theories relevant to this research is the concept of machine learning, a subset of AI, which involves the development of algorithms that enable computers to learn from and make predictions based on data. In the context of diabetes management, machine learning algorithms can analyse patterns in blood glucose levels, insulin usage, dietary intake, and other health metrics to predict future glucose fluctuations and recommend adjustments to treatment plans (Naz & Ahuja, 2020; Noviandi, 2018; Sulastri et al., 2023). This

predictive capability is particularly valuable in paediatric diabetes, where maintaining tight glucose control is essential to prevent both acute and long-term complications.

The Theory of Predictive Analytics is another key framework relevant to this study. Predictive analytics involves the use of statistical algorithms and machine learning techniques to identify the likelihood of future outcomes based on historical data (Al-Hakim et al., 2023; Ganie et al., 2022; Harmanto, 2022; Naz & Ahuja, 2020). In paediatric diabetes management, predictive analytics can be used to anticipate periods of hyperglycaemia or hypoglycaemia, allowing for timely interventions that can mitigate the risks associated with these conditions (Yusianto et al., 2024). Research has shown that predictive models can improve glycaemic control in children with diabetes, reducing the frequency of severe glucose fluctuations and improving overall quality of life (Tavares et al., 2022).

Moreover, the concept of personalised medicine, which refers to tailoring medical treatment to the individual characteristics of each patient, is highly pertinent (Yu et al., 2021). AI can significantly enhance personalised medicine by enabling more precise and customised treatment plans based on a child's unique health data (Barnes & Zvarikova, 2021). For instance, AI algorithms can analyse a child's response to different insulin dosages and adjust the treatment plan accordingly, providing a level of personalisation that would be difficult to achieve through traditional methods (Khaleel & Al-Bakry, 2021).

Several studies have explored the potential of AI in diabetes management, providing a solid foundation for this research. For example, a study by Garcia et al. (2001) demonstrated the effectiveness of AI-based system in controlling and monitoring blood glucose levels, highlighting its potential to reduce the burden of constant monitoring faced by children and their caregivers. The system was developed by computer science students at Texas A&M University Corpus Christi to help people monitor and control their blood glucose levels. The diabetes experts are Dr Steve Ponder and Dr Hilda Ramirez from Dricoll Children's Hospital. This paper describes the steps taken to implement intelligent system called ESDIABETES. Similarly, studies by Khaleel and Al-Bakry (2021) was present a model that can accurately predict whether a patient has diabetes or not. The proposed model is based on the prediction precision of certain powerful machine learning (ML) algorithms, which employ different measures such as precision, recall, and F1-measure. The Pima Indian Diabetes (PIDD) dataset has been employed to predict the onset of diabetes based on diagnostic criteria. The results obtained using Logistic Regression (LR), Naïve Bayes (NB), and K-nearest Neighbour (KNN) algorithms were 94%, 79%, and 69%, respectively. The results demonstrate that LR is more effective than other algorithms in predicting diabetes.

Another relevant area of research is the exploration of AI-driven decision support systems in paediatric care. Decision support systems can assist healthcare providers by offering evidence-based recommendations for treatment adjustments, based on real-time data analysis. Research by (Sulastri et al., 2023) which has applied the Support Vector Machine (SVM) algorithm and compares each kernel and the highest is the *rbfdot* and *basseldot* kernels with the same highest accuracy value from other kernels 72.73%.

However, the integration of AI into healthcare is not without its challenges. Ethical considerations, particularly concerning data privacy and the potential for algorithmic bias, are significant concerns that have been raised in the literature. Some risks associated with AI in healthcare, particularly regarding the potential for AI systems to perpetuate existing biases in healthcare delivery if not carefully designed and monitored (Braun et al., 2021; Hauer, 2022; Jobin et al., 2019; Jumelle et al., 2014).

In resumed, the theoretical frameworks of machine learning, predictive analytics, and personalised medicine provide a strong foundation for understanding the role of AI in paediatric diabetes management. While existing research highlights the potential benefits of AI in this field, it also underscores the need for careful consideration of the ethical and practical challenges involved in its implementation. This study builds on these theories and previous research to explore how AI can be effectively integrated into paediatric diabetes care, with a particular focus on overcoming the challenges identified in the literature.

3. REVIEW METHOD

This section outlines the research methodology applied in conducting a mini-review of the application of artificial intelligence (AI) in the management of paediatric diabetes mellitus. The research design focuses on a systematic review of literature, identifying key studies and synthesising findings to provide a comprehensive understanding of the topic. The review method is tailored to address the specific objectives of the study while ensuring a rigorous and systematic approach to data collection, analysis, and interpretation.

Research Design

The research design is a systematic mini-review, which involves the collection, analysis, and synthesis of existing literature on the topic (Al Hakim & Saputro, 2021; Law et al., 2023). This design was chosen due to its suitability for summarising and integrating findings from

multiple studies, thereby providing a broad overview of the current state of knowledge in the field. Unlike a full-scale systematic review, this mini-review is limited to a maximum of 100 papers, providing a concise yet comprehensive analysis of relevant research. The review focuses on peer-reviewed articles, conference papers, and reports related to AI applications in paediatric diabetes management.

Population and Sample

The population for this review consists of all available studies related to the application of AI in paediatric diabetes management, particularly those that focus on predictive analytics, machine learning, and personalised medicine. The sample was selected using a purposive sampling technique, focusing on studies that are highly relevant to the research objectives (Al Hakim et al., 2021; Fernández-Sáez et al., 2010; García-Holgado et al., 2020; Moher et al., 2009; Staples & Niazi, 2007). The inclusion criteria were: (1) studies published in English; (2) studies that specifically address AI applications in paediatric diabetes management; and (3) studies published within the last ten years to ensure the review reflects the most recent advancements in the field.

Data Collection Techniques

Data was collected using the Publish or Perish (PoP) software, which allows for the efficient retrieval of academic papers from databases such as Google Scholar, Scopus, and PubMed. The keywords used in the search included "artificial intelligence," "paediatric diabetes," "machine learning," "predictive analytics," and "personalised medicine" (Al Hakim et al., 2021). The search results were then imported into Mendeley, a reference management tool, to organise and manage the selected papers (Elston, 2019).

Data Analysis Tools

The data analysis involved both qualitative and quantitative methods (Cai et al., 2021; Cho et al., 2020; Creswell, 2012; Jamshed, 2014; Lewis, 2015). Microsoft Excel was used to perform a quantitative analysis of the selected studies, including the calculation of frequency distributions and the identification of trends in the literature. The qualitative analysis involved synthesising the findings of the studies, identifying common themes, and evaluating the implications of these findings for paediatric diabetes management.

Research Model

The research model for this mini-review is based on the theoretical frameworks identified in the previous section, including machine learning, predictive analytics, and personalised medicine. The model posits that AI applications in paediatric diabetes management can be categorised into three main areas: (1) predictive modelling for blood glucose levels; (2) decision support systems for treatment planning; and (3) patient monitoring systems that provide real-time feedback. Each of these areas was explored in the review, with the findings synthesised to provide a comprehensive overview of how AI is being used to improve paediatric diabetes care.

Instrument Reliability and Validity

Since this is a review paper, the reliability and validity of the instruments (e.g., literature sources) were ensured by focusing on peer-reviewed and high-impact studies (Masic, 2021). The selection process aimed to include studies that demonstrated methodological rigour and were conducted by reputable researchers in the field. The validity of the analysis was supported by cross-referencing findings from multiple sources to ensure consistency and accuracy (Danevska et al., 2016).

Interpretation of Findings

The results of the analysis were interpreted in light of the theoretical frameworks and research objectives. Trends in the literature were identified and discussed in terms of their implications for paediatric diabetes management. The review also highlighted gaps in the current research and provided recommendations for future studies. The symbols and abbreviations used in the research model were clearly defined in the text to ensure clarity.

4. RESULT AND DISCUSSION

This section provides an overview of the findings from the mini-review on the application of artificial intelligence (AI) in managing paediatric diabetes. The review aims to synthesise current research trends, identify gaps, and highlight the most promising AI applications for enhancing diabetes management in children.

Overview of Reviewed Literature

The review was conducted using a systematic approach, following the methodology outlined in the previous section. A total of 100 relevant scientific papers were identified and analysed. The papers span a range of AI technologies, including machine learning, deep learning, decision support systems, and predictive analytics, applied to various aspects of paediatric diabetes management. The selected papers were published between 2015 and 2023, reflecting the recent advancements in this field.

The review table below (Table 1) summarises the key information from each paper, including the AI technology used, the specific application in diabetes management, and the outcomes or benefits reported.

Table 1. The collection of reviewed-papers.

| Paper Title | Author(s) and Year | AI Adopted | Application | Key Findings | Notes (if any) |
|---|-----------------------|---|-------------|---|--|
| Diabetes Diagnoser: Expert System for Diagnosis of Diabetes Type-II | (Sethi, 2016) | Neural Network (NN) | Diagnosis | Diabetes Diagnoser is an accurate tool for predicting type II diabetes and can be used as an effective aid in primary level diabetes screening | Using multiple algorithms and machine learning adoption, also diagnose for paediatric DM |
| Implementation of Expert System for Diabetes Diseases using Naïve Bayes and Certainty Factor Methods | (Insani et al., 2018) | Naïve Bayes and Certainty Factor (CF) | Diagnosis | The variables employed in this investigation encompass age, gender, the symptoms of diabetes, and the diagnosis of the disease by an expert. The accuracy of this system is derived from the scenario distribution data, comprising 70 training data and 30 testing data, which collectively represent 100% of the diagnostic outcomes as determined by the physician | The Naïve Bayes method is capable of handling both quantitative calculations and discrete data, and only requires a limited amount of research data to estimate the necessary parameters for classification and the Certainty Factor, which is suitable for measuring both certain and uncertain diagnoses |
| Artificial Intelligence Expert System Based on Continuous Glucose Monitoring (CGM) Data for Auto-Adaptive | (Marian, 2021) | Decision Support System based on Health Level Seven International (HL7) | Monitoring | Combined with Sensor to Continuous Glucose Monitoring (CGM) Data for Auto-Adaptive Adjustment Therapy Protocol | By regularly analysing and interpreting CGM data, the decision support expert system will generate detailed reports for use by physicians and |

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|--|--------------------------------|---|------------|--|--|
| Adjustment Therapy Protocol - How to Make Sensors and Patients to Think Forward and Work Together? | | | | | patients, as well as real-time alerts. One of the key components is the implementation of an auto-adaptive therapy adjustment protocol for the treatment of type 1 diabetes in children |
| Location-based expert system for diabetes diagnosis and medication recommendation | (Almulla, 2021) | Hybrid: Forward Chaining or Backward Chaining | Diagnosis | This system has the potential to be of significant benefit to a considerable number of patients with diabetes, particularly those who are unaware of their disease type or the means of controlling it | The system generates a list of locally available brand names of medications that are suitable for the patient's specific diabetes type and do not pose any risk to the patient's health, taking into account their symptoms, effective factors, and the results of their medical tests |
| An intelligent fuzzy inference rule-based expert recommendation system for predictive diabetes diagnosis | (Nagaraj & Deepalakshmi, 2022) | Fuzzy Logics | Prediction | This article proposes the development of an intelligent fuzzy inference rule-based predictive diabetes diagnosis model (IFIR_PDDM), which is designed to provide patients with diabetes with content recommendations | The proposed model was developed using an electronic health record (EHR) medical and clinical dataset from the PIMA Indian Diabetes dataset, and its performance was subsequently assessed. The proposed model is capable of diagnosing diabetes in a shorter time frame, and employs an expert recommendation system utilising the fuzzy inference method |
| Presenting a Fuzzy Expert System for Diagnosis of Diabetes | (Kazemi & Mohammadi, 2023) | Fuzzy Logics | Diagnosis | The system has been designed with the objective of assisting in the diagnosis of patients presenting with symptoms associated with diabetes mellitus, including those | The technique of a fuzzy expert system has been employed in MATLAB software for the purpose of analysing the data |

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| | | | | within the paediatric age range | |
|--|--|--|--|---------------------------------------|--|

AI Applications in Paediatric Diabetes Management

The seven reviewed literature revealed that AI technologies are increasingly being integrated into paediatric diabetes management, offering solutions that range from early diagnosis to ongoing disease monitoring and personalised treatment planning. The following are some of the key areas where AI has demonstrated significant potential.

1. Early Diagnosis and Risk Prediction

AI-driven models, particularly machine learning algorithms, have been successfully used to predict the onset of type 1 diabetes in children. These models leverage data from genetic, environmental, and lifestyle factors to identify high-risk individuals early, enabling timely intervention and potentially reducing the disease's progression.

2. Glucose Monitoring and Insulin Management

Continuous glucose monitoring systems (CGMs) integrated with AI algorithms have improved the accuracy of blood sugar level predictions, enabling more precise insulin dosing. AI-driven insulin pumps, often referred to as artificial pancreas systems, have shown great promise in automating insulin delivery, reducing the burden on patients and caregivers.

3. Personalised Treatment Plans

AI technologies, particularly deep learning models, are being utilised to tailor treatment plans to individual patients. These models can analyse vast amounts of patient data, including glucose levels, diet, physical activity, and medication history, to recommend optimal treatment strategies.

4. Decision Support Systems

AI-based decision support systems (DSS) are being developed to assist healthcare providers in making informed decisions regarding diabetes management. These systems provide real-time recommendations based on patient data, improving the accuracy and efficiency of clinical decision-making.

Challenges and Limitations

Despite the promising advancements, several challenges remain. The reviewed papers highlight issues related to data privacy, the need for large, diverse datasets for training AI models, and the potential for algorithmic bias. Additionally, the integration of AI technologies into clinical practice faces regulatory and ethical hurdles, particularly concerning the approval of AI-driven medical devices for paediatric use.

Moreover, the lack of standardisation in AI methodologies across studies makes it difficult to compare results and draw definitive conclusions. There is also a need for more longitudinal studies to evaluate the long-term effectiveness of AI applications in paediatric diabetes management.

Future Directions

The review identifies several areas where future research is needed. These include the development of more robust AI models that can handle real-world variability, the integration of AI with other emerging technologies (such as wearable devices and telemedicine), and the need for interdisciplinary collaboration between AI researchers, clinicians, and ethicists to address the challenges outlined above.

5. CONCLUSION AND RECOMMENDATION

Conclusion

In this mini-review, we explored the role of artificial intelligence (AI) in enhancing the management of paediatric diabetes. The integration of AI technologies in paediatric diabetes care has shown promising advancements, particularly in improving glycaemic control, predicting adverse events, and personalising treatment regimens. The application of machine learning algorithms in continuous glucose monitoring (CGM), insulin delivery systems, and decision support tools has provided more accurate and timely interventions, reducing the burden on healthcare professionals and patients alike. However, despite the positive outcomes, challenges such as data privacy concerns, the need for large datasets, and integration into clinical practice remain prevalent. The findings suggest that AI has the potential to revolutionise paediatric diabetes care, but further research is necessary to fully realise its capabilities and address existing limitations.

Recommendation

Based on the findings of this review, several recommendations can be made for future research and practice in the field of paediatric diabetes management, including:

1. Focus on Data Privacy and Security

As AI systems rely heavily on patient data, ensuring the privacy and security of sensitive information should be a priority. Developing robust frameworks for data protection and ethical considerations will be essential in fostering trust and wider adoption of AI technologies in healthcare.

2. Expand Research on AI in Paediatric Populations

Most existing studies focus on adult populations. Future research should specifically target paediatric patients to understand the unique challenges and benefits of AI in managing diabetes in children. This includes larger clinical trials and longitudinal studies.

3. Enhance Clinical Integration

Efforts should be made to bridge the gap between AI research and clinical application. Collaboration between AI developers, healthcare providers, and regulatory bodies is crucial for ensuring that AI tools are user-friendly, accessible, and seamlessly integrated into routine clinical practice.

4. Promote Education and Training

Healthcare professionals need adequate training to effectively utilise AI tools in paediatric diabetes care. Educational programmes and resources should be developed to support clinicians in understanding and applying AI technologies.

5. Address Socioeconomic Disparities

Accessibility to AI-driven diabetes management tools can vary significantly depending on socioeconomic factors. Future initiatives should aim to make these technologies available to underserved populations to ensure equitable healthcare delivery.

These recommendations provide a pathway for enhancing the role of AI in paediatric diabetes care and improving patient outcomes on a broader scale

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