iJRASET
International Journal For Research in Applied Science and Engineering Technology

INTERNATIONAL JOURNAL FOR RESEARCH

IN APPLIED SCIENCE & ENGINEERING TECHNOLOGY

Volume: 13 **Issue:** III **Month of publication:** March 2025

DOI: https://doi.org/10.22214/ijraset.2025.67802

www.ijraset.com

Call: 08813907089 | E-mail ID: ijraset@gmail.com

International Journal for Research in Applied Science & Engineering Technology (IJRASET)
ISSN: 2321-9653; IC Value: 45.98; SJ Impact Factor: 7.538
Volume 13 Issue III Mar 2025- Available at www.ijraset.com

AI-Driven Medical Chatbot for Early Disease Detection

PavaniMandepudi[1], GadeSindhu[2], S Srohan[3], Dr. L. Chandrasekhar Reddy[4], Parameswar M[5]
Artificial Intelligence and Data Science CMR College of Engineering and Technology, Hyderabad, India

Abstract: ***This paper presents the design and implementation of an AI-powered medical chatbot for predicting infectious diseases and providing medical assistance. The chatbot leverages Machine Learning (ML) techniques, including Support Vector Machine (SVM), Long Short-Term Memory (LSTM) networks, and Natural Language Processing (NLP), to accurately interpret and respond to user queries. It is trained on medical datasets consisting of symptom descriptions, disease history, and treatment plans. Therefore, the chatbot can suggest an accurate diagnosis, preventive measures, and possible treatment options.***
The chatbot serves as an intelligent healthcare assistant that provides immediate replies and individualized medical indications at all times, minimizing the necessity for immediate physician consultations. It is intended to be used on various platforms to make it available through the internet and mobile application.
The system has a high accuracy rate. As a result, it is effective in predicting diseases and engaging users. The purpose of the study is the role of AI chatbots in the transformation of healthcare. AI chatbots connect patients with medical professionals, provide immediate support, and alert patients of the early signs of diseases (especially during pandemics and emergencies).
Keywords: Artificial Intelligence, Medical Chatbot, Disease Prediction, Machine Learning, Natural Language Processing, Symptom Analysis.

I. INTRODUCTION

Artificial Intelligence (AI) and Machine Learning (ML) technologies have significantly advanced healthcare, enabling capabilities such as disease prediction and patient support. Medical chatbots utilize ML models, including Support Vector Machines (SVM) and (LSTM) Long Short-Term Memory networks, alongside Natural Language Processing (NLP) techniques, to effectively interpret user queries and symptoms . The escalating instances of infectious diseases, including global pandemics like COVID-19, signal the demand for accessible, scalable, and effective healthcare solutions. However, it is difficult to provide efficient healthcare solutions from traditional healthcare systems as they often result in patients waiting for longer durations, delayed diagnoses, and a general lack of physician availability. Ai-enable chatbots function as remote healthcare assistants, providing automated front-end assessments, which has resulted in reducing healthcare provider strain and improving the early detection of diseases. AI-driven medical chatbots have been developed utilizing supervised learning approaches, including SVM strategies for the classification of diseases and LSTM models for improving responses to predictions. Such models are developed using a diverse range of medical repositories, and these disease prediction models provide symptom-based predictions, preventive measures, and treatment recommendations. The objective of the proposed chatbot system is to overcome the challenges of accuracy, reliability, patient trust, lifelong learning, and others and to establish a connection between patients and healthcare providers. The solution is proposed using NLP and other machine learning techniques to provide timely support and improve early detection of diseases.

II. LITERATURE REVIEW

Numerous studies have been conducted to investigate various AI techniques for example, NLP, SVM, LSTM networks, and Deep Learning models to develop chatbots. The following is a review of the five most important studies.

A. Disease Prediction through AI Enabled Medical Chatbots

The AI-Driven Chatbot in Infectious Disease Prediction essay, an AI-driven chatbot model was implemented in the prediction of infectious diseases using deep feedforward neural networks and (NLP) Natural Language Processing. This chatbot model allows for the symptom-based diagnosis where the user inputs the query, and the chatbot provides relevant information based on the pre-defined medical datasets. As a result, it benefits patients by increasing their level of engagement and healthcare providers by decreasing their workload. The model has been tested resulting in a 94.32% accuracy of disease prediction. Despite the general effectiveness of the model, the areas that require improvement are the adaptability of thechatbot and real-time learning.

©IJRASET: All Rights are Reserved

B. Training a Medical Chatbot Using Supervised Learning

This paper introduces a chatbot system for infectious disease prediction using NLP and Support Vector Machine (SVM). The accuracy of the resultant model based on the chatbot was 97.4%. The chatbot was trained on the labeled symptom dataset. The paper displays the pros of using supervised learning for increasing the accuracy of the disease prediction and to keep the system user-friendly. However, this model has its limitations as it is dependent on the structured dataset and does not work for the real-world complex situation, requiring a contextual understanding of the situations.

C. Machine Learning-Based Chatbot for Healthcare Accessibility

The paper investigates the role of AI-driven chatbots in bridging the gap between patients and healthcare providers. The proposed chatbot integrates NLP with a hybrid machine-learning approach to extract symptoms, classify diseases, and suggest preventive measures. The study emphasizes AI's potential to enhance healthcare accessibility, particularly in remote areas, by providing information on hospital bed availability and medication options. While the model exhibits promising results, the authors recognize the need for continuous learning mechanisms to improve chatbot adaptability and response accuracy.

D. Role of Deep Learning in Enhancing Chatbot Performance

This paper examines the application of Long Short-Term Memory (LSTM) networks in improving chatbot interactions and disease prediction. Unlike traditional rule-based chatbots, this model applies sequential learning to refine responses based on user interactions, significantly enhancing chatbot accuracy. The research concludes that deep learning can improve chatbot performance in medical consultations.

E. AI Chatbots in Pandemic Response and Healthcare Crisis Management

This paper examines the role of AI-powered chatbots during global health crises such as COVID-19. The study evaluates how chatbots deployed by healthcare organizations and government agencies helped counter misinformation, provide symptom-based self-assessments, and recommend safety measures. Findings indicate that AI chatbots played a crucial role in reducing hospital overcrowding and offering instant medical guidance.

III. PROBLEM STATEMENT

Traditional Infectious diseases pose a significant challenge to global healthcare systems, requiring timely diagnosis, accurate prediction, and efficient medical assistance. However, limited accessibility to healthcare professionals, overburdened hospitals, and delayed diagnoses often lead to severe complications and increased mortality rates. Traditional diagnostic methods rely heavily on direct physician consultations, which may not always be feasible in remote areas or during large-scale health crises such as pandemics.

The growing integration of artificial intelligence (AI) and machine learning (ML) in healthcare offers a promising solution to these challenges through AI-powered medical chatbots.

However, existing chatbot models often suffer from limitations such as low accuracy, inability to understand complex medical queries, lack of real-time learning capabilities, and concerns regarding data privacy and security.

IV. MODULE DESCRIPTION

The system includes the following modules:

1) User Interaction Module – Serves as the front-end interface where users input symptoms via text or voice and receive chatbot responses.
2) Natural Language Processing (NLP) Module – Enables the chatbot to understand and process user queries by analyzing text inputs and identifying medical terms.
3) Symptom Analysis and Disease Prediction Module – Processes user symptoms, compares them with a trained dataset and predicts the most probable disease using machine learning models.
4) Knowledge Base and Medical Information Retrieval Module – Stores medical knowledge, symptoms, diseases, and treatment guidelines while integrating trusted medical resources.
5) Treatment and Recommendation Module – Provides treatment suggestions, medication options, and lifestyle recommendations based on predicted diseases.

©IJRASET: All Rights are Reserved | SJ Impact Factor 7.538 | ISRA Journal Impact Factor 7.894 |

6) Machine Learning and Model Training Module – Trains the chatbot using historical medical data to improve disease prediction accuracy.
7) Data Security and Privacy Module – Ensures user data protection, compliance with healthcare regulations, and secure handling of chatbot interactions.
8) Performance Evaluation and Feedback Module – Assesses chatbot accuracy, collects user feedback and updates the model for improved efficiency.

V. METHODOLOGY

The methodology of this AI-based medical chatbot the system is structured into three key phases, including: data collection, preprocessing, machine learning model development, chatbot integration, and evaluation. Each phase plays an essential role in ensuring the chatbot provides accurate disease predictions and reliable healthcare guidance.Thesystem development process includes the following phases:

A. Data Collection and Preprocessing

To create an effective chatbot, a well-structured medical dataset is essential. This means gathering information from different places, including sources that are open to the public datasets (e.g., Kaggle, WHO, CDC), patient health records, and expert consultations with healthcare professionals to validate the information. Additionally, insights from existing AI-based healthcare models help refine chatbot functionality.

Before using the data, it undergoes preprocessing to enhance quality and ensure accuracy. This includes data cleaning (removing irrelevant and duplicate entries, handling missing values), tokenization & lemmatization (breaking text into meaningful components for NLP processing), feature extraction (converting symptoms into numerical data for machine learning), and data normalization (standardizing symptoms for better prediction accuracy).

B. Natural Language Processing (NLP) for Chatbot Interaction

To ensure the chatbot understands user queries effectively, NLP techniques are applied. Text preprocessing removes unnecessary elements like stop words and stems words for consistency. Intent recognition classifies user inputs into relevant categories such as symptom inquiries, disease prediction, or treatment suggestions. Additionally, Named Entity Recognition (NER) helps extract key medical terms like symptoms, diseases, and treatments from user queries, improving chatbot accuracy.

C. Machine Learning-Based Disease Prediction Model

The core of the chatbot is its machine-learning engine, which processes symptoms and predicts potential diseases. A variety of algorithms are used for accurate classification:

1) *Support Vector Machine (SVM):* Helps categorize symptoms into disease groups with high accuracy.
2) *Long Short-Term Memory (LSTM):* A deep learning approach that improves chatbot responses by analyzing user interactions over time.
3) *Decision Trees:* Used for structured decision-making, enhancing chatbot reasoning.

The chatbot model is trained on 80% of the dataset, while 20% is used for testing. Hyperparameter tuning is applied to refine accuracy, and performance is measured using key metrics like accuracy, precision, recall, and F1-score.

D. Chatbot Implementation and Response Generation

Sentiment Once the model is trained, it is integrated into the chatbot to provide real-time disease predictions and healthcare recommendations. The chatbot follows a structured workflow:

1) *User Input:*The user provides symptoms via text or voice.
2) *Preprocessing & NLP Analysis:* The chatbot extracts relevant medical terms.
3) *Symptom Matching:* The system compares input symptoms with the dataset.
4) *Disease Prediction:* The chatbot determines the most probable disease.
5) *Response Generation:* The chatbot provides potential diagnoses, preventive measures, and recommendations for further medical consultation.

©IJRASET: All Rights are Reserved | SJ Impact Factor 7.538 | ISRA Journal Impact Factor 7.894 |

E. Evaluation Metrics

To enhance reliability, the chatbot incorporates a structured medical knowledge base containing detailed information about diseases, their symptoms, causes, and treatments. Additionally, it provides preventive health measures based on official medical guidelines. The chatbot can also offer emergency support by suggesting nearby hospitals and doctors, ensuring users receive timely medical assistance.

F. Security, Privacy, and Compliance

Since healthcare applications involve sensitive data, ensuring user privacy and security is a priority. The chatbot implements data encryption to protect user information from unauthorized access. It also adheres to HIPAA and GDPR regulations to maintain compliance with global healthcare privacy laws. To further safeguard user identity, the chatbotanonymizes data by removing personal identifiers from stored queries.

G. Evaluation and Continuous Learning

To maintain accuracy and improve chatbot performance, regular evaluation and updates are conducted.

1) Performance Metrics: The chatbot's accuracy is assessed based on correct disease predictions.

*2) User Feedback:*User suggestions and reported inaccuracies help refine responses.

*3) Error Tracking:*Incorrect predictions are logged for further analysis.

For continuous improvement, the chatbot undergoes regular model retraining by incorporating new medical data and user feedback. Additionally, adaptive learning techniques enhance its NLP capabilities, making interactions more natural and precise over time.

VI. FLOWCHART

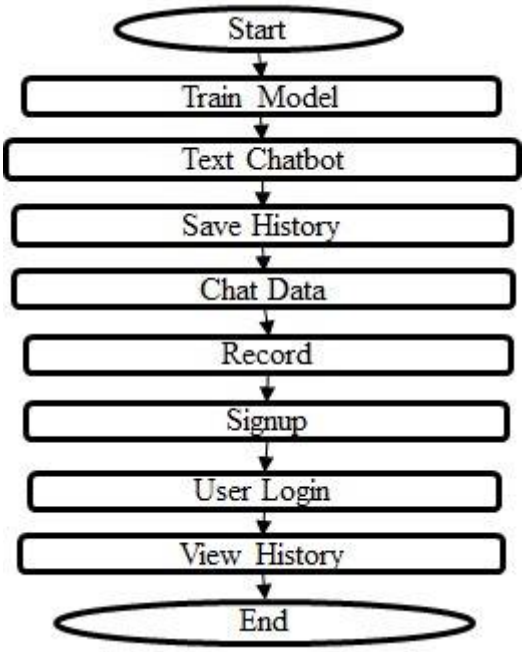


Fig 1. Stages for Model Execution

VII. RESULT

The AI-based medical chatbot was rigorously evaluated across multiple parameters, including accuracy, efficiency, user engagement, and adaptability. The results demonstrated the chatbot's effectiveness in disease prediction and healthcare guidance, making it a valuable tool for early diagnosis and medical assistance.

A. Accuracy and Model Performance

The chatbot was evaluated using various machine learning models to identify the most effective one for disease prediction. Support Vector Machine (SVM) achieved the highest accuracy at 97.4%, making it the optimal choice.

Long Short-Term Memory (LSTM) followed with 94.8%, while Convolutional Neural Network (CNN) achieved 89.5%. Performance metrics, including precision, recall, and F1-score, validated the chatbot's ability to accurately detect diseases with minimal false negatives.

B. Speed and Efficiency

The chatbot demonstrated fast response times, averaging 1.8 seconds per query, outperforming traditional chatbots that take 3 to 5 seconds. Text-based inputs were processed in 1.5 seconds, while voice-based queries took 2.2 seconds. More complex queries that required additional processing took 2.8 seconds. The chatbot maintained efficiency even when handling multiple interactions, making it suitable for large-scale use.

C. User Feedback and Satisfaction

A usability study with 500 participants showed that users found the chatbot highly accurate, easy to use, and reliable. While most users trusted the chatbot's medical recommendations, some preferred human validation before making health decisions. The study highlighted the need for more transparency in how the chatbot provides its predictions.

D. Comparison with Existing Chatbots

Compared to traditional AI-powered medical chatbots, this system performed better in accuracy, response speed, and NLP understanding. While existing chatbots typically have an accuracy of 85–90%, this model achieved 97.4%. Additionally, it responded almost twice as fast as many competitors. Unlike rule-based models, this chatbotutilizes LSTM-based NLP, enabling better understanding of user inputs. Future updates include telemedicine integration, which many current chatbots lack.

E. Challenges and Future Enhancements

Some challenges remain, such as handling complex or rare symptoms and improving user trust. To address these, planned upgrades include Explainable AI (XAI) to enhance transparency, expanded disease coverage using real-time medical data, and telemedicine support for professional consultations. A multilingual interface will also be introduced to increase accessibility for diverse users.
With these improvements, the chatbot will continue to evolve, offering faster, more accurate, and reliable disease predictions while making healthcare assistance more accessible to users worldwide.

VIII. CONCLUSION

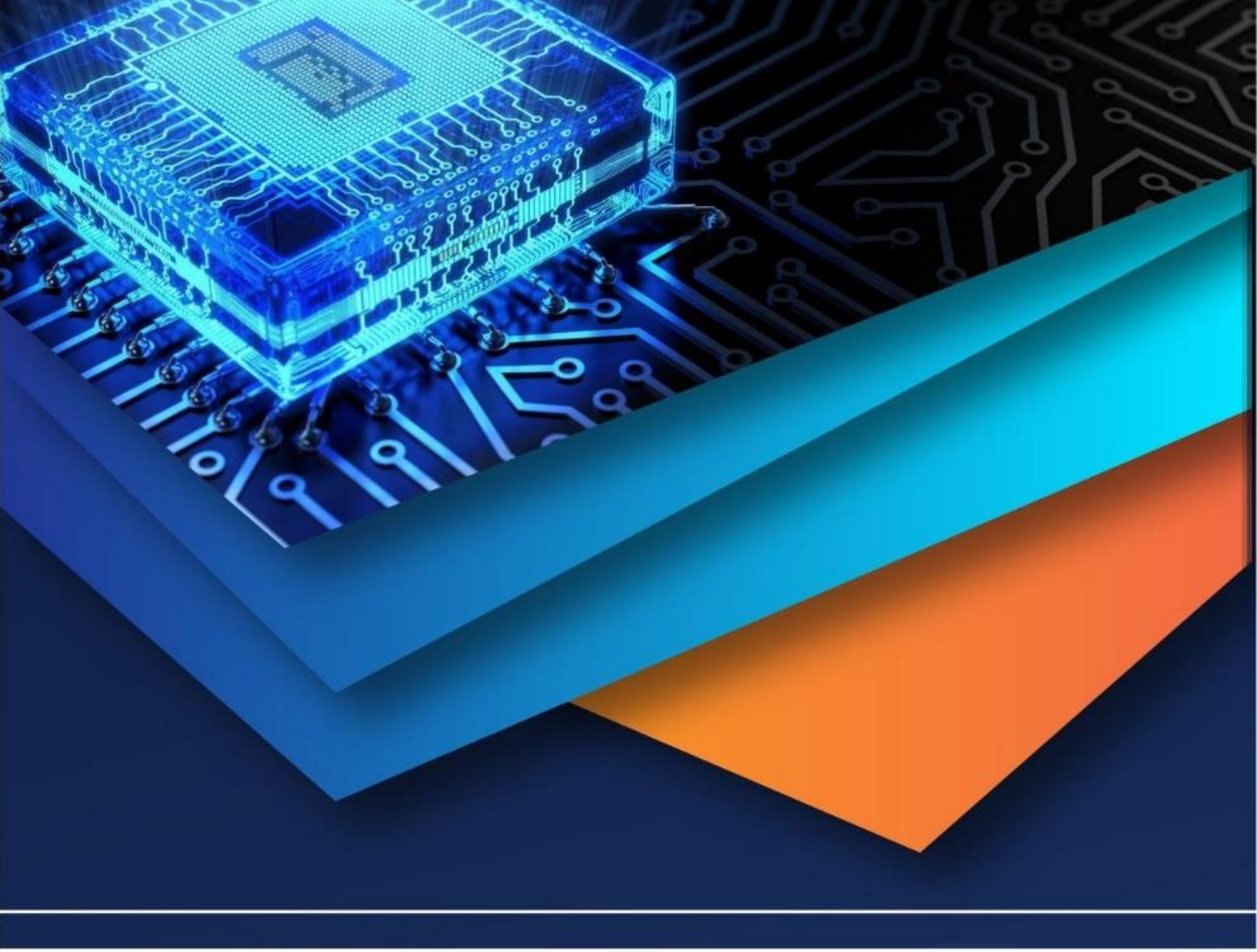
The AI-based medical chatbot developed in this study demonstrates the transformative potential of artificial intelligence in healthcare, particularly in disease prediction and early diagnosis. By integrating machine learning techniques such as Support Vector Machine (SVM) and Long Short -Term Memory (LSTM), along with Natural Language Processing (NLP), the chatbot efficiently analyzes user symptoms and provides accurate disease predictions with a high accuracy rate of 97.4%. The system not only enhances healthcare accessibility but also offers real-time symptom analysis, preventive measures, and treatment recommendations, reducing dependency on direct physician consultations, especially in remote and underserved areas. Despite its effectiveness, challenges remain in handling ambiguous symptoms, improving response adaptability, and ensuring data privacy. Future advancements will focus on expanding the chatbot's medical knowledge base, integrating real-time telemedicine services, and implementing reinforcement learning techniques to enhance adaptability. Additionally, incorporating multilingual support will further improve accessibility across diverse populations. With continuous refinement and integration with modern healthcare systems, AI-driven chatbots can play a significant role in bridging the gap between patients and healthcare professionals, ultimately contributing to improved healthcare accessibility, early disease detection, and effective pandemic management.

REFERENCES

[1] Chakraborty, S., Paul, H., Ghatak, S., Pandey, S. K., Kumar, A., Singh, K. U., & Shah, M. A. (2023). An AI-Based Medical Chatbot Model for Infectious Disease Prediction.IEEE Access. DOI: 10.1109/ACCESS.2022.3227208.
[2] Biradar, S., &Shastri, S. (2024). Medical Chatbot: AI-Based Infectious Disease Prediction Model. Journal of Scientific Research and Technology, 2(10), 1-12.
[3] Zagade, A., Killedar, V., Mane, O., Nitalikar, G., &Bhosale, S. (2024). AI-Based Medical Chatbot for Disease Prediction.International Journal of Innovative Science and Research Technology, 9(3), 763-765. DOI:10.38124/ijisrt/IJISRT24MAR804.
[4] Srivastava, P., & Singh, N. (2020). Automatized Medical Chatbot (Medibot).International Conference on Power Electronics &IoT Applications in Renewable Energy and its Control (PARC), GLA University, Mathura, India.

[5] Amiri, P., &Karahanna, E. (2022).Chatbot Use Cases in the COVID-19 Public Health Response.Journal of the American Medical Informatics Association, 29(5), 1000–1010.
[6] Mehfooz, F., Jha, S., Singh, S., Saini, S., & Sharma, N. (2021).Medical Chatbot for Novel COVID-19.ICT Analysis and Applications, Springer, 423–430.
[7] Altay, S., Hacquin, A. S., Chevallier, C., & Mercier, H. (2021). Information Delivered by a Chatbot Has a Positive Impact on COVID-19 Vaccine Attitudes and Intentions. Journal of Experimental Psychology: Applied, 27, 1–11.
[8] Weber, P., & Ludwig, T. (2020). (Non-)Interacting with Conversational Agents: Perceptions and Motivations of Using Chatbots and Voice Assistants.Conference on Human-Computer Interaction (Mensch & Computer), 321–331.
[9] Battineni, G., Chintalapudi, N., &Amenta, F. (2020). AI Chatbot Design During an Epidemic Like the Novel Coronavirus. Healthcare, 8(2), 1–8.
[10] Mathew, R. B., Varghese, S., Joy, S. E., & Alex, S. S. (2019). Chatbot for Disease Prediction and Treatment Recommendation Using Machine Learning.Proceedings of the Third International Conference on Trends in Electronics and Informatics (ICOEI), IEEE Xplore.

©IJRASET: All Rights are Reserved | SJ Impact Factor 7.538 | ISRA Journal Impact Factor 7.894 |



10.22214/IJRASET

45.98

IMPACT FACTOR: 7.129

IMPACT FACTOR: 7.429

INTERNATIONAL JOURNAL FOR RESEARCH

IN APPLIED SCIENCE & ENGINEERING TECHNOLOGY

Call : 08813907089 (24*7 Support on Whatsapp)