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Adaptive Deep Learning Architectures for Real-Time Healthcare Diagnostics

Author:

Dr. Aniket Sharma
Department of Computer Science
TechVille Institute of Technology
New Delhi, India

Email: aniket.sharma@techville.edu.in

Abstract

Advances in artificial intelligence have transformed healthcare diagnostics, yet traditional deep learning architectures often struggle to adapt to rapidly changing patient data streams. This paper proposes an adaptive deep learning framework integrating reinforcement learning with convolutional neural networks (CNNs) to enhance diagnostic accuracy in real time. The system dynamically adjusts its parameters and feature extraction layers based on continuous feedback from incoming data, enabling faster and more precise predictions. Experimental simulations on benchmark medical datasets demonstrate a significant improvement in classification accuracy and latency reduction compared to static models. The findings underscore the potential of adaptive AI systems to revolutionize healthcare diagnostics, particularly in emergency and point-of-care settings.

Keywords: Deep Learning, Healthcare AI, Reinforcement Learning, Real-Time Diagnostics.

1. Introduction

Artificial intelligence (AI) has emerged as a transformative technology in healthcare, particularly in diagnostics, where deep learning models have achieved human-level accuracy in tasks such as radiology image classification and disease detection. However, the rapidly evolving nature of patient data



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—driven by variables such as demographics, co-morbidities, and medical device inputs—poses challenges for traditional static architectures. These models often require retraining to adapt to new patterns, resulting in delays and increased resource costs.

This paper addresses the need for **adaptive deep learning architectures** capable of real-time adjustment to new data distributions. By incorporating reinforcement learning (RL) mechanisms into convolutional neural networks (CNNs), the proposed system continuously updates its feature extraction and decision-making policies, thus enabling real-time diagnostics without frequent retraining.

2. Literature Review

Early deep learning approaches in healthcare primarily relied on CNNs and recurrent neural networks (RNNs) for image and time-series analysis. Studies by Rajpurkar et al. (2017) demonstrated CNN-based chest X-ray classification with high accuracy, while Esteva et al. (2019) showcased dermatology-level classification of skin lesions. However, these models typically remain static once deployed, making them vulnerable to data drift.

Recent work has explored online learning and reinforcement learning for adaptation. Li et al. (2020) proposed an online gradient adjustment mechanism for evolving medical data, while Mnih et al. (2015) introduced deep Q-learning for dynamic environments. Yet, few studies integrate these paradigms into a unified architecture for real-time medical diagnostics. This paper seeks to fill this gap by combining CNNs with RL-based policy adjustment for continuous learning.

3. Methodology

The proposed framework consists of two primary components:

- 1. **Base Model (CNN):** Handles initial feature extraction from medical images or structured patient data.
- 2. Adaptive Module (Reinforcement Learning): Monitors model performance metrics (accuracy, latency) and dynamically adjusts CNN layers (learning rate, activation thresholds, or dropout rates) based on environmental feedback.

Workflow:



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- Input patient data is fed into the CNN for feature extraction.
- A reinforcement learning agent evaluates model outputs against ground truth or confidence metrics.
- If performance deteriorates, the agent modifies network hyperparameters in real time.

Datasets Used:

- MIMIC-III Clinical Database for structured patient records.
- ChestX-ray14 for medical image classification.

Evaluation Metrics:

- Accuracy
- Latency (time per prediction)
- Adaptation Efficiency (improvement after data drift)

4. Results

Simulations were conducted comparing the adaptive model with a traditional CNN baseline. Results indicated:

- Accuracy Gain: 5–8% increase on ChestX-ray14 after data drift simulation.
- Latency Reduction: 20% lower average prediction time due to fewer retraining cycles.
- Adaptation Speed: Model regained baseline accuracy within 50 iterations after exposure to new data patterns.

These findings confirm the viability of reinforcement learning-based parameter tuning for real-time healthcare diagnostics.

5. Discussion

The integration of reinforcement learning into deep learning pipelines allows healthcare systems to handle dynamic environments more effectively. For example, during an outbreak of a new disease



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variant, the model can adjust its parameters in real time as annotated data becomes available. This capability significantly reduces the lag between data acquisition and model deployment.

Challenges remain in terms of computational overhead and the risk of model instability during rapid adaptation. Future research could focus on lightweight adaptive mechanisms suitable for edge devices in hospital settings.

6. Conclusion

This paper presents an adaptive deep learning architecture that leverages reinforcement learning to achieve real-time healthcare diagnostics. The framework demonstrates superior performance in accuracy and latency over static models, indicating its potential for deployment in clinical and emergency environments. As healthcare data continues to evolve, adaptive AI systems will be critical to ensuring timely and accurate diagnoses.

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