

# Artificial Intelligence-Assisted Nanotechnology for Personalized Management of Obesity and Diabetes

Irakoze Mukamana S.

School of Applied Health Sciences Kampala International University Uganda

---

## ABSTRACT

Obesity and diabetes are two of the most prevalent chronic metabolic diseases worldwide, often co-occurring and contributing to significant healthcare burdens. Traditional approaches for managing these diseases are typically based on standardized treatment regimens, which may not be effective for all individuals due to the heterogeneous nature of these conditions. The combination of artificial intelligence (AI) and nanotechnology offers a transformative approach to personalize the management of obesity and diabetes. AI can analyze vast amounts of patient data to predict disease progression and optimize treatment strategies, while nanotechnology enables targeted drug delivery, enhanced bioavailability, and precise therapeutic interventions. This review explores the integration of AI and nanotechnology in the personalized management of obesity and diabetes, discussing the potential mechanisms, applications, and challenges associated with this innovative approach. We also address the future prospects of AI-assisted nanotechnology for advancing personalized healthcare in metabolic diseases.

**Keywords:** artificial intelligence, nanotechnology, personalized medicine, obesity, diabetes, targeted therapy

---

## INTRODUCTION

Obesity and diabetes, particularly type 2 diabetes (T2D), are closely linked metabolic disorders that are rapidly becoming global health epidemics[1–3]. The rising prevalence of these conditions has led to a significant increase in related comorbidities, such as cardiovascular disease, non-alcoholic fatty liver disease (NAFLD), and chronic kidney disease. Obesity, characterized by excessive adiposity, contributes to insulin resistance and dysregulated glucose metabolism, which are hallmark features of T2D. Both conditions share common pathophysiological mechanisms, including inflammation, oxidative stress, dyslipidemia, and mitochondrial dysfunction[4–6].

The management of obesity and diabetes typically involves a combination of lifestyle interventions, pharmacotherapy, and, in some cases, surgical treatments. However, these conventional approaches often fail to provide personalized care, as they do not account for individual variations in genetics, biomarkers, and response to therapy[7, 8]. In addition, current treatments primarily focus on symptomatic relief, such as improving insulin sensitivity or managing glucose levels, without addressing the underlying causes of the disease.

The advent of artificial intelligence (AI) and nanotechnology has opened new frontiers in the personalized management of metabolic diseases like obesity and diabetes. AI can be leveraged to analyze complex, multidimensional datasets such as patient clinical records, genomic data, biomarkers, and lifestyle factors to predict disease progression, identify optimal treatment regimens, and tailor interventions to individual patients. By analyzing large volumes of data in real-time, AI systems can offer predictive insights that improve disease monitoring, treatment response, and outcomes[9, 10].

Nanotechnology, on the other hand, offers the potential for targeted drug delivery, enhanced bioavailability, and the ability to directly modulate metabolic pathways. Nanoparticles (NPs) can be engineered to deliver bioactive compounds such as insulin-sensitizing agents, lipid-lowering drugs, and anti-inflammatory agents to specific tissues, such as the liver, muscle, and adipose tissue, with high precision[11–14]. Additionally, nanocarriers can be functionalized to improve the stability, solubility, and release kinetics of drugs, ensuring sustained therapeutic effects and reducing side effects.

The integration of AI and nanotechnology offers a promising personalized approach to managing obesity and diabetes. AI can guide the design of nanoplatforms by predicting the most effective therapies based on individual patient characteristics, while nanotechnology can enable the precision delivery of these therapies to the right tissues at the right time. This combination holds the potential to improve treatment outcomes, minimize adverse effects, and provide customized care for patients suffering from obesity and diabetes. This review aims to explore

the role of AI-assisted nanotechnology in the personalized management of obesity and diabetes. We will discuss the mechanisms by which AI and nanotechnology work together, their applications in improving diagnosis and therapy, and the challenges and future directions for their clinical integration.

## **2. Mechanisms of AI-Assisted Nanotechnology in Obesity and Diabetes**

The integration of artificial intelligence (AI) and nanotechnology for personalized healthcare in obesity and diabetes involves several mechanisms that enhance the effectiveness of both diagnosis and treatment[15, 16]. AI can assist in analyzing complex patient data, identifying patterns, and predicting disease progression, while nanotechnology allows for targeted therapy, controlled drug release, and precise modulation of metabolic pathways. Together, these technologies offer a powerful approach to optimize treatment regimens and improve patient outcomes[17, 18].

### **AI-Driven Personalized Medicine**

AI has the ability to process and analyze vast amounts of patient data, including clinical information (e.g., medical history, lifestyle factors), genomic data, biomarkers, and imaging results. By employing machine learning algorithms, AI can identify complex patterns in the data that may not be immediately apparent to clinicians. These insights can then be used to create personalized treatment plans based on an individual's unique metabolic profile[19, 20].

For example, AI models can predict the onset of insulin resistance or diabetes progression by analyzing biomarkers such as insulin levels, glucose tolerance, and lipid profiles. These predictions enable clinicians to intervene at an early stage, potentially delaying or preventing the onset of full-blown diabetes. AI can also optimize the dosing schedules and combinations of drugs used to treat insulin resistance and dyslipidemia, taking into account factors like genetic predisposition, age, and comorbidities[21, 22].

AI can also facilitate the integration of omics data such as genomics, proteomics, and metabolomics to provide a comprehensive understanding of the molecular mechanisms underlying obesity and diabetes[23]. This can lead to the identification of new biomarkers for disease diagnosis, progression, and therapy response, enabling more tailored treatments. Furthermore, AI can continuously monitor patient data in real-time, allowing for dynamic adjustments to treatment plans and early detection of disease complications[24].

### **Nanotechnology for Targeted Drug Delivery**

Nanotechnology provides a powerful platform for delivering therapeutic agents in a targeted and controlled manner. Nanoparticles (NPs) can be designed to encapsulate drugs and other bioactive compounds, ensuring that they are delivered to specific tissues involved in metabolic regulation, such as adipose tissue, liver, and muscle[25–27]. For example, lipid-based nanoparticles or solid lipid nanoparticles (SLNs) can encapsulate insulin-sensitizing drugs, antioxidants, and anti-inflammatory agents, improving their bioavailability and reducing systemic side effects[26].

Targeting specificity is achieved by functionalizing the surface of nanoparticles with ligands that recognize and bind to specific receptors overexpressed in target tissues. For instance, nanoparticles can be modified to target fatty acid receptors in adipose tissue or insulin receptors in liver cells, ensuring that therapeutic agents are delivered directly to the site of action. By improving tissue selectivity, nanocarriers can modulate lipid and glucose metabolism more efficiently than conventional therapies[28, 29].

Moreover, nanoparticles can provide controlled drug release over an extended period, ensuring sustained therapeutic effects and minimizing the need for frequent dosing. For example, polymeric nanoparticles designed for sustained release can deliver glucose-lowering drugs such as metformin or sitagliptin over a longer duration, improving patient compliance and enhancing the efficacy of treatment.

### **Combining AI with Nanotechnology for Treatment Optimization**

AI and nanotechnology can work synergistically to optimize drug design, targeting strategies, and therapeutic regimens. AI can be used to analyze patient data and predict which nanocarrier formulations will be most effective based on an individual's metabolic profile. Machine learning algorithms can optimize the drug delivery parameters, such as nanoparticle size, charge, and surface functionalization, to ensure maximum efficacy[30, 31].

Furthermore, AI can guide the real-time monitoring of therapeutic responses by integrating data from biosensors or imaging modalities (such as MRI, CT scans, or PET scans) alongside nanocarrier tracking systems. This enables dynamic adjustments to treatment regimens, ensuring that therapy is continuously optimized to meet the changing needs of the patient[32].

## **3. Applications of AI-Assisted Nanotechnology in Obesity and Diabetes**

The integration of AI and nanotechnology in obesity and diabetes management has a wide range of applications, from early diagnosis to personalized treatment. These technologies not only offer enhanced diagnostic capabilities but also provide the means for targeted therapy that is tailored to individual patient needs[33].

### **Early Diagnosis and Risk Stratification**

AI-assisted nanotechnology has the potential to improve the early diagnosis of obesity-associated diabetes (OAD) by enabling real-time monitoring of disease biomarkers. Nanoparticles functionalized with imaging agents can be used for non-invasive detection of insulin resistance, lipid dysregulation, and inflammation in tissues such as adipose tissue, liver, and muscle[34]. AI algorithms can process the data collected from imaging

techniques, such as magnetic resonance imaging (MRI) or fluorescence imaging, to provide accurate early-stage diagnosis.

For example, AI models trained on large datasets of biomarkers and imaging data can predict the risk of developing diabetes in overweight or obese individuals, even before significant changes in blood glucose levels occur[35, 36]. This predictive capability enables early interventions, such as lifestyle changes or medications, to prevent or delay the onset of diabetes.

#### **Personalized Treatment of Obesity and Insulin Resistance**

AI-assisted nanotechnology enables the personalized management of obesity and insulin resistance by delivering customized treatments based on individual patient profiles. By integrating patient-specific data, such as genetic information, metabolic biomarkers, and treatment history, AI can predict the most effective nanotherapies for each patient[37].

For instance, nanoplateforms designed for targeted insulin delivery can be personalized to meet the needs of patients with varying degrees of insulin resistance[38]. Nanocarriers encapsulating insulin-sensitizing drugs (such as metformin or glitazones) can be used to improve glucose control while minimizing side effects like weight gain or gastrointestinal discomfort. AI can analyze patient data in real-time and adjust the treatment regimen accordingly to optimize the therapy[38].

#### **Treatment Monitoring and Adjustment**

AI algorithms can continuously monitor the effects of nanotherapeutic treatments by analyzing biomarker levels, glucose readings, and patient feedback. This dynamic monitoring allows for personalized adjustments to treatment regimens, ensuring optimal therapeutic responses. For example, AI can evaluate the effectiveness of a lipid-lowering nanotherapy by analyzing reductions in triglyceride levels or fatty acid accumulation in adipose tissue, while simultaneously assessing improvements in insulin sensitivity through blood glucose and insulin markers[39].

Incorporating biosensors or wearable devices that track real-time data from patients allows for continuous feedback, enhancing the ability to adjust treatments promptly. This approach improves patient outcomes, minimizes drug-related side effects, and increases overall treatment efficacy[40].

#### **4. Challenges and Future Directions**

Despite the promising potential of AI-assisted nanotechnology in managing obesity-associated diabetes (OAD), several challenges remain in translating these innovations into clinical practice.

##### **Biocompatibility and Safety**

One of the major concerns in using nanocarriers for therapeutic purposes is their biocompatibility. Nanoparticles must be designed to minimize toxicity, immune responses, and accumulation in non-target tissues. Long-term studies are needed to evaluate the safety and clearance of nanoparticles, as well as their potential for bioaccumulation or chronic toxicity. Additionally, the biodegradability of nanoplateforms must be ensured to prevent the buildup of non-degradable particles in tissues[41, 42].

##### **Targeting Specificity**

Achieving precise targeting of nanocarriers to insulin-resistant tissues such as adipose tissue, liver, and muscle remains a significant challenge. The development of targeted delivery systems that can accurately deliver therapeutic agents to these tissues without affecting other organs is essential for maximizing therapeutic efficacy. Surface functionalization of nanoparticles with specific ligands or receptor targeting strategies will be key to improving tissue specificity[43].

##### **Scalability and Manufacturing**

The scalability of nanocarrier production processes must be optimized to meet clinical needs while maintaining quality control and consistency. The synthesis of nanoparticles in large quantities that meet regulatory standards for clinical use presents a significant manufacturing challenge. Additionally, ensuring the stability and uniformity of nanoplateforms in mass production is essential for clinical applications[44].

##### **Regulatory and Clinical Translation**

The clinical translation of AI-assisted nanotechnology requires overcoming significant regulatory hurdles. The approval process for nanomedicines is complex, involving rigorous testing for safety, efficacy, and long-term effects. Regulatory bodies such as the FDA and EMA must develop clear guidelines for the approval of nanotherapies that combine both diagnostic and therapeutic functions[45]. Furthermore, cost-effectiveness must be evaluated to ensure that these technologies are accessible to a wide range of patients.

##### **Future Directions**

Future research should focus on developing multi-functional nanoplateforms that combine drug delivery, diagnostic imaging, and real-time monitoring in a single platform. The integration of AI algorithms with biosensors could provide continuous feedback and enable personalized adjustments to treatment regimens. Moreover, gene therapy and CRISPR-Cas9 technology could be incorporated into nanoplateforms for more targeted interventions at the genetic level.

#### **CONCLUSION**

AI-assisted nanotechnology represents a groundbreaking approach for the personalized management of obesity-associated diabetes (OAD). By combining artificial intelligence and nanotechnology, theranostic platforms can enable early diagnosis, targeted therapy, and real-time monitoring of metabolic diseases. AI can predict disease

progression, optimize treatment regimens, and tailor interventions to individual patient needs, while nanotechnology provides precision drug delivery and enhances the bioavailability and effectiveness of therapeutic agents. Although challenges such as biocompatibility, targeting specificity, and scalability remain, the potential of AI-assisted nanotechnology to revolutionize the management of OAD is immense. As research continues to advance, these technologies could offer more personalized, effective, and minimally invasive treatments for obesity and type 2 diabetes, improving patient outcomes and reducing the long-term burden of these metabolic diseases.

## REFERENCES

1. Anand, S., Patel, T.N.: Integrating the metabolic and molecular circuits in diabetes, obesity and cancer: a comprehensive review. *Discov. Oncol.* 15, 779 (2024). <https://doi.org/10.1007/s12672-024-01662-1>
2. Alum, E.U.: Metabolic memory in obesity: Can early-life interventions reverse lifelong risks? *Obes. Med.* 55, 100610 (2025). <https://doi.org/10.1016/j.obmed.2025.100610>
3. Umoru, G.U., Atangwho, I.J., David-Oku, E., Uti, D.E., De Campos, O.C., Udeozor, P.A., Nfona, S.O., Lawal, B., Alum, E.U.: Modulation of Lipogenesis by Tetracarpidium conophorum Nuts via SREBP-1/ACCA-1/FASN Inhibition in Monosodium-Glutamate-Induced Obesity in Rats. *Nat. Prod. Commun.* 20, 1934578X251344035 (2025). <https://doi.org/10.1177/1934578X251344035>
4. Palani, A., Nawrocki, A.R., Orvieto, F., Bianchi, E., Mandić, E., Pessi, A., Huang, C., Deng, Q., Toussaint, N., Walsh, E., Reddy, V., Ashley, E., He, H., Mumick, S., Hawes, B., Marsh, D., Erion, M., Nargund, R., Carrington, P.E.: Discovery of MK-1462: GLP-1 and Glucagon Receptor Dual Agonist for the Treatment of Obesity and Diabetes. *ACS Med. Chem. Lett.* 13, 1248–1254 (2022). <https://doi.org/10.1021/acsmchemlett.2c00217>
5. Volčanšek, Š., Koceva, A., Jensterle, M., Janež, A., Muzurović, E.: Amylin: From Mode of Action to Future Clinical Potential in Diabetes and Obesity. *Diabetes Ther.* 16, 1207–1227 (2025). <https://doi.org/10.1007/s13300-025-01733-8>
6. Uti, D.E., Omang, W.A., Alum, E.U., Ugwu, O.P.-C., Wokoma, M.A., Oplekwu, R.I., Atangwho, I.J., Egbung, G.E.: Combined Hyaluronic Acid Nanobioconjugates Impair CD44-Signaling for Effective Treatment Against Obesity: A Review of Comparison with Other Actors. *Int. J. Nanomedicine.* 20, 10101–10126 (2025). <https://doi.org/10.2147/IJN.S529250>
7. Zaky, A., Glastras, S.J., Wong, M.Y.W., Pollock, C.A., Saad, S.: The Role of the Gut Microbiome in Diabetes and Obesity-Related Kidney Disease. *Int. J. Mol. Sci.* 22, 9641 (2021). <https://doi.org/10.3390/ijms22179641>
8. Obasi, D.C., Abba, J.N., Aniokete, U.C., Okoroh, P.N., Akwari, A.Ak.: Evolving Paradigms in Nutrition Therapy for Diabetes: From Carbohydrate Counting to Precision Diets. *Obes. Med.* 100622 (2025). <https://doi.org/10.1016/j.obmed.2025.100622>
9. Guan, Z., Li, H., Liu, R., Cai, C., Liu, Y., Li, J., Wang, X., Huang, S., Wu, L., Liu, D., Yu, S., Wang, Z., Shu, J., Hou, X., Yang, X., Jia, W., Sheng, B.: Artificial intelligence in diabetes management: Advancements, opportunities, and challenges. *Cell Rep. Med.* 4, 101213 (2023). <https://doi.org/10.1016/j.xcrm.2023.101213>
10. Alum, E.U.: AI-driven biomarker discovery: enhancing precision in cancer diagnosis and prognosis. *Discov. Oncol.* 16, 313 (2025). <https://doi.org/10.1007/s12672-025-02064-7>
11. Anjum, S., Ishaque, S., Fatima, H., Farooq, W., Hano, C., Abbasi, B.H., Anjum, I.: Emerging Applications of Nanotechnology in Healthcare Systems: Grand Challenges and Perspectives. *Pharmaceuticals.* 14, 707 (2021). <https://doi.org/10.3390/ph14080707>
12. Azmi, N.A.N., Elgharbawy, A.A.M.: Advances in Medical Applications: The Quest of Green Nanomaterials. In: Shanker, U., Hussain, C.M., and Rani, M. (eds.) *Handbook of Green and Sustainable Nanotechnology: Fundamentals, Developments and Applications*. pp. 1889–1909. Springer International Publishing, Cham (2023)
13. Ebrahimi, N., Manavi, M.S., Nazari, A., Momayezi, A., Faghihkhorsani, F., Rasool Riyadh Abdulwahid, A.-H., Rezaei-Tazangi, F., Kavei, M., Rezaei, R., Mobarak, H., Aref, A.R., Fang, W.: Nano-scale delivery systems for siRNA delivery in cancer therapy: New era of gene therapy empowered by nanotechnology. *Environ. Res.* 239, 117263 (2023). <https://doi.org/10.1016/j.envres.2023.117263>
14. Ghadami, A., Fathi-karkan, S., Siddiqui, B., Gondal, S.A., Rahdar, A., Garousi, N.A., Kharaba, Z., Ghotekar, S.: Nanotechnology in Imatinib delivery: advancing cancer treatment through innovative nanoparticles. *Med. Oncol.* 42, 116 (2025). <https://doi.org/10.1007/s12032-025-02660-1>
15. Azmi, S., Kunnathodi, F., Alotaibi, H.F., Alhazzani, W., Mustafa, M., Ahmad, I., Anvarbatcha, R., Lytras, M.D., Arafat, A.A.: Harnessing Artificial Intelligence in Obesity Research and Management: A Comprehensive Review. *Diagnostics.* 15, 396 (2025). <https://doi.org/10.3390/diagnostics15030396>
16. Wu, Y., Min, H., Li, M., Shi, Y., Ma, A., Han, Y., Gan, Y., Guo, X., Sun, X.: Effect of Artificial Intelligence-based Health Education Accurately Linking System (AI-HEALS) for Type 2 diabetes self-management: protocol for a mixed-methods study. *BMC Public Health.* 23, 1325 (2023). <https://doi.org/10.1186/s12889-023-16066-z>



17. Agrawal, K., Goktas, P., Kumar, N., Leung, M.-F.: Artificial intelligence in personalized nutrition and food manufacturing: a comprehensive review of methods, applications, and future directions. *Front. Nutr.* 12, (2025). <https://doi.org/10.3389/fnut.2025.1636980>
18. Alum, E.U., Ugwu, O.P.-C.: Artificial intelligence in personalized medicine: transforming diagnosis and treatment. *Discov. Appl. Sci.* 7, 193 (2025). <https://doi.org/10.1007/s42452-025-06625-x>
19. Fahim, Y.A., Hasani, I.W., Kabba, S., Ragab, W.M.: Artificial intelligence in healthcare and medicine: clinical applications, therapeutic advances, and future perspectives. *Eur. J. Med. Res.* 30, 848 (2025). <https://doi.org/10.1186/s40001-025-03196-w>
20. Khalifa, M., Albadawy, M.: Artificial Intelligence for Clinical Prediction: Exploring Key Domains and Essential Functions. *Comput. Methods Programs Biomed. Update.* 5, 100148 (2024). <https://doi.org/10.1016/j.cmpbup.2024.100148>
21. Gao, W., Deng, Z., Gong, Z., Jiang, Z., Ma, L.: AI-driven prediction of insulin resistance in non-diabetic populations using minimal invasive tests: comparing models and criteria. *Diabetol. Metab. Syndr.* 17, 338 (2025). <https://doi.org/10.1186/s13098-025-01920-4>
22. Lalani, B., Herur, R., Zade, D., Collins, G., Dishong, D.M., Mehta, S., Shim, J., Valdez, Y., Mathioudakis, N.: Applications of Artificial Intelligence and Machine Learning in Prediabetes: A Scoping Review. *J. Diabetes Sci. Technol.* 19322968251351995 (2025). <https://doi.org/10.1177/19322968251351995>
23. Bi, X., Sun, L., Yeo, M.T.Y., Seaw, K.M., Leow, M.K.S.: Integration of metabolomics and machine learning for precise management and prevention of cardiometabolic risk in Asians. *Clin. Nutr.* 50, 146–153 (2025). <https://doi.org/10.1016/j.clnu.2025.05.011>
24. Cheng, C., Liu, Y., Sun, L., Fan, J., Sun, X., Zheng, J.-S., Zheng, L., Zhu, Y., Zhou, D.: Integrative metabolomics and genomics reveal molecular signatures for type 2 diabetes and its cardiovascular complications. *Cardiovasc. Diabetol.* 24, 166 (2025). <https://doi.org/10.1186/s12933-025-02718-4>
25. Uti, D.E., Atangwho, I.J., Alum, E.U., Ntaobeten, E., Obeten, U.N., Bawa, I., Agada, S.A., Ukam, C.I.-O., Egbung, G.E.: Antioxidants in cancer therapy mitigating lipid peroxidation without compromising treatment through nanotechnology. *Discov. Nano.* 20, 70 (2025). <https://doi.org/10.1186/s11671-025-04248-0>
26. Uti, D.E., Alum, E.U., Atangwho, I.J., Ugwu, O.P.-C., Egbung, G.E., Aja, P.M.: Lipid-based nano-carriers for the delivery of anti-obesity natural compounds: advances in targeted delivery and precision therapeutics. *J. Nanobiotechnology.* 23, 336 (2025). <https://doi.org/10.1186/s12951-025-03412-z>
27. Nwuruku, O.A., Edwin, N.: Harnessing nature: plant-derived nanocarriers for targeted drug delivery in cancer therapy. *Phytomedicine Plus.* 5, 100828 (2025). <https://doi.org/10.1016/j.phyplu.2025.100828>
28. Yoo, J., Park, C., Yi, G., Lee, D., Koo, H.: Active Targeting Strategies Using Biological Ligands for Nanoparticle Drug Delivery Systems. *Cancers.* 11, 640 (2019). <https://doi.org/10.3390/cancers11050640>
29. Wang, Y., He, X., Huang, K., Cheng, N.: Nanozyme as a rising star for metabolic disease management. *J. Nanobiotechnology.* 22, 226 (2024). <https://doi.org/10.1186/s12951-024-02478-5>
30. Deshmukh, S.S., Yadav, K.S.: Next-gen cancer therapy: The convergence of artificial intelligence, nanotechnology, and digital twin. *Nanotechnol.* 8, 100286 (2025). <https://doi.org/10.1016/j.nxnano.2025.100286>
31. Bhang, M., Telange, D.: Convergence of nanotechnology and artificial intelligence in the fight against liver cancer: a comprehensive review. *Discov. Oncol.* 16, 77 (2025). <https://doi.org/10.1007/s12672-025-01821-y>
32. Hassan, Y.M., Wanas, A., Ali, A.A., El-Sayed, W.M.: Integrating artificial intelligence with nanodiagnostics for early detection and precision management of neurodegenerative diseases. *J. Nanobiotechnology.* 23, 668 (2025). <https://doi.org/10.1186/s12951-025-03719-x>
33. Azmi, S., Kunnathodi, F., Alotaibi, H.F., Alhazzani, W., Mustafa, M., Ahmad, I., Anvarbatcha, R., Lytras, M.D., Arafat, A.A.: Harnessing Artificial Intelligence in Obesity Research and Management: A Comprehensive Review. *Diagnostics.* 15, 396 (2025). <https://doi.org/10.3390/diagnostics15030396>
34. Ghosh, A., Sarkar, S., Mandal, D., Orasugh, J.T., Ray, S.S., Chattopadhyay, D.: Potential application of nanotechnology in Type-3 diabetes: Bridging insulin resistance and neurodegeneration. *Nano Trends.* 11, 100144 (2025). <https://doi.org/10.1016/j.nwnano.2025.100144>
35. Khokhar, P.B., Gravino, C., Palomba, F.: Advances in artificial intelligence for diabetes prediction: insights from a systematic literature review. *Artif. Intell. Med.* 164, 103132 (2025). <https://doi.org/10.1016/j.artmed.2025.103132>
36. Khan, S., Shah, Z.: Artificial intelligence-based diabetes risk prediction from longitudinal DXA bone measurements. *Sci. Rep.* 15, 25706 (2025). <https://doi.org/10.1038/s41598-025-10136-5>
37. Ghosh, K., Chandra, S., Ghosh, S., Ghosh, U.S.: Artificial Intelligence in Personalized Medicine for Diabetes Mellitus: A Narrative Review. *Cureus.* 17, e91520. <https://doi.org/10.7759/cureus.91520>
38. Zeng, J., Tang, X., Qin, D., Yu, L., Zhou, X., Feng, C., Mi, J., Pan, H., Wu, J., Huang, B., Wu, A.: Engineered GLP-1R-targeting nanoplatfoms: multimodal therapeutics in human diseases. *J. Nanobiotechnology.* 23, 682 (2025). <https://doi.org/10.1186/s12951-025-03677-4>

39. Khalifa, M., Albadawy, M.: Artificial intelligence for diabetes: Enhancing prevention, diagnosis, and effective management. *Comput. Methods Programs Biomed. Update.* 5, 100141 (2024). <https://doi.org/10.1016/j.cmpbup.2024.100141>
40. Shirzad, M., Shaban, M., Mohammadzadeh, V., Rahdar, A., Fathi-karkan, S., Hoseini, Z.S., Najafi, M., Kharaba, Z., Aboudzadeh, M.A.: Artificial Intelligence-Assisted Design of Nanomedicines for Breast Cancer Diagnosis and Therapy: Advances, Challenges, and Future Directions. *BioNanoScience.* 15, 354 (2025). <https://doi.org/10.1007/s12668-025-01980-w>
41. Kyriakides, T.R., Raj, A., Tseng, T.H., Xiao, H., Nguyen, R., Mohammed, F.S., Halder, S., Xu, M., Wu, M.J., Bao, S., Sheu, W.C.: Biocompatibility of nanomaterials and their immunological properties. *Biomed. Mater. Bristol Engl.* 16, 10.1088/1748-605X/abe5fa (2021). <https://doi.org/10.1088/1748-605X/abe5fa>
42. Ma, X., Tian, Y., Yang, R., Wang, H., Allahou, L.W., Chang, J., Williams, G., Knowles, J.C., Poma, A.: Nanotechnology in healthcare, and its safety and environmental risks. *J. Nanobiotechnology.* 22, 715 (2024). <https://doi.org/10.1186/s12951-024-02901-x>
43. Yang, Y., Wang, X.: Nano-drug delivery systems (NDDS) in metabolic dysfunction-associated steatotic liver disease (MASLD): current status, prospects and challenges. *Front. Pharmacol.* 15, (2024). <https://doi.org/10.3389/fphar.2024.1419384>
44. Alshawwa, S.Z., Kassem, A.A., Farid, R.M., Mostafa, S.K., Labib, G.S.: Nanocarrier Drug Delivery Systems: Characterization, Limitations, Future Perspectives and Implementation of Artificial Intelligence. *Pharmaceutics.* 14, 883 (2022). <https://doi.org/10.3390/pharmaceutics14040883>
45. Đorđević, S., Gonzalez, M.M., Conejos-Sánchez, I., Carreira, B., Pozzi, S., Acúrcio, R.C., Satchi-Fainaro, R., Florindo, H.F., Vicent, M.J.: Current hurdles to the translation of nanomedicines from bench to the clinic. *Drug Deliv. Transl. Res.* 12, 500 (2021). <https://doi.org/10.1007/s13346-021-01024-2>

**CITE AS: Irakoze Mukamana S. (2026). Artificial Intelligence-Assisted Nanotechnology for Personalized Management of Obesity and Diabetes. IDOSR JOURNAL OF BIOLOGY, CHEMISTRY AND PHARMACY 11(1):22-27. <https://doi.org/10.59298/IDOSR/JBCP/26/102.2227>**