



Multi-Level Fusion Optimization in Cyber-Physical Systems Using Computer Vision-Based Fault Detection

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Abstract

The healthcare sector's use of cyber-physical systems to provide high-quality patient treatment highlights the need for sophisticated security solutions due to the wide range of attack surfaces from medical and mobile devices, as well as body sensor nodes. Cyber-physical systems have various processing technologies to choose from, but these technical methods are as varied. Existing technologies are not well-suited for managing complex information about problem identification and diagnosis, which is distinct from technology. To address this issue, intelligent techniques for fusion processing, such as multi-sensor fusion system architectures and fusion optimization, can be used to improve fusion score and decision-making. Additionally, the use of deep learning models and multimedia data fusion applications can help to combine multiple models for intelligent systems and enhance machine learning for data fusion in E-Systems and cloud environments. Fuzzy approaches and optimization algorithms for data fusion can also be applied to robotics and other applications. In this paper, a computer vision technology-based fault detection (CVT-FD) framework has been suggested for securely sharing healthcare data. When utilizing a trusted device like a mobile phone, end-users can rest assured that their data is secure. Cyber-attack behavior can be predicted using an artificial neural network (ANN), and the analysis of this data can assist healthcare professionals in making decisions. The experimental findings show that the model outperforms with current detection accuracy (98.3%), energy consumption (97.2%), attack prediction (96.6%), efficiency (97.9%), and delay ratios (35.6%) over existing approaches.

Keywords: Cyber-Physical Systems; Healthcare; Multi-Level Fusion Optimization; Computer Vision Technology; Artificial Neural Network.

1. Introduction

Healthcare cyber-physical systems (HCPS) integrate a network of medical equipment in a way that's essential to patient care [1]. These systems are being implemented in hospitals one by one to provide a consistently high level of healthcare [2]. An integrated CPS in the contemporary healthcare sector includes IoT, cloud storage, and interconnected devices [3]. Most deadly diseases, such as cancer, can be detected early and treated accordingly [4]. It's possible to identify early symptoms of infection using computer vision because of its excellent pattern recognition [5]. In the long run, this could help save countless lives by allowing for prompt treatment [6]. Computer vision in healthcare can drastically reduce physicians' time to analyze patient data and images [7]. It frees them up and allows them to spend more time with patients, giving them tailored advice [8]. It can let medical practitioners see more patients by improving the quality of doctor-patient interactions. The use of computer vision in healthcare helps healthcare providers provide high-quality treatment in a timely and cost-effective manner [9]. The position's context knowledge is broadened despite its focus on

mobile devices. It's simple to build and deploy a mobile healthcare network using mobile terminal technologies since people have been intellectualized [10].

Due to problem detection and diagnostic technologies, a new generation of networked systems and physical and computer vision techniques have been launched [11]. Increased accessibility to physical processes and a constant connection with local information management can make things more intelligent and effective [12]. Mobile Health Systems use cyber-capable medical devices to get in touch with patients and collect and monitor diagnostic data [13]. A medical device is anything intended to be used in a medical setting [14]. Patients gain from diagnosis and treatment, while healthcare systems benefit from improved management and higher quality of life for patients. When it comes to using a medical gadget, there are considerable risks involved [15]. Before regulatory authorities permit medical equipment marketing, the device's safety and dependability can be shown with reasonable confidence [16]. Several new technologies can be progressively incorporated into production lines' cyber-physical systems, resulting in a varied network [17]. Identifying direct pattern recognition of sensor data that signal failure and evaluate the discrepancy between sensor readings and expected values is a control systems sub-field when a problem arises and the kind of fault or where it occurred [18]. A defect is often identified when a difference or residual reaches a certain threshold [19]. The fault type and computer location are then classified based on the insulation of the problem [20].

In this paper, the use of computer vision technology in healthcare diagnostics is discussed, and its potential for providing high levels of accuracy in identifying disease symptoms is highlighted. To achieve this accuracy, intelligent techniques for fusion processing are employed, which involve combining multiple models for intelligent systems. Multi-level/hybrid-level fusion, multi-classifier/decision level fusion, and multi-sensor fusion system architectures are some of the fusion system design approaches used. The integration of deep learning models with fusion techniques is also explored to improve fusion scores. Optimization algorithms and fuzzy approaches are employed to enhance the performance of data fusion applications, which are used in various fields, including multimedia data fusion, e-systems data fusion, and data fusion in cloud environments. Finally, intelligent systems for information fusion and fusion in robotics and decision-making are also discussed.

The main contributions of this paper are:

- Create a computer vision technology-based fault detection (CVT-FD) framework for safeguarding healthcare data in a cyber-physical system.
- To guarantee that high-quality therapy can continue effectively while avoiding pauses that might damage therapeutic outcomes, the company uses the mathematical model of the artificial neural network.
- The simulation outcome improves detection accuracy ratio, energy consumption ratio, attack prediction ratio, efficiency ratio, and delay ratio.

The rest of the CVT-FD framework research can be organized in the same way. Section 2 describes the healthcare literature research. Briefly describe in section 3 the new ideas that have been presented about and used in this paper. Section 4 details the findings and conclusions based on the data. Lastly, in section 5, the CVT-FD framework comes to a close with a thorough analysis of the findings.

2. Related Work

In a thorough examination of literature review localization procedures for peer-reviewed research, the defect diagnosis in healthcare evaluation had been shown. Here five related work have been listed below,

2.1 Intrusion Detection System (IDS)

Over the previous decade, the explosive expansion of network-related services has resulted in an enormous volume of confidential data on the internet. However, networks were vulnerable to incursions in which unauthorized users sought to obtain critical data and potentially damage the system. A competent network intrusion detection system (IDS) must be built in [21] to avoid such assaults. The model was tested on the dataset, which was the largest of its kind accessible online.

2.2 Artificial Intelligence Approach (AIA)

Coastal ecosystems were affected by a worldwide environmental problem caused by humans. It was anticipated that as urbanization and transportation grew, so would the negative effect on coastal inhabitants and non-residents. For autonomous coastal law enforcement and active coastal area security, the suggested human activity monitoring system may be helpful[31]. The artificial intelligence approach (AIA) is used in [22] to automate data collecting, processing, and decision-making, leading to real-time findings and large-scale coastal management and governance potential.

2.3 Novel Dimensionality Reduction Technique (NDRT)

Transforming a huge volume of data gathered from numerous sensors into meaningful low-dimension data was critical in CPS for effective monitoring and safe and stable system operation. In [23], this study offered a unique novel dimensionality reduction technique (NDRT), each of which employs competing neural networks and newly specified constraints of class separable and affinity correlation[27][28]. Over numerous datasets gathered from a cyber-physical system, the suggested new approaches were compared to state-of-the-art dimensionality reduction techniques.

2.4 Blockchain-based Data Transmission (BT-DT)

Integrating physical processes with processing and data transmission was referred to as a CPS. Because of the moral and constitutional implications of the patient's medical data, cybersecurity was a critical and complex problem in healthcare. As a result, designing a CPS model for healthcare applications takes extra consideration to ensure data security. In [24], the author proposed a healthcare-specific classification model for CPS based on blockchain-based data transmission (BT-DT). Data transmission to a cloud server using a residual network-based classification algorithm to identify the presence of the disease was further protected using blockchain technology.

2.5 Virtual Care for Cyber-Physical System (VC-CPS)

As of [25], VC-CPS was grown to include phone conversations, audio, and video discussions, as well as Face-to-Face Services. The use of cyber-physical technologies in virtual care has the potential to change how people interact and collaborate. This ecosystem provided greater access to care, which kept patients in low-risk settings longer and contributed to better outcomes while lowering premiums.

CVT-FD framework has been used to overcome the existing model issues, IDS, AIA, NDRT, BT-DT, and VC-CPS. In this study, CVT-FD has been suggested to increase detection accuracy, energy consumption, attack prediction, efficiency, and delay.

3. Proposed method: computer vision technology-based fault detection

To make a medical diagnosis, doctors should determine what illness or condition is causing a patient's signs and symptoms. When used in the medical context, the term "diagnostic" is most often used. Evaluating the patient's medical history and physical can usually provide the information needed for a diagnosis. Diagnostic treatments, such as medical testing, are often performed as part of the process. In certain circles, a postmortem diagnosis is seen as a medical diagnostic in and of itself.

The medical sensor field is undergoing a great deal of exploration. As an emerging technology, the CPS has garnered much interest in recent years. It integrates computation and communication with the real environment. It's called quantum computing. Using a CPS in the healthcare system, patients, physicians, and clinical assistants would save time and money by minimizing the administrative burden of helping all patients at once during the inconvenient period. These improvements promise to provide CPS the capacity to monitor patient status remotely and take action regardless of the patient.

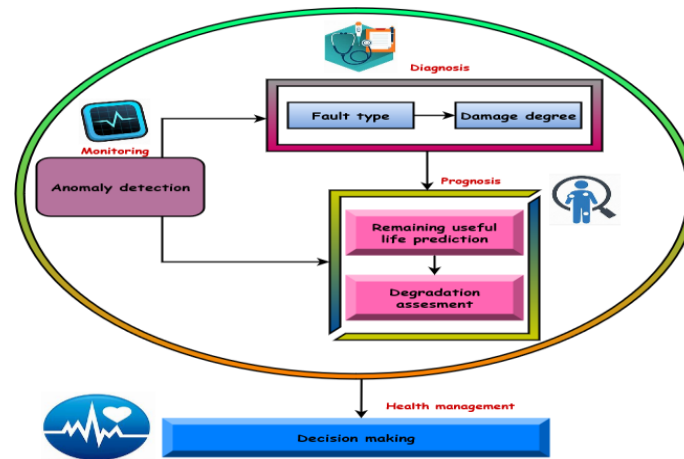


Figure 1: Health management system

Fig 1 shows the health management system. While traditional maintenance methods (corrective and periodic maintenance) rely on manual labor, spares, and maintenance costs, prognostic and health management (PHM) utilizes advanced sensors and various intelligent approaches to monitor the mechanical system's status, resulting in timely and optimal maintenance. Diagnostics and prognosis are the major components of prognostic and health management (PHM). If defect identification is the goal of the monitoring, anomaly detection is an important tool for determining the underlying health state. To find out whether the system is working normally, monitors look for certain indicators of health. Diagnosis is the process of determining the kind of problem and the severity of it. Prognosis assesses the degree of degrading performance and forecasts the remaining useful life (RUL) using suitable models. Integrated health management incorporates the results of monitoring and diagnosis, and prognosis to arrive at the best maintenance and logistical choices.

PHM can, on the whole, enhance operational safety, system reliability, and equipment maintenance while lowering equipment costs throughout the equipment's whole life cycle. Instead of relying on sensors and suitable algorithms, traditional maintenance relies on skilled technicians who artificially diagnose equipment, identify the kind of problem, and locate it. In this approach, maintenance requires more human resources and is more dependent on those doing it. Anomaly detection, as used in the following discussion, relates exclusively to artificial neural network anomaly detection. Due to data availability from a stable state, supervised learning techniques fail miserably at monitoring tasks. Only health status data can be used for semi-supervised anomaly detection.

As sensor technology advances, more sensors are being placed on mechanical equipment to gather data from many sources, such as vibration, temperature, and pictures, laying the groundwork for the adoption of PHM. Anomaly detection aims to find potential problems in the data. An open-set task means that the failure could occur on any part of the machinery, regardless of how it manifests itself externally. Mechanical equipment, on the other hand, operates continuously in a highly complex environment. As a result, the measured signal often includes high background noise levels, masking the problem characteristics.

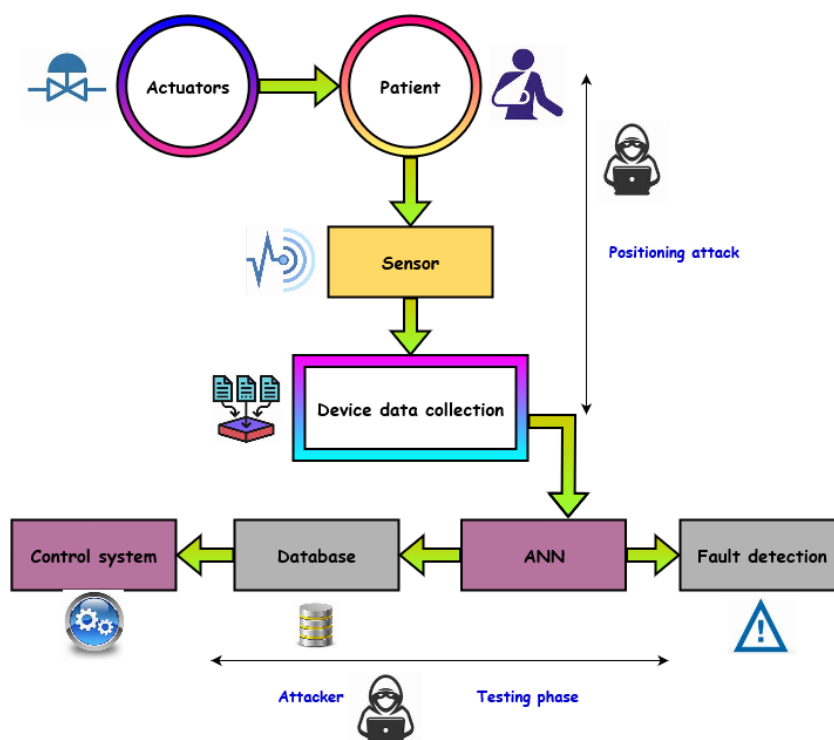


Figure 2: Computer vision technology-based fault detection

Fig 2 shows the computer vision technology-based fault detection. A new healthcare system could better handle and monitor patients because of sophisticated medical gadgets that gather data from their bodies. The smart health system considers various medical and non-medical aspects, including a patient's physical posture and condition. Patients' general health can be tracked in real-time with this technology. An analog signal is used by intelligent medical devices to utilize vital signs, converted to a digital signal, and sent through wireless technology to a laptop, smartphone, or wristwatch, respectively. Using a personal digital assistant is similar to using an interface for a database since it allows to utilize and transmit data easily. After the database receives the data, it sends it to a data processing model, using ANN to pick out and extract relevant characteristics. Patients' conditions, routine patient behavior, and risks are detected using the computer vision run on the central data processing unit (CDPU). Higher medication dosage is then pushed, and evaluated data is sent to the authorized entity. The next step is to take automated measures to treat better patients (for example, changing drugs).

The doctor provides a revised health status management plan to the patient. Various vital signs are monitored using intelligent health care technology such as EEG, ECG, pulse oximeter, etc., that is linked to the patient's body. When it comes to smart medical equipment, adversaries can detect whether computers are partly scattered with data. The patient's condition or regular pattern of activity can be altered based on a change in a data value within a particular threshold. To launch an attack, an adversary would need to be aware of the machine learning performance labels. ANN can be utilized to identify diseases and user activities. The opponent should be aware of the underlying machine learning model used to determine the patient's condition. A healthcare system can be compared to a data processing pipeline that analyses vital signs to detect illness and treat patients.

Patients' many sophisticated medical devices provide data to the pre-processing data model, which then uses that data to create a visual representation of the patient's vital signs and state of health. Samples are taken, and the data is saved in a range according to the relevant sample frequencies in a pre-processing data model. The collected data is used to train a machine learning system for real-time illness monitoring and detection. Different illnesses and benign states are labeled on the training data to better comprehend the patterns under different conditions. An artificial neural network (ANN) can evaluate patient physiological data to detect different illnesses or scenarios during the testing phase. This is where the attack technique is described in the data processing pipeline.

In computing, a cyber-physical system (CPS) refers to a combination of physical and network systems. It has the potential to improve social intelligence. Defending a medical device means protecting the firmware from being tampered with, protecting the device's stored data from being accessed, and ensuring that communications are secure. Strategic management automation systems include fault detection and diagnostics as critical components. The breakdown of a piece of equipment, or even the involvement of particular hardware, is not necessary for a defect or issue to exist. For example, non-optimal operation or off-spec products could be characterized as an issue.

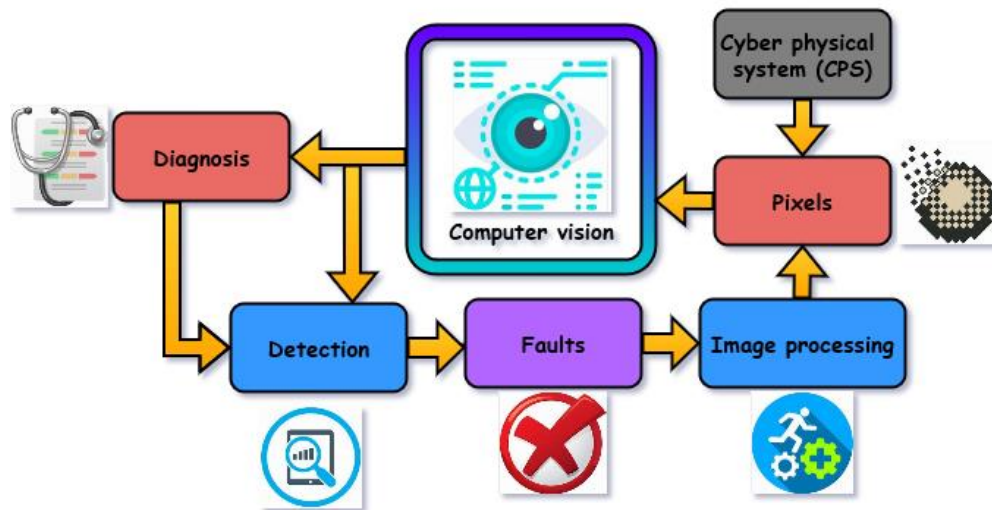


Figure 3: Diagnosis using computer vision

Fig 3 shows the diagnosis using computer vision. Computer vision channels connect the processing units, such as sensors, through each instrument's probabilistic and cyclic image processing architecture. A network of manufacturers is used to link the processing units to a locally structured sector. A firewall serves as a direct connection between two healthcare facilities that are connected in real-time. A CPS is a network of interconnected computer entities that provides Internet-based data access and processing services while closely linked to the physical world and its continuous processes. When it comes to the next generation of digital systems, CPS researchers look at how these two domains interact.

A CPS comprises the computer, communication, control, and physical components that are all tightly interwoven. Because the CPS systems are used at various rates and divisions, they may need access points for information exchange. Lack of coordination between fault loops and detection can cause queuing to occur. Each unit includes pre-allocated and defined detecting units. Confidential detection networks with set cycle durations that exist in computer vision can defect diagnosis systems. Diagnostic and detection processes derived from computer vision pictures migrate into information devices, necessitating smarter detectors that may produce interference from time to time. The requirements are different from those described in the next section, which deal with security systems like encryption and authentication.

Assuming that excess detection is not lost, the system's dependability defines n as the chance that any one of the information neglecting diagnosis and other potential sources of error, as well as assuming that extra detection is detailed in equation (1),

$$\psi_m = 1 + \prod_{n=0}^{\infty} 1 - \frac{N_m^1}{n} Qs(N_m = n) \quad (1)$$

As shown in equation (1), the latency of the database ψ_m is similar in terms of loop length $\frac{N_m^1}{n}$ without taking propagation delays Qs into account. This system has a significant separation of capital between $N_m = n$ applications. The wide range of design complicates integrated and cyber-physical systems development practices used by different medical areas.

A closed-loop security network or a serial communications system can use intermittent transmissions to substitute response broadcasts without allowing the control device to a fault. Control flow is presumed to be allocated and kept according to the notation provided in the previous system, indicating that it can be discovered in the intermittent computer vision's private image information. This method risks allowing erroneous information ψ_r to overwrite control sensitive information in equation (2),

$$\psi_r = \prod_{n=0}^{\infty} \left(1 - \frac{1}{N_r}\right)^n Qs(N = n) \tag{2}$$

As shown in equation (2), incorporating denoise as a training step ensures that the extracted feature $\frac{1}{N_r}$ has better illustration abilities, Qs denotes propagation delays. This final set of components for the assault detection system $N = n$ can be derived from all the estimated characteristics, such as univariable function, remaining physical model, and acquired feature.

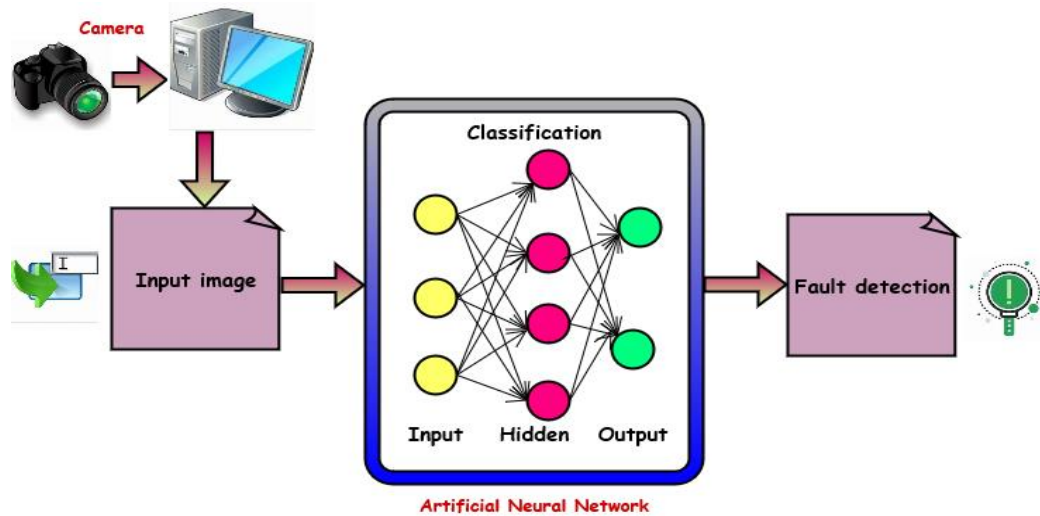


Figure 4: Structure of artificial neural network

Fig 4 shows the structure of the artificial neural network. There are many uses for computer vision in health care, including clinical diagnosis, cancer prediction, voice recognition, and duration of stay. Image analysis and interpretation are common, such as in the detection of myocardial infarction. ANNs are extensively utilized in medicine, particularly in cardiology, for a variety of medical applications. Medical image processing and radiography have all used artificial neural networks extensively[29][30]. Many writers in medical and clinical research have utilized ANNs for modeling.

CVT focuses on creating features that better capture the asset and are successful in acute assaults from regular operations for healthcare cyber-physical system attack detection. A proposed assault detection framework uses three different feature types: physics, learning, and statistical-based to size physical systems in both time and space. ANN generates geographical characteristics based on numerous observations (multivariate) and unique data (univariate). These characteristics are implemented across a sliding window to capture the dynamics or temporal holdings of the whole system. This model's suggested CVT-FD architecture has decreased network latency.

A physical system model can identify expected future measurements \hat{y}_{k+1} by considering the sensor and the instruction receives. The ANN model's input layer has been used to make predictions is given in equation (3),

$$\hat{y}_{k+1} = \prod_{i=k-N}^k \alpha_i y_i + \alpha_0 \tag{3}$$

As shown in equation (3), The factors to be learned on N can be calculated to prevent the model from overfit, as deduced from equation (3), where α_i represents the coefficient acquired through system credentials and y_i indicates the final N sensor. The coefficients α_0 can be found by attacking an optimization problem that lowers residues. Consider the datasets with k classes and a hidden

neural network of n neurons to see how this operates. The output of the network for the input $g(x)$ is calculated in equation (4),

$$g(x) = \prod_{k=1}^n \alpha_i f_i(x) = f(x)\beta \tag{4}$$

As shown in equation (4), Where f_i means the output of the i th hidden neuron concerning the input x ; the nonlinear piecewise continuous function $f(x)\beta$ supporting the ANN estimation capability concept. α_i denotes the output weight vector among j th hidden neurons to the output node, which denotes a random feature plotting of the data. Based on these expressions, the attack detection accuracy has been enhanced. A double-optimization target function $\log(\delta \setminus N)$ is shown in equation (5),

$$\log(\delta \setminus N) = \prod_{z f i} \log(\prod_{z f i} \alpha_i, N_z(m \setminus \rho, \epsilon)) \tag{5}$$

As shown in equation (5), N_z is the training samples and the constant $\log(\delta \setminus N)$ control the tradeoffs among the training error m and output weight (ρ, ϵ) . α_i is unique practical characteristics, z denotes ensuring that communications.

When M is a single class, the only linear computation $S(\delta \setminus N)$ that can transfer from ∞ to 0 is a hyperplane estimate. m is the distance between the test samples and the hyperplane i .

$$S(\delta \setminus N) = \sum_{z f 0}^{\infty} M(N_z \setminus \delta_i) = \sum_{z f 0}^{\infty} (\prod_{z f i} \alpha_i, N_z(m \setminus \rho, \epsilon)) \tag{6}$$

As shown in equation (6), N_z the training samples, δ_i denotes diagnostic fault, ρ, ϵ indicates output weight. Unauthorized access and corruption are prevented by using data security throughout the data lifecycle: tokenization and secure data encryption on all platforms and applications, including the web and mobile devices.

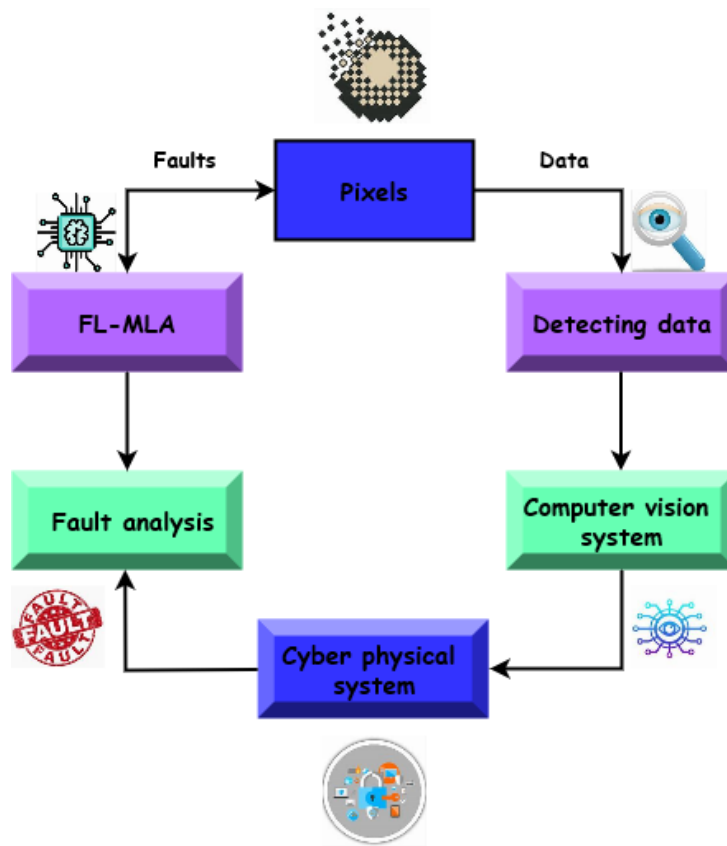


Figure 5: Cyber-physical system in the detection unit

Fig 5 shows the cyber-physical system in the detection unit. Computer vision networks, whether conventional or real-time, are usually used by detection units. Every link in the normal CPS security connections has a backlog of blocks. In practical data, it keeps track of both stringent real-time and

routine activity. While conventional data has concentrated and does not vary in new CPS real-time technology in the methods above, the algorithms' unique practical characteristics may be directly used. The defect detection unit has assigned a specific order by giving each system component all its queue. A tight priority scheduler is used between the lines to deal with latency requirements in various situations.

The CVT-FD architecture is often provided by priority schedulers, which manage image computer vision. Frameworks for research include queuing theory, network calculus, and deterministic network calculus. Despite these tests, particularly the distribution, which aids in evaluating end-to-end network guarantees, the formulas for memory-free flow data and timely delivery are often intractable, limiting the number of scenarios accessible. The range of potential outcomes is increased by focusing on latency distribution limitations rather than on exact performance restrictions. The diagnostic fault is one of today's most serious patient safety issues, and it results in the greatest deaths and injuries. When a diagnosis is made incorrectly or late, a diagnostic error has occurred. The suggested methods improve detection accuracy ratio, energy consumption ratio, attack prediction ratio, efficiency ratio, and delay ratio.

4. Simulation Outcome:

The suggested CVT-FD framework has been verified by simulation in this section. Several gadgets for detecting gaunt patients have been set up and grown in number. Using performance measures such as detection accuracy ratio, energy consumption ratio, attack prediction ratio, efficiency ratio, and delay ratio, the proposed CVT-FD framework has been tested with experimental results.

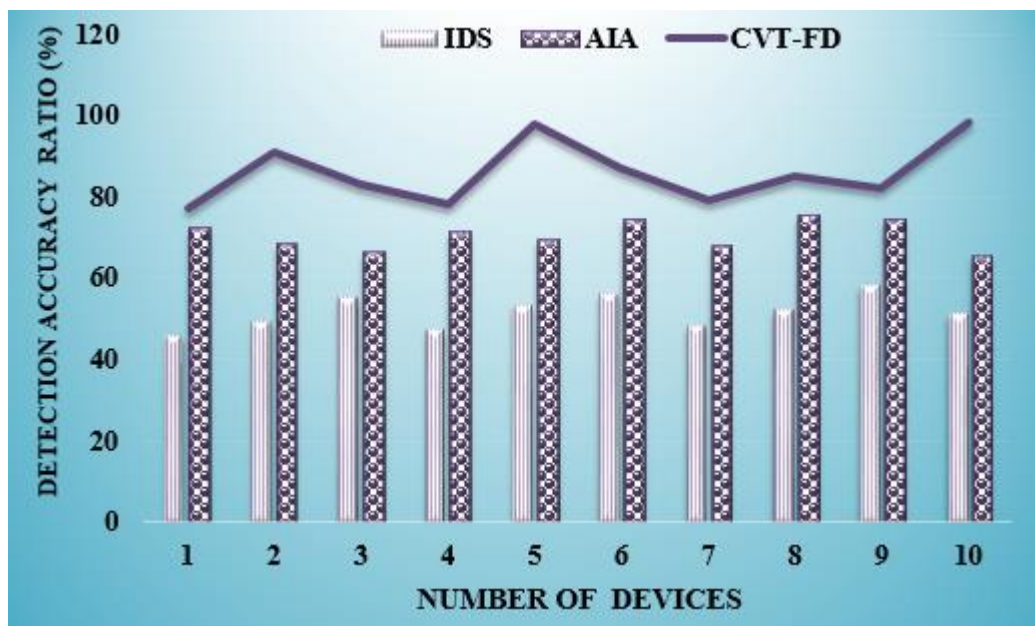


Figure 6: Detection accuracy ratio

Fig 6 shows the detection accuracy ratio in healthcare. Develop an accurate threat detection system, inexpensive to operate and should not generate many false alarms. It should be scalable and flexible since it can be used in the Healthcare CPS environment. CVT-FD looks at a machine learning approach for healthcare cyber-physical systems to offer effective attack detection (HCPS). The accuracy of the forecast is dependent on a pre-training phase. As a result of a collection of training data, the model learns how to interpret the output.

Compared to current IDS and AIA techniques, the CVT-FD method has a higher detection percentage (98.3%). The findings of this study may lead to a better understanding of how the physical system's dynamic, nonlinear connections are formed when components are collected using the monitored ANN detection model, and high accuracy is initially detected when malicious or attack actions occur.

Table 1: Energy consumption ratio

Number of Devices	IDS	AIA	CVT-FD
10	61	80	90
20	75	89	92
30	65	83	90.7
40	73	79	88
50	64	73	82
60	70	83	87
70	68	78	89
80	60	86	90
90	71	86	91
100	69	84	97.2

Table 1 shows the energy consumption ratio. Existing fault detection CPS methods minimize energy usage in distributive data pixels. To reduce improper access, CVT-FD is recommended and implemented using simulations. Based on the simulation results, it has been concluded that using the recommended technique can minimize energy access. Because of the increase in applications, energy availability has increased.

The proposed method enhances (97.2%) in energy consumption ratio when compared to existing methods. The proposed solution has a lower consumption ratio than the existing approaches to reduce undesired access to an expanding number of applications.

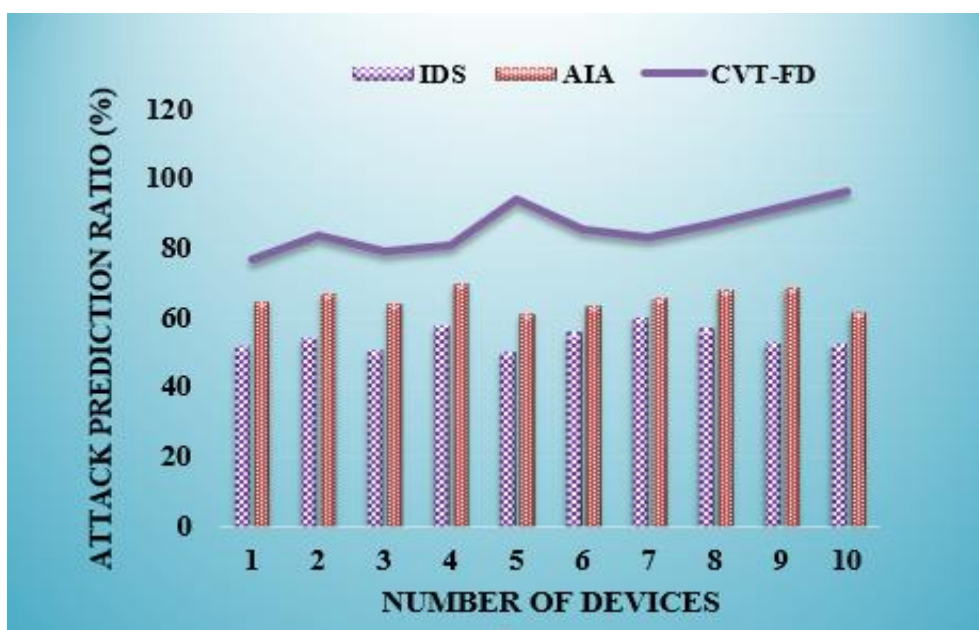


Figure 7: Attack prediction ratio

This data analysis that the gadgets work well and that the computer is free of flaws since it uses ANNs to classify illnesses and monitor patients in real-time. The attack prediction ratio can be

shown in Figure 7, which illustrates. Adversaries are trying to change the data distribution in the multi-layer ANN classifier to change the prediction condition. The assaults on medical images are aimed at managing the disease that has been predicted in certain cases. Universal adversarial issues can be applied to a medical picture to modify the predicted labels with high confidence. The suggested approach for identifying dangerous parts in a medical time chain is by employing negative assaults on deep prediction models. If a fresh assault on the adversary is made, the healthcare system can gain stunning benefits, and patients' states can be modified to provide wrong treatment.

The computer vision technology-based fault detection (CVT-FD) framework improves the attack prediction ratio as (96.6%) compared to the existing methods. This work provides the positioning attack and evasive attack to carry out the ANN model adversarial assault.

Table 2: Efficiency ratio

Number of Devices	IDS	AIA	CVT-FD
10	45	59	76
20	55	78	85
30	66	72	87
40	58	65	88
50	69	67.7	74
60	56	83	89
70	61	78	82
80	60	86	93.4
90	56	89.4	88
100	55	76	97.9

Table 2 shows the efficiency ratio. Using artificial neural networks (ANNs) has made things much more efficient and effective when detecting and evaluating clinical indications. Patient-centric treatment and support made possible by ANN feature extraction from datasets can reduce medical expenses while enhancing patient-doctor interactions. The approach is reliable and capable of protecting confidentiality and integrity. The research includes the proposed design, concept, security definition, formal definition, and communication protocols. When compared to existing methods in efficiency ratio, the proposed method enhances with 97.9%. The evaluation demonstrates that the efficient and secure technique is very applicable in Healthcare cyber-physical systems.

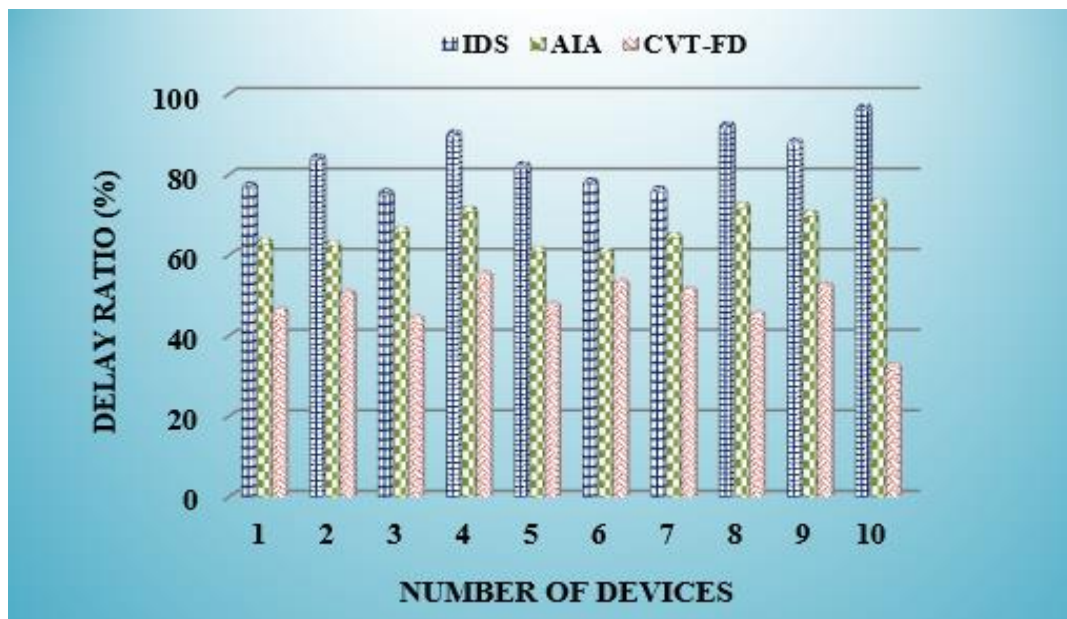


Figure 8: Delay ratio

Fig 8 shows the delay ratio. Communication breakdowns are particularly common during shift changes when patient care is transferred to another caretaker. When the switch is made with erroneous, imprecise, or confusing information, medical errors rise. Disconnected mobile phone facilities within a hospital, billing for the improper provider level, outstanding messages, and inaccurate or not disclosed changes in call scheduling can all confuse one-way communication transmission. The regularity and timeliness of medical care are jeopardized when communication slows down. This can lead to health issues, longer wait times, slower discharge times, poor judgment, and greater anxiety in the long run. A reliable communication system is needed to offer high-quality patient care. A 35.6% reduction is suggested in comparison to current techniques. This paper evaluates the detection accuracy ratio, energy consumption ratio, attack prediction ratio, efficiency ratio, and delay ratio.

5. Conclusion

The paper proposes a framework for safeguarding patient data privacy and security in health networks. The research discusses the cyber-physical system security risks, including possible attacks and research issues. The paper compares the static and adaptive detection and prevention techniques to address the security issues. Additionally, the research highlights the revolutionary shift in the use of CPS due to the increasing prevalence of intelligent techniques with increased capability. The paper discusses the application of fusion techniques in intelligent systems for information fusion, such as multi-sensor fusion system architectures, fusion system design, and fusion optimization. It also covers fusion with deep learning models, combining multiple models for intelligent systems, and fusion in decision-making. Finally, the research addresses data fusion in cloud environments, machine learning for data fusion, fuzzy approaches for data fusion applications, and optimization algorithms for data fusion. Achieving current fault detection challenges can need a combination of low latency, dependability, and productivity. An electronic and dynamic network CVT-FD system has been suggested in this area to meet efficiency requirements using computer vision images utilizing network CVT-FD networks. Conclusions include unsolved research problems for developing smart CPS security measures and ANN-based security techniques against various identified threats across many CPS levels. The CVT-FD approach ensures CPS security of health data while reducing the local impact from effectiveness analysis and numerical results. The model security benefits can be used to satisfy the criteria for outstanding results in the future. The simulation outcome shows that the model outperforms current detection accuracy (98.3%), energy consumption (97.2%), attack prediction (96.6%), efficiency (97.9%), and delay ratios (35.6%).

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