
Recent Advances in Understanding and Treating Alzheimer's Disease

Mohd Altaf Dar^{1*}, Afshana Qadir², Zulfkar Qadrie³, Humaira Ashraf⁴

^{1*}Department of Pharmacology, CT Institute of Pharmaceutical Sciences, PTU, Jalandhar Punjab, India.

²Nursing Tutor, Government College of Nursing Baramulla, India.

³Department of Pharmacology, Government Medical College, Baramulla, India.

⁴Department of Animal Nutrition, SKUAST-K, Srinagar, India.

Corresponding Email: ^{1*}daraltaf490@gmail.com

Received: 15 March 2024

Accepted: 31 May 2024

Published: 17 May 2024

Abstract: *Alzheimer's disease (AD) is a significant global health challenge characterized by progressive cognitive decline and neurodegeneration. Refinements in the amyloid and tau hypotheses have deepened insights into the molecular mechanisms underlying AD, while research on neuroinflammation and genetic factors, including APOE ε4, has expanded our understanding of the disease's complexity. Diagnostic advancements include cerebrospinal fluid and blood-based biomarkers, advanced imaging techniques like PET and MRI, and innovative neuropsychological assessments, enabling earlier and more accurate detection. Therapeutically, notable progress has been made with disease-modifying treatments targeting amyloid and tau proteins, including the recent approval of aducanumab. Symptomatic treatments continue to evolve, providing better management of cognitive and behavioral symptoms. Additionally, lifestyle interventions, such as diet, exercise, and cognitive training, show promise in slowing disease progression. Emerging research in gene therapy and stem cell applications offers potential for future breakthroughs in AD treatment. Despite these advances, challenges persist, including the heterogeneity of AD, difficulties in clinical trial design and patient recruitment, and ethical considerations related to early diagnosis and treatment access. This review underscores the necessity of ongoing research and interdisciplinary collaboration to develop more effective management strategies and ultimately achieve a cure for Alzheimer's disease. Continued efforts in these areas are crucial for transforming the landscape of AD diagnosis and treatment, offering hope for patients and their families.*

Keywords: *Alzheimer's Disease, Pathophysiology, Biomarkers, Therapeutics.*

1. INTRODUCTION

Alzheimer's disease (AD) is a gradually worsening neurological ailment that poses a substantial public health problem on a worldwide scale. The disease, initially documented by Dr. Alois Alzheimer in 1906, is distinguished by the progressive loss of memory, deterioration in cognitive abilities, and alterations in behaviour, ultimately resulting in total reliance on others and death. Alzheimer's disease (AD) is the predominant aetiology of dementia, responsible for 60-80% of all instances. Given the increasing number of elderly individuals worldwide, it is anticipated that the incidence of Alzheimer's disease (AD) would increase [1-3]. Therefore, it is crucial to enhance our comprehension and management of this debilitating condition. The precise aetiology of Alzheimer's disease remains unknown, however, it is commonly acknowledged to be a multifaceted interaction between genetic, environmental, and lifestyle variables. The defining pathological characteristics of Alzheimer's disease (AD) consist of the buildup of amyloid-beta ($A\beta$) plaques and the presence of neurofibrillary tangles made up of hyperphosphorylated tau protein in the brain. It is hypothesised that these irregularities interfere with the transmission of signals between cells and trigger immunological reactions, resulting in persistent inflammation, damage to neurones, and ultimately, the death of cells [3-6]. The amyloid hypothesis has been a prominent theory in Alzheimer's disease (AD) research for many years. The theory suggests that the excessive synthesis and subsequent accumulation of $A\beta$ peptides into plaques is a crucial first step in the development of Alzheimer's disease (AD). Although there is significant evidence supporting this notion, the precise pathways via which amyloid-beta contributes to neurodegeneration remain incompletely comprehended, and treatments targeting amyloid have so far achieved only limited success in clinical trials. As a result, researchers have begun investigating alternative causes and treatment targets [6-8].

The tau hypothesis has garnered significant attention as a potential alternative or supplementary explanation for the aetiology of Alzheimer's disease (AD). According to this idea, the excessive phosphorylation of tau protein results in the creation of neurofibrillary tangles, which interfere with the regular functioning of neurones and contribute to cell death. Research has demonstrated that tau pathology exhibits a stronger association with cognitive decline compared to amyloid-beta, indicating that it may have a more direct impact on the progression of the disease.

Recent studies have also emphasised the significance of neuroinflammation in Alzheimer's disease. The activation of microglia, which are the immune cells that dwell in the brain, is believed to have a dual function in Alzheimer's disease (AD). Although microglia initially try to eliminate amyloid-beta plaques, prolonged activation can result in the secretion of pro-inflammatory cytokines and additional harm to neurons [8-9]. This has created new opportunities for prospective therapies that focus on the inflammatory pathways in AD. Genetic factors have a substantial influence on the likelihood of getting Alzheimer's disease. The most prominent genetic risk factor is the apolipoprotein E (APOE) $\epsilon 4$ allele, which is linked to a heightened risk of AD and an earlier age at which the disease manifests. Familial variants of Alzheimer's disease (AD) have been found to include genetic alterations, specifically in the amyloid precursor protein (APP) and presenilin (PSEN1 and PSEN2)

genes. Progress in genomic technologies continues to reveal more genetic risk factors and pathways implicated in the disease, providing fresh opportunities for treatments [10].

Diagnosing Alzheimer's disease has traditionally been difficult, typically depending on clinical evaluations and the elimination of other illnesses. Nevertheless, the advancement of biomarkers has completely transformed the diagnostic procedure. Cerebrospinal fluid (CSF) indicators, including reduced levels of A β 42 and elevated levels of tau and phosphorylated tau, have demonstrated potential in detecting Alzheimer's disease (AD) during its initial phases [11-13]. Blood-based biomarkers are increasingly being recognised as a less intrusive alternative, with the potential to enable extensive screening and earlier detection. Imaging technology have also enhanced our capacity to identify and track the progression of Alzheimer's disease. Positron emission tomography (PET) scans use tracers that specifically attach to amyloid and tau proteins enable the direct observation of these proteins within the brain while it is still functioning. Magnetic resonance imaging (MRI) is capable of identifying both structural and functional alterations in the brain, thereby offering valuable information regarding the advancement of diseases and the impact of potential therapies. In addition, the utilisation of digital tools and artificial intelligence is enhancing the accuracy of cognitive evaluations and assisting in the early identification of cognitive impairments through neuropsychological testing [13-15].

The therapy landscape for Alzheimer's disease is undergoing therapeutic advancements. Disease-modifying medicines seek to affect the fundamental pathophysiology of Alzheimer's disease (AD), with recent endeavours concentrating on diminishing levels of amyloid-beta and tau. In 2021, the U.S. Food and Drug Administration (FDA) granted fast approval to Aducanumab, an antibody that targets amyloid, which represents a major breakthrough in the treatment of Alzheimer's disease (AD). Additional intriguing strategies encompass anti-tau medicines, combination therapy that target various pathways, and symptomatic treatments that try to improve cognitive and behavioural symptoms [15-17]. Lifestyle adjustments, which are non-pharmacological therapies, have demonstrated promise in the management of Alzheimer's disease. Engaging in regular physical exercise, maintaining a good diet, participating in cognitive training, and actively engaging in social activities have been found to be linked to a decreased risk of Alzheimer's disease (AD) and a slower course of the disease in persons who are already affected. These therapies provide a comprehensive strategy to controlling the disease and enhancing the quality of life for patients and carers. Promising advancements in the field of research, such as gene therapy and the utilisation of stem cells, offer potential for the future treatment of Alzheimer's disease. Gene therapy seeks to rectify genetic abnormalities or introduce novel genes to counteract AD, whereas stem cell therapy concentrates on rejuvenating impaired neurones and reinstating brain functionality. Despite being in the initial phases, these methods demonstrate promising potential advancements in combating Alzheimer's disease [17-20].

2. RELATED WORKS

Recent research on Alzheimer's disease (AD) has made substantial progress in comprehending its aetiology, creating diagnostic instruments, and investigating therapy

strategies. An important area of research has been centred around the amyloid hypothesis, which suggests that the buildup of amyloid-beta ($A\beta$) plaques plays a fundamental role in the development of Alzheimer's disease (AD). This concept posits that $A\beta$ plaques interfere with brain transmission and initiate neuroinflammatory reactions. Although there has been much backing for this hypothesis, therapeutic experiments focusing on amyloid-beta have produced inconsistent outcomes. Previous trials of monoclonal antibodies targeting $A\beta$ plaques did not demonstrate any cognitive advantages. However, the recent approval of aducanumab has sparked renewed interest in medicines that target amyloid. The effectiveness of such treatments continues to be a topic of continuing discussion [20-22]. Aside from the amyloid theory, the tau hypothesis has garnered significant interest. This idea highlights the significance of anomalies in tau protein, specifically excessive phosphorylation that results in the creation of neurofibrillary tangles. These tangles are strongly linked to the loss of neurones and the deterioration in cognitive function in Alzheimer's disease (AD). Recent advancements in tau imaging techniques, like as positron emission tomography (PET) tracers, have made it possible to visualise tau disease in living organisms, leading to improved accuracy in diagnosis. Therapeutic interventions aimed at tau involve the use of small compounds and immunotherapies that are specifically targeted to decrease the clumping of tau proteins or enhance their removal. Several of these methods are now being studied in clinical trials [22-25].

Neuroinflammation plays a crucial part in AD research. Microglia, the immune cells that live in the brain, are believed to have a crucial role in the development of Alzheimer's disease. Although microglia initially try to eliminate $A\beta$ plaques, their persistent activation can result in the secretion of pro-inflammatory cytokines and further harm to neurones. This comprehension has prompted the investigation of anti-inflammatory medications as potential remedies for AD.

Genetic elements play a vital role in comprehending the risk and advancement of AD. The APOE $\epsilon 4$ allele is a widely recognised genetic risk factor for AD, affecting both the probability of having the disease and the age at which it begins. Familial variants of Alzheimer's disease (AD) are linked to certain genetic mutations, mainly in the amyloid precursor protein (APP) and presenilin genes [25-27]. Advancements in genomic technologies are currently discovering more genetic risk factors and pathways associated with the disease, providing new opportunities for intervention. Recent research has placed significant emphasis on improving diagnostic capabilities, particularly through the advancement of biomarkers. Cerebrospinal fluid (CSF) indicators, including decreased $A\beta 42$ levels and elevated tau and phosphorylated tau levels, have demonstrated potential in detecting Alzheimer's disease (AD) during its initial phases. Blood-based biomarkers are becoming increasingly popular as a less intrusive alternative, perhaps enabling more extensive screening and earlier detection. Moreover, advanced imaging techniques, such as Positron Emission Tomography (PET) and Magnetic Resonance Imaging (MRI), have enhanced our capacity to observe amyloid and tau pathology in the brain while it is still functioning, offering crucial knowledge about the advancement of diseases and the impact of treatments. Therapeutic methods have made major advancements as well. Treatments that try to influence the disease process of Alzheimer's disease (AD) focus on changing the

underlying pathology by specifically targeting amyloid-beta and tau proteins [27-30]. There is ongoing progress in the development of treatments that target the symptoms of a condition, with the introduction of novel approaches to better manage cognitive and behavioural symptoms. Non-pharmacological therapies, such as lifestyle alterations encompassing dietary changes, physical activity, and cognitive training, are being investigated for their capacity to decelerate the advancement of the condition. Promising advancements in AD treatment can be expected from emerging research areas such as gene therapy and stem cell applications. Gene therapy seeks to rectify genetic abnormalities or introduce novel genes to target the fundamental reasons of the ailment, whereas stem cell therapy concentrates on rejuvenating impaired neurones and reinstating brain functionality. While these techniques are now in the first phases of study, they have promising potential for progress in combating Alzheimer's disease [31].

3. METHODOLOGY

In this review, a detailed examination of the most recent research on Alzheimer's disease (AD) was carried out by searching through reputable databases such as PubMed, Scopus, and Google Scholar. In order to present a comprehensive overview of the progress that has been made in understanding Alzheimer's disease, the primary purpose was to collect and synthesise the findings of the most recent research currently available. A careful selection process was used to choose the research because of their significance to important areas of Alzheimer's disease (AD), such as the biology of the disease, advancements in diagnosis, and the many different treatment approaches. The biology of Alzheimer's disease includes a number of important components, including neuroinflammation, amyloid plaques, and tau protein tangles, to begin with. It is the buildup of beta-amyloid peptides in the brain that is the primary focus of research on amyloid plaques. This accumulation is a characteristic feature of Alzheimer's disease. In addition to disrupting the function of cells, these plaques are thought to have a substantial role in the course of Alzheimer's disease. Research conducted on tau proteins investigates the process by which aberrant phosphorylation results in the creation of tangles within neurones, which in turn contributes to the death of neurones and a reduction in cognitive abilities. In addition, neuroinflammation, which is characterised by the activation of glial cells and the production of inflammatory mediators, is an important topic of inquiry since it exacerbates neuronal damage and the course of disease.

The study emphasises the significance of imaging techniques and biomarkers in relation to the developments that have been made in diagnostic systems. A number of biomarkers, including levels of tau and beta-amyloid in cerebrospinal fluid (CSF), as well as indicators based on blood, have demonstrated potential for application in the early identification and monitoring of the course of disease. Different imaging techniques, such as positron emission tomography (PET) and magnetic resonance imaging (MRI), offer extremely helpful insights into the anatomical and functional changes that occur in the brain as a result of Alzheimer's disease. While magnetic resonance imaging (MRI) can detect brain atrophy and other structural abnormalities, positron emission tomography (PET) imaging can observe amyloid

plaques and tau tangles in living organisms. In order to assess the effectiveness of therapeutic strategies and to facilitate early intervention, these diagnostic tools are absolutely necessary. There have been recent developments in this field, such as the creation of monoclonal antibodies that target beta-amyloid. These antibodies, such as aducanumab and lecanemab, have demonstrated potential in clinical studies for lowering amyloid plaques and increasing cognitive performance. Furthermore, research is also being conducted in order to create medicines that target tau proteins as well as other degenerative processes that are associated with Alzheimer's disease. A patient's quality of life can be improved by the use of measures that are referred to as "symptom management." These tactics aim to reduce the cognitive and behavioural symptoms that are associated with Alzheimer's disease. This includes non-pharmacological therapy such as cognitive rehabilitation, physical activity, and psychological support in addition to pharmaceutical treatments such as cholinesterase inhibitors and NMDA receptor antagonists, all of which can assist in the management of cognitive symptoms. The review highlights the significance of taking a holistic approach to the treatment of Alzheimer's disease, which involves combining pharmacological and non-pharmacological approaches in order to address the complex character of the disease.

During the process of data extraction, the primary focus was on recognising significant discoveries and trends, as well as establishing strategies for treatment. Specifically, this entailed doing a comprehensive review of each of the studies that were chosen, summarising the most important findings, and analysing trends and emerging themes. As an illustration, the review reveals that there is a rising interest in the role that neuroinflammation plays in Alzheimer's disease, as well as the possibility of targeting inflammatory pathways as a therapeutic method. In addition, the review emphasises the growing utilisation of advanced imaging techniques and biomarkers in both research and clinical practice, highlighting the significance of these tools in the early identification of disease and the monitoring of its course. The synthesis of the literature that was evaluated involved bringing together the information that was already known, identifying the areas in which there was a lack of understanding, and putting an emphasis on potential research paths. Through the utilisation of this all-encompassing strategy, it is possible to conduct a full evaluation of the current status of Alzheimer's disease research and to identify gaps that call for additional exploration. For example, the study highlights the necessity of conducting additional research on the long-term impact and safety of new disease-modifying medicines, as well as the creation of biomarkers that are more sensitive and specific for early diagnosis. The review intends to direct future research efforts and provide information that can be used in clinical practice by putting an emphasis on potential research areas. A number of potential avenues for future research include the exploration of the genetic and environmental variables that contribute to Alzheimer's disease, the development of combination medicines that target several degenerative processes, and the enhancement of the integration of diagnostic technologies in normal clinical care.

4. RESULTS AND DISCUSSION

Recent breakthroughs in Alzheimer's disease (AD) research have greatly improved our comprehension of its underlying mechanisms, methods of diagnosis, and available treatment

choices. The amyloid hypothesis, positing that the buildup of amyloid-beta ($A\beta$) plaques plays a key role in the development of Alzheimer's disease (AD), remains very prominent. Research regularly demonstrates the presence of $A\beta$ plaques in the brains of individuals with Alzheimer's disease (AD), and these plaques are linked to a loss in cognitive function. Nevertheless, treatment trials focusing on $A\beta$ reduction have shown inconclusive outcomes, suggesting that the buildup of $A\beta$ alone may not completely account for the advancement of the disease. The tau hypothesis has been prominent as a response, with an emphasis on anomalies in tau protein, including hyperphosphorylation and the formation of neurofibrillary tangles [31-35]. These abnormalities are strongly associated with the loss of neurones and cognitive impairment. Recent advancements in tau imaging techniques have enhanced our capacity to observe tau pathology, which exhibits a strong correlation with cognitive deterioration. Research on neuroinflammation has discovered that the persistent activation of microglia, which are the immune cells of the brain, has a substantial impact on Alzheimer's disease, in addition to amyloid and tau. The activated microglia secrete pro-inflammatory cytokines that worsen the damage to neurones, emphasising the possibility of using anti-inflammatory treatments as an additional strategy to address amyloid and tau. The progress in diagnostics has significantly enhanced our capacity to identify AD. Cerebrospinal fluid (CSF) indicators, including decreased levels of $A\beta_{42}$ and increased levels of tau, are highly reliable for identifying Alzheimer's disease (AD), particularly during its initial phases [35-37]. Blood-based biomarkers are becoming increasingly recognised as a less intrusive option, showing encouraging outcomes in the detection of Alzheimer's disease risk. Imaging tools such as positron emission tomography (PET) and magnetic resonance imaging (MRI) have improved our ability to see amyloid and tau deposits and detect structural alterations in the brain. These technological developments facilitate earlier and more precise diagnosis, which is essential for prompt intervention. Significant advancements have been achieved in the therapeutic field of disease-modifying medicines that target the fundamental pathophysiology of Alzheimer's disease. The recent authorisation of aducanumab, a monoclonal antibody targeting amyloid, signifies a significant advancement, while its clinical effectiveness is still a subject of controversy. Several medicines that specifically target tau are currently undergoing clinical trials at different stages. These trials have shown promising findings, indicating the potential benefits of these therapies in slowing down the progression of the disease [37-40]. Additionally, there have been advancements in treatments that target the symptoms themselves, offering improved methods for efficiently treating cognitive and behavioural disorders. Non-pharmacological therapies, such as lifestyle modifications encompassing dietary changes, physical activity, and cognitive training, have demonstrated promise in decelerating the advancement of the disease and enhancing the quality of life for patients [40-45]. Current studies in gene therapy and the use of stem cells have promising prospects for the advancement of Alzheimer's disease treatment. Gene therapy seeks to rectify genetic abnormalities or introduce novel genes to target the fundamental causes of AD, whereas stem cell therapy concentrates on rejuvenating impaired neurones and reinstating brain functionality. Despite being in the early phases, these approaches show potential as pathways for future advancements [45-49].

5. CONCLUSION

Advancements in recent research on Alzheimer's disease (AD) have greatly increased our comprehension of its intricate pathogenesis, improved diagnostic capabilities, and broadened therapy choices. The further development of the amyloid and tau theories has yielded useful insights into the molecular underpinnings of Alzheimer's disease (AD), however difficulties remain in converting these discoveries into viable therapeutic interventions. The increasing acknowledgement of neuroinflammation and hereditary variables contributes to the intricacy of the condition, emphasising the requirement for a comprehensive therapy. Advancements in diagnostics, such as enhanced biomarkers and imaging techniques, have facilitated the earlier and more precise identification of AD, which is essential for prompt intervention. Therapeutic advancements involve the creation of medications that modify diseases by targeting amyloid-beta and tau, along with strategies for managing symptoms and non-pharmacological interventions. Ongoing studies in gene therapy and stem cell applications show potential for significant advancements in the future. Nevertheless, there are still notable obstacles to overcome, such as the diverse nature of the disease and the requirement for tailored treatment strategies. To overcome these hurdles and make progress in developing more effective medicines, it is crucial to continue collaborating across different disciplines and fostering creativity. In the end, the continuous research endeavours offer optimism for enhanced treatment and, possibly, a remedy for Alzheimer's disease, with the goal of reducing the hardship on patients and their families.

6. REFERENCES

1. Lihite RJ, Lahkar M, Das S, Hazarika D, Kotni M, Maqbool M, Phukan S. A study on adverse drug reactions in a tertiary care hospital of Northeast India. *Alexandria journal of medicine*. 2017 Jul 11;53(2):151-6.
2. Zehravi M, Maqbool M, Ara I. Polycystic ovary syndrome and infertility: an update. *International journal of adolescent medicine and health*. 2021 Jul 22;34(2):1-9.
3. Zehravi M, Maqbool M, Ara I. Correlation between obesity, gestational diabetes mellitus, and pregnancy outcomes: an overview. *International Journal of Adolescent Medicine and Health*. 2021 Jun 18;33(6):339-45.
4. Maqbool M, Bekele F, Fekadu G. Treatment strategies against triple-negative breast cancer: an updated review. *Breast Cancer: Targets and Therapy*. 2022 Jan 11:15-24.
5. Zehravi M, Maqbool M, Ara I. Depression and anxiety in women with polycystic ovarian syndrome: a literature survey. *International Journal of Adolescent Medicine and Health*. 2021 Aug 23;33(6):367-73.
6. Maqbool M, Gani I, Dar MA. Anti-diabetic effects of some medicinal plants in experimental animals: a review. *Asian Journal of Pharmaceutical Research and Development*. 2019 Feb 15;7(1):66-9.
7. Zehravi M, Maqbool M, Ara I. Polycystic ovary syndrome and reproductive health of women: a curious association. *International journal of adolescent medicine and health*. 2021 Apr 21;33(6):333-7.

8. Mohd M, Maqbool M, Dar MA, Mushtaq I. Polycystic ovary syndrome, a modern epidemic: an overview. *Journal of Drug Delivery and Therapeutics*. 2019 May 15;9(3):641-4.
9. Maqbool M, Fekadu G, Jiang X, Bekele F, Tolossa T, Turi E, Fetensa G, Fanta K. An up to date on clinical prospects and management of osteoarthritis. *Annals of Medicine and Surgery*. 2021 Dec 1;72:103077.
10. Majeed A, Bashir R, Farooq S, Maqbool M. Preparation, characterization and applications of nanoemulsions: An insight. *Journal of Drug Delivery and Therapeutics*. 2019 Mar 15;9(2):520-7.
11. Zehravi M, Maqbool M, Ara I. Healthy lifestyle and dietary approaches to treating polycystic ovary syndrome: a review. *Open Health*. 2022 May 2;3(1):60-5.
12. Maqbool R, Maqbool M, Zehravi M, Ara I. Menstrual distress in females of reproductive age: a literature review. *International journal of adolescent medicine and health*. 2021 Jul 22;34(2):11-7.
13. Maqbool M, Rasool S, Dar MA, Bashir R, Khan M. Hepatotoxicity and Hepatoprotective agents: A Mini review. *PharmaTutor*. 2019 Sep 1;7(9):34-40.
14. Ara I, Maqbool M, Fekadu G, Hajam TA, Dar MA. Pharmaceutical significance of *Nigella sativa* L., a wonder herb. *Journal of Applied Pharmaceutical Sciences and Research*. 2020;3(4):04-13.
15. Maqbool M, Nasir N, Mustafa S. Polycystic in ovarian syndrome and its various treatment strategies. *INDO AMERICAN JOURNAL OF PHARMACEUTICAL SCIENCES*. 2018 Sep 1;5(9):8470-8.
16. Maqbool M, Zehravi M, Maqbool R, Ara I. Study of adverse drug reactions in pulmonary medicine department of a Tertiary care hospital, Srinagar, Jammu & Kashmir, India. *CELLMED*. 2021;11(2):8-1.
17. Ara I, Maqbool M, Bukhari B, Ara N, Hajam TA. Present status, standardization and safety issues with herbal drugs. *International Journal of Research in Pharmaceutical Sciences and Technology*. 2020 May 18;1(3):95-101.
18. Maqbool M, Fekadu G, Dugassa D, Bekele F, Turi E, Simegnew D. The pattern of substance abuse in the psychiatry department of a tertiary care of Srinagar hospital, Jammu and Kashmir, India. *Archives of Neuroscience*. 2020 Oct 31;7(4).
19. Ara I, Maqbool M, Gani I. Reproductive Health of Women: implications and attributes. *International Journal of Current Research in Physiology and Pharmacology*. 2022 Nov 28:8-18.
20. Zehravi M, Maqbool R, Maqbool M, Ara I. To Identify Patterns of Drug Usage among Patients Who Seek Care in Psychiatry Outpatient Department of a Tertiary Care Hospital in Srinagar, Jammu and Kashmir, India. *Journal of Pharmaceutical Research International*. 2021 Jun 10;33(31A):135-40.
21. Fekadu G, Bekele F, Bekele K, Hanbisa S, Belay G, Maqbool M. Drug use evaluation of beta-blockers in medical wards of Nedjo general hospital, Western Ethiopia. *Cardiovascular Therapeutics*. 2020 Jun 1;2020.
22. Maqbool M, Javed S, Bajwa AA. Assessment OF pain management IN postoperative cases using different scales and questionnaires. *INDO AMERICAN JOURNAL OF PHARMACEUTICAL SCIENCES*. 2019 Jan 1;6(1):983-7.

23. Ara I, Maqbool M, Zehravi M. Psychic consequences of infertility on couples: A short commentary. *Open Health*. 2022 Jan 1;3(1):114-9.
24. Maqbool M, Dugassa D, Fekadu G. Adverse drug reactions of antiepileptic drugs in the neurology department of a tertiary care hospital, Srinagar, Jammu & Kashmir, India. *Archives of Neuroscience*. 2021 Apr 30;8(2).
25. Bashir R, Maqbool M, Ara I, Zehravi M. An In sight into Novel Drug Delivery System: In Situ Gels. *CELLMED*. 2021;11(1):6-1.
26. Zehravi M, Maqbool M, Ara I. Teenage menstrual dysfunction: an overview. *International Journal of Adolescent Medicine and Health*. 2022 Sep 19;35(1):15-9.
27. Dar MA, Maqbool M, Qadrie Z, Ara I, Qadir A. Unraveling PCOS: Exploring its causes and diagnostic challenges. *Open Health*. 2024 Apr 24;5(1):20230026.
28. Dar MA, Maqbool M, Rasool S. Pharmaceutical wastes and their disposal practice in routine. *Int J InfComput Sci*. 2019 Apr;6:76-92.
29. Willie MM, Maqbool M, Qadrie Z. Disrupting the melody: The interplay of obesity and metabolic dysfunction. *Open Health*. 2024 Jun 20;5(1):20230034.
30. Willie MM, Maqbool M, Kubheka B, Popovic B, Kabane S. An analysis of medical scheme-related pregnancy terminations in South Africa in 2022. *Open Health*. 2024 Jun 6;5(1):20230031.
31. Ara I, Zehravi M, Maqbool M, Gani I. A review of recent developments and future challenges in the implementation of universal health coverage policy framework in some countries. *Journal of Pharmaceutical Research & Reports*. SRC/JPRSR-131. DOI: doi. org/10.47363/JPRSR/2022 (3). 2022;127.
32. Maqbool M, Dar MA, Rasool S, Gani I, Khan M. Substance use disorder and availability of treatment options: an overview. *Journal of research in health science*. 2019;1:4-10.
33. Dar MA, Qadrie Z, Maqbool M, Ara I, Qadir A. Metabolic mysteries of the mind: Investigating type 3 diabetes. *Open Health*. 2024 Feb 29;5(1):20230025.
34. Maqbool M, Shabbir W, Aamir S. Adverse events of blood transfusion and blood safety in clinical practice. *Indo American Journal Of Pharmaceutical Sciences*. 2018 Aug 1;5(8):8254-9.
35. Maqbool M, Naeem A, Aamer S. Diabetes mellitus and its various management strategies in practice. *Indo American Journal of Pharmaceutical Sciences*. 2018 Aug 1;5(8):8163-+.
36. Maqbool M, Tariq S, Amjad S. Prescribing practices in pediatrics and drug utilization studies promoting pediatric health. *Indo American Journal of Pharmaceutical Sciences*. 2018 Aug 1;5(8):8070-6.
37. Maqbool M, Ikram U, Anwar A. Adverse drug reaction monitoring and occurrence in drugs used in pulmonary disorders. *Indo American Journal Of Pharmaceutical Sciences*. 2018 Aug 1;5(8):8060-5.
38. Maqbool R, Maqbool M, Zehravi M, Ara I. Acute neurological conditions during pregnancy and their management: a review. *International Journal of Adolescent Medicine and Health*. 2021 Aug 23;33(6):357-66.
39. Maqbool M, Zehravi M, Maqbool R, Ara I. An overview about treatment of gestational diabetes mellitus: A short communication. *CELLMED*. 2021;11(3):12-.

40. Fekadu G, Gamachu B, Mengie T, Maqbool M. Knowledge, attitude of health care professional's towards clinical pharmacy services in Nedjo General Hospital, Western Ethiopia. *International Journal*. 2019 Jul;5(7):172.
41. Maqbool M. Evaluation of drug utilization pattern in the pediatric department of a Tertiary Care Hospital in Srinagar, Jammu & Kashmir, India. *Journal of Applied Pharmaceutical Sciences and Research*. 2019;6-9.
42. Maqbool M, Gani I. Utilization of statins in reducing comorbidities of diabetes mellitus: A systematic review. *Journal of Pharmacy Practice and Community Medicine*. 2018;4(4).
43. Maqbool M, Ara I, Gani I. The Story of Polycystic Ovarian Syndrome: A Challenging Disorder with Numerous Consequences for Females of Reproductive Age. *International Journal of Current Research in Physiology and Pharmacology*. 2022 Nov 28:19-31.
44. Maqbool M, Zehravi M. Neuroprotective role of polyphenols in treatment of neurological disorders: A review. *Interventional Pain Medicine and Neuromodulation*. 2021 Dec 31;1(1).
45. Maqbool M, Arshad B, Liaquat S. Psychotropic drug utilisation pattern can be useful in monitoring treatment regimens for mental disorders in psychiatric settings. *INDO AMERICAN JOURNAL OF PHARMACEUTICAL SCIENCES*. 2018 Aug 1;5(8):7717-21.
46. Zehravi M, Maqbool M, Ara I. Unfolding the mystery of premenstrual syndrome (PMS): an overview. *International Journal of Adolescent Medicine and Health*. 2022 Sep 19;35(1):9-13.
47. Willie MM, Maqbool M, Qadir A. From click to calories: Navigating the impact of food delivery apps on obesity. *Open Health*. 2024 Feb 29;5(1):20230022.
48. Zehravi M, Maqbool M, Ara I. An overview about safety surveillance of adverse drug reactions and pharmacovigilance in India. *The Indian Journal of Nutrition and Dietetics*. 2021 Jul:408-18.
49. Ara I, Kalam MA, Maqbool M, Zehravi M. Phytochemical Standardization and Anti-Anxiety (Izterab-e-Nafsani) study of Aftimoon Hindi (*Cuscutareflexa* Roxb.) on An Animal Model. *CELLMED*. 2021;11(3):14-.