



ISSN: 2306-6091

International Journal of Pharmaceuticals and Health Care Research (IJPHR)

IJPHR | Vol.14 | Issue3 | Jul - Sep -2026

www.ijphr.com

DOI : <https://doi.org/10.61096/ijphr.v14.iss3.2026.648.656>

Artificial Intelligence in Drug Discovery and Clinical Trails

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Published on:
22.09.2026
Published by:
Futuristic
Publications
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Abstract: Artificial Intelligence (AI) is an important technology in drug discovery and clinical trials, particularly for handling and analysis of large and complex chemical, biological, and clinical datasets. Machine learning, deep learning, natural language processing, reinforcement learning, and generative AI are being applied across the various stages of drug development. In drug discovery, AI supports target identification and validation, virtual screening, molecular docking, de novo drug design, ADMET prediction, drug repurposing, and prediction of drug–target interactions. In clinical trials, AI can assist with patient recruitment and stratification, biomarker identification, trial design and simulation, site selection, real-time safety monitoring, and clinical data analysis. Emerging approaches such as digital twins, synthetic control arms, multimodal AI, large language models, and AI-driven automated laboratories may further improve the efficiency of drug development. However, challenges including data quality and availability, algorithmic bias, limited interpretability, data privacy and security, interoperability, regulatory uncertainty, and the need for experimental and clinical validation remain important barriers. Therefore, AI is considered as a supportive tool that works with researchers and healthcare professionals. Continued development of reliable, transparent, and ethically governed AI systems may contribute to faster, more efficient, and data-driven drug discovery and clinical trial processes.

Key words: Artificial intelligence; Machine learning; Deep learning; Generative AI; Drug discovery; Target identification; Virtual screening; De novo Drug design; Drug repurposing; ADMET prediction; clinical trials; Patient Recruitment; Patient stratification; Biomarkers; Clinical Data Analysis; Digital twins; Genomics; Transcriptomic; AI-driven Drug Development.

INTRODUCTION OF AI IN DRUG DISCOVERY

Artificial Intelligence (AI) is a branch of computer science that enables machines to perform tasks that normally require human intelligence. Modern AI includes approaches such as Machine Learning (ML), Deep Learning (DL), Reinforcement Learning (RL), Natural Language Processing (NLP), and Generative AI. AI is increasingly being used in different stages of drug discovery and development. It supports target identification, drug identification, virtual screening, molecular docking, and de novo drug design. AI tools such as AlphaFold can help predict the three-dimensional structures of proteins. These predictions can provide useful information for understanding protein structure and drug-target interactions. AI can analyze large chemical and biological datasets in a shorter time. Machine learning models can identify relationships between chemical structures and biological activities. AI-based virtual screening helps researchers select promising compounds from large chemical libraries. Generative AI can assist in designing new molecules with desired properties. AI can also support drug repurposing by identifying existing drugs that may be useful for other diseases. In clinical development, AI can assist with patient

recruitment, patient stratification, and clinical trial design. It can also support biomarker identification, clinical data analysis, and prediction of treatment responses. The use of AI may reduce the time, cost, and number of experiments required during drug development. Overall, AI has the potential to improve the efficiency of drug discovery and support the development of safer and more effective medicines.

Role of AI in drug development and clinical trials

Overall, AI plays a crucial role in the drug development process and clinical trials. AI acts as a decision-support tool for researchers by analyzing large amount of scientific data.

AI can help with:

- Drug Design
- Drug Properties
- Drug Repurposing
- Chemical Synthesis
- Polypharmacology

Challenges and limitations

The development of new medicine is very complicated and long process. Firstly, it starts with finding a drug target and continues the process of detecting drug candidates, optimizing, preclinical trials, clinical trials and finally regulatory approval. Although AI has great possibility in drug discovery and clinical trials but it has several limitations in it's applications. The availability and quality of a data are the major concerns because AI models depends on accurate, complete, and varied datasets; biased data can lead to unreliable detection. AI models such as Machine learning (ML) and Deep learning (DL) may also be difficult to interpret, and making it as a challenging for researchers and regulators to understand how a particular prediction was done. In drug discovery, computational predictions also may not reflect genuine results of biological and experimental tests. So, it remains the necessary of laboratory validation. In clinical trials, further challenges include such as data interoperability, patient-data privacy and security, algorithmic bias, limited infrastructure, regulatory uncertainty, and lack of stakeholder trust. Therefore, AI is considered as a supportive tool rather than replacing an expert researcher with appropriate regulatory monitoring, human oversight, and validation.

Major challenges

In the process of developing new drug the major challenges are

- Time-consuming
- Expensive
- Attrition
- Large amount of data
- Complex and different type of data
- Difficulty in analyzing data

HISTORY AND BACKGROUND

The term Artificial Intelligence (AI) was coined by John McCarthy in 1955 at the Dartmouth Conference in the US.

Early Computational Approaches

Before the development of modern AI, scientists were already using computers in drug research to study molecular properties, drug–target interactions, and relationships between chemical structures and biological activity. Computational methods such as QSAR were used to select promising compounds before experimental testing.

Development of Machine Learning

Machine Learning introduced a data-driven approach to drug discovery. It learns patterns from existing data and uses these patterns to make predictions instead of depending only on fixed rules. Statistical

models and predefined computational methods were used to study chemical structures and biological activities.

Deep Learning Era

Deep Learning is an advanced form of machine learning based on deep neural networks. Drug discovery produces complex chemical and biological data, which can be analyzed using deep learning. It can process molecular structures, graphs, biological sequences, images, and text.

Emergence of Generative AI

Generative AI can create new molecular structures and help optimize their properties. Major approaches include Variational Autoencoders (VAEs), Generative Adversarial Networks (GANs), Transformer models, Diffusion models, and Reinforcement Learning.

Integration with Modern Drug Discovery

AI is now being integrated with computational chemistry, bioinformatics, and structural biology. It helps researchers analyze large datasets and identify potential drug candidates more efficiently.

AI in Target Identification

AI can analyze genomic, proteomic, and biological data to identify potential therapeutic targets. This helps researchers understand disease mechanisms and select suitable targets for drug development.

FUTURE DEVELOPMENT OF AI IN DRUG DISCOVERY

The continued development of AI may improve the speed and accuracy of drug discovery. Future AI systems are expected to support personalized drug design, improve prediction of drug properties, and reduce the time and cost of developing new medicines.

Types of AI

Graph Neural Networks (GNNs):

The traditional drug discovery pipeline is broken. Finding and defining the right therapeutic targets is an incredibly slow, multi-million-dollar gamble. However, Graph Neural Networks (GNNs) are reshaping this landscape by successfully interpreting complex biological networks and molecular graphs that traditional AI struggles to process.

Natural Language Processing (NLP):

NLP in drug discovery:

NLP tries to convert text information into structured data in order to improve data usability and decision-making quality. Looking specifically at drug discovery and development, a variety of NLP approaches have been used in recent years to make use of the massive amount of unstructured data generated and available in the domain. NLP provides numerous functionalities for analyzing unstructured text data across drug research and development applications.

NLP in Clinical trail

Natural Language Processing (NLP) is transforming clinical trials by improving patient selection, data extraction, and monitoring procedures. The advantages of NLP are clear, algorithm bias. NLP will play a bigger part in clinical trials as technology develops, increasing innovation and improving patient outcomes.

Computer Vision (CNN)

Convolutional Neural Networks (CNNs) created a major transformation in pharmaceutical research by automating the extraction of spatial, structural, and behavioural patterns from large datasets. These computational frameworks improve preclinical discovery and clinical trial design by assessing molecular representations and mapping important drug-target interactions with high predictability.

Reinforcement Learning (RL)

Reinforcement learning (RL) transforms healthcare workflows from static protocols to self-aware, data-driven optimization systems. In de novo drug development, RL models function as molecular architects, creating unique chemical structures atom by atom to enhance target binding affinity while reducing

toxicity. In clinical contexts, RL functions as a dynamic doctor, constantly assessing real-time patient data to personalize dose schedules and modify intervention paths. While this dual potential speeds drug pipelines and improves personalized treatment, wide-ranging clinical use necessitates the establishment of specific, clinician-guided reward requirements as well as algorithmic transparency for safe medical audits.

METHODS:

Target Identification:

The implementation of artificial intelligence into early-stage target identification and trial design has moved the pharmaceutical industry's focus toward higher early-phase success rates. Drug concepts improved with generative AI are attaining 80% to 90% success rates in Phase I safety trials, more than three times typical historical standards.

Virtual Screening

Virtual screening (VS) speeds up early-stage drug discovery by computationally filtering large chemical libraries to find promising therapeutic leads. This in silico technology, which uses structure-based docking or ligand-based modeling, reduces costs and attrition rates. By successfully improving the preclinical. VS ensures that only the top medicine candidates go to expensive human trials.

ADMET Side-Effect Prediction.

By automating pharmacokinetic screening and multi-endpoint toxicity assessment, these computational tools remove hazardous chemical candidates early on. Finally, the work shows how adding AI into drug research reduces late-stage clinical trial failures, saves development resources, and accelerates overall safe therapeutic implementation.

Patient Stratification & Recruitment:

By using machine learning and natural language processing to speed up recruiting processes and improve patient selection, artificial intelligence is revolutionizing clinical development. These tools greatly reduce trial durations and enrollment issues by allowing for accurate patient classification through biomarker discovery and automated candidate matching.

Synthetic Control Arms:

Digital twins and artificial intelligence-powered synthetic control arms are revolutionizing randomized controlled trials by modeling virtual control groups using historical data. These techniques maintain trial integrity and statistical power while reducing control arm sample numbers by 17% to 26%.

PLANS

End-to-End Automation:

Target identification, generative molecular design, and clinical trial execution are all integrated into a continuous, closed-loop process through end-to-end automation in AI-driven drug discovery. By substituting automated decision loops for traditional, structured procedures, this integrated ecosystem speeds up development from basic laboratory concepts to final clinical validation.

Physics-Plus-AI Systems Plans

Physics-plus-AI systems integrate physical rules with machine learning to create new medications with great precision, overcoming the limits of traditional AI when dealing with completely unique disease targets. By combining quantum physics and molecular dynamics with machine learning accelerators, these systems can screen billions of compounds every day to predict how a medicine will attach to a protein and behave in the human body. This integrated method reduces the risk of preclinical development, shortens the time required to uncover a viable clinical therapeutic candidate to 12-18 months, and has already successfully produced advanced compounds such as the Phase III clinical trial medication zasocitinib.

Virtual-First DM TA Loops.

Virtual-First DMTA (Design, Make, Test, and Analyze) Loops convert drug research and clinical development from a sluggish, human process to a continuous, AI-powered digital cycle. In this closed-loop system, generative AI and chemical language models create millions of new chemicals and plan their synthesis, which are then either simulated in silico or manufactured automatically by robotic "self-driving"

labs. Advanced machine learning methods and automated multi-agent frameworks quickly test and evaluate these compounds for safety and efficacy, then feed the results back into the next loop to refine the therapeutic candidate. When applied directly to clinical trials, this adaptive orchestration enables researchers to test medications risk-free utilizing virtual patient digital twins, optimize formulation pill design in hours rather than months, and safely reduce multi-year preclinical delays.

Applications of AI in drug discovery:

Target identification and validation

AI can analyze and very huge amount of biological information includes such as Genomic data, Proteomic data, Transcriptomic data, Databases and scientific literature. Machine learning algorithms can detect the patterns in that datasets and helps to researchers to find out the potential drug targets, biomarkers, disease associated genes and relationship between genes, proteins and diseases.

De novo drug design

Generative AI models such as Variational autoencoders (VAEs) and generative adversarial networks (GANs) can help to generate molecular structure and optimize their properties as target binding, drug activity, potential toxicity, pharmacokinetic and pharmacodynamics properties.

Virtual screening and molecular docking

Testing of every compound experimentally will takes a lot of time and resources. Computational methods will screen the compound and detects those that are most likely to be useful. Computational technique like molecular docking used to identifies that how a drug molecule may interact with biological product.

Drug repurposing

It helps in the identifying the new therapeutic uses for existing drugs, and discover the potential uses by analyzing the large biologics and clinical databases.

How AI works in drug discovery:

Artificial intelligence in drug discovery replacing with slow and manual experiments into computer predictions to find the faster effective medicines.

It Includes:

Data collection:

AI Systems collects the information on chemical structures, genes and biological targets, protein structures, toxicology, pharmacology data from different public databases like ChEMBL.

Data transformation:

The AI collected data is converted into mathematical form or readable formats like algorithms, such as molecular formulas into text strings or graphs.

Model Training:

Model training is a machine learning and deep learning algorithms study this data to recognize the patterns into how molecules behave and bind to disease targets.

Prediction and Generation:

AI predicts drug-drug interactions, drug-target interactions, molecular properties, biological activity, pharmacokinetic properties and pharmacodynamics properties.

AI generates the new molecules, drug candidates, potential compounds.

HOW AI WORKS IN CLINICAL TRIALS

Artificial Intelligence (AI) has improved the clinical trial process by automating manual tasks, analyzing large datasets, and supporting better prediction and decision-making. AI can be used at different stages of clinical trials to improve efficiency, accuracy, and patient safety.

Patient Recruitment

AI uses Natural Language Processing (NLP) to read and analyze Electronic Health Records (EHRs) and medical records. It helps identify patients who meet the eligibility criteria of a clinical trial, making the recruitment process faster and more efficient.

Trial Design and Simulation

Machine learning models can analyze previous clinical trials, medical records, and real-world data to support better trial design. AI can also simulate different trial scenarios and help researchers select suitable doses, treatment groups, and patient populations.

Site Selection

AI analyzes historical performance data from clinical trial sites to identify medical centers that are likely to recruit patients efficiently and follow study protocols. This can help researchers select suitable sites for conducting clinical trials.

Real-Time Safety Monitoring

Smart devices and wearable technologies can continuously collect patient data remotely. AI can analyze this information and identify early signs of adverse events or changes in a patient's condition. It can also provide alerts when patients miss doses or require medical attention.

Data Cleaning and Analysis

AI can automate routine data checks, identify errors or missing information, and analyze large clinical datasets. This allows researchers to identify important patterns more quickly than traditional manual data review.

NOVEL TRENDS AND CURRENT ADVANCEMENTS

Protein Structure and Interaction Prediction:

One of the major advancements in AI-assisted drug development is protein structure and interaction prediction. AI-based tools can help predict the three-dimensional structure of proteins and study their interactions with potential drug molecules. This information can support target identification, molecular design, and drug discovery.

Key innovations include:

- **AlphaFold 3:** AlphaFold 3 is a deep learning models its predicts the protein structure interactions with another molecule.
- **Rosetta Fold's:** It is a three-track architecture integrating sequence and spatial constraints.
- **Rediffusion's:** It is a denoising diffusion for de novo protein generation.
- **Protoanemonin's:** It is an inverse folding for sequence –structure co-optimization.

Generative molecular design:

Generative AI is increasing the recent advances in generative molecular design including neural network-based frameworks, reinforcement learning systems, diffusion models, and language model-based transformers.

Large Language Models:

LLM'S are emerging biomedical science by rapid analysis of therapeutic discovery, clinical trial analysis, and biomedical literature review. It includes models like chambers [chemical bidirectional encoder representations from transformers]. It is important due to it reduces the time and manual work which is required for clinical-trials. LLM'S in clinical trials are important in novel trends it can support the patient eligibility criteria, monitoring the clinical trial information, detecting adverse events and side effects, it analyses the clinical information.LLM'S can combine vast information of biomedical literature, clinical trial data, genomic sequences, and patient records to generate actionable insights.

AI-Driven and Automated laboratories:

Artificial intelligence has become increasingly laboratory systems in drug discovery process by enhancing the experimental phases and it learning robotic systems, reducing humans errors.AI including the laboratory automation, data integration, system interoperability and the need for skilled persons.

AI driven laboratories include:

- AI Hypothesis
- AI learning

Digital Twins: Generative AI can support the development of digital twins, which are digital representations of physical objects, systems, or biological processes connected through continuous data exchange. In healthcare, digital twins can represent individual patients or biological systems and may be used to simulate disease progression, treatment responses, and clinical scenarios. AI-based digital twins can help researchers understand possible outcomes and may reduce failure rates by supporting better decision-making before real-world testing.

Multi-Modal AI and Agentic Systems: Future AI systems are increasingly designed to combine different types of healthcare and biological data, including genomics, transcriptomics, proteomics, clinical information, medical records, and text-based data. Integrating these datasets can support disease screening, biomarker identification, drug discovery, and drug repurposing. In addition, agentic AI systems can combine planning, memory, reasoning, and automated execution to perform multi-step drug discovery workflows, such as target identification, molecular design, and synthesis planning.

AI-Originated Drug Candidates in Clinical Development: AI-assisted drug discovery is increasingly being used to identify and develop potential drug candidates for clinical testing. AI can support the selection and optimization of promising molecules by analyzing large chemical and biological datasets. As AI-generated or AI-assisted candidates move into human clinical trials, clinical development remains essential for evaluating their safety, efficacy, and quality. Regulatory evaluation and proper clinical validation are also necessary before these candidates can be approved for patient use.

REGULATORY AND ETHICAL REGULATIONS

Ethical Pillars and Bias: AI models based on historically biased data may worsen regional and racist biases, compromising fair patient enrolment and resulting in unequal care.

Privacy and Data Protection: The usage of huge electronic health and genetic records creates significant hacking and re-identification threats. Researchers argue for privacy-preserving approaches, such as federated learning, to comply with severe GDPR and HIPAA regulations.

Informed Consent Frameworks: Because deep learning is a "black box," consent models must openly explain how their data is used to train algorithms. It must also guarantee that AI-powered recruiting tools do not unjustly disqualify participation.

Dual-track Validation: To minimize biological toxicity from unverified algorithm predictions, the literature calls for a "dual-track verification mechanism" in which virtual AI models operate simultaneously with physical lab or animal screening.

Total Product Life Cycle (TPLC) Regulation: Regulatory organizations, such as the US FDA, are moving toward continuous monitoring frameworks to fight "data drift" (the loss of algorithmic accuracy over time as real-world patient demographics change).

High-Risk Governance: Under frameworks like as the EU AI Act, AI systems that manage therapy dose or patient selection are considered "high risk." This level demands developers to provide detailed training logs, explainable model architecture, and stringent Human-in-the-Loop (HITL) responsibility.

Future perspectives:

Future AI works on robots and automating systems like laboratories and designing a new molecules and structures and AI fasters drug discovery experiments with help of computer predictions and it gives better and effective drugs. In AI drug discovery analyze the results and also improves the testing. Future AI may design multiple drugs or biological pathways it helps to predict the unwanted side effects before clinical testing. AI will transform clinical trails by cutting timelines into 30-50 percent and reducing cost effectiveness and data-driven medicine. In clinical trails patient models will reduce and control group sizes replace with placebo arms. Advanced [NLP] will automate outcomes from unstructured clinical notes.

CONCLUSION

Artificial Intelligence (AI) is becoming an important technology in drug discovery, drug development, and clinical trials. Modern AI approaches such as Machine Learning, Deep Learning, Reinforcement Learning,

Natural Language Processing, Graph Neural Networks, and Generative AI can help researchers analyze large and complex scientific datasets more efficiently. AI can support important activities such as target identification, target validation, virtual screening, de novo drug design, ADMET prediction, drug repurposing, patient recruitment and clinical trial data analysis. AI can reduce the time required to analyze large datasets and can help researchers identify useful patterns and potential drug candidates. It can also support clinical trials by improving patient recruitment, trial design, site selection, data management, and safety monitoring. However, AI does not replace laboratory experiments or clinical studies. The predictions and results generated by AI must be experimentally validated to confirm their accuracy, safety and effectiveness. Recent advancements such as AlphaFold 3, Generative AI, Large Language Models, multimodal AI, digital twins, and AI-driven automated laboratories are creating new opportunities in drug development. These technologies can improve the prediction of molecular properties, protein structures, treatment responses, and clinical outcomes. However, challenges related to data quality, privacy, bias, interpretability, and regulatory requirements must be carefully addressed. Overall, AI has the potential to make drug discovery and clinical trials faster, more efficient and data-driven. Future developments should focus on combining AI with laboratory experiments, clinical evidence, human expertise and proper regulatory oversight.

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