
Cardiovascular Diseases: Advances in Diagnosis, Treatment, and Emerging Therapeutic Trends

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Received: 06 July 2024 Accepted: 24 September 2024 Published: 10 November 2024

Abstract: *Cardiovascular diseases (CVDs) continue to be the leading cause of death worldwide, demanding constant innovation in their diagnosis and treatment. Recent advances have revolutionized the approach to managing these conditions, offering new hope for improved patient outcomes. In diagnostics, the integration of advanced imaging technologies such as cardiac MRI, CT angiography, and high-sensitivity troponin assays has enhanced the early detection and risk assessment of CVDs. Artificial intelligence (AI) and machine learning algorithms are now being employed to analyze large datasets, offering more accurate predictive models for cardiovascular events. These tools enable more personalized risk stratification, facilitating timely and targeted interventions. The therapeutic landscape for CVDs has also evolved significantly. New pharmacological treatments, including PCSK9 inhibitors and SGLT2 inhibitors, have shown promise in reducing cardiovascular risk beyond traditional therapies like statins. Antithrombotic therapies have been refined to minimize bleeding risks while effectively preventing thromboembolic events. Furthermore, the advent of gene therapy and regenerative medicine offers the potential to address the underlying causes of certain cardiovascular conditions, providing options for treatment that were previously unimaginable. Minimally invasive procedures, such as transcatheter aortic valve replacement (TAVR) and percutaneous coronary interventions, have transformed the management of structural heart diseases and coronary artery disease, reducing recovery times and improving patient outcomes. Additionally, the rise of telemedicine and wearable technology has revolutionized patient monitoring, enabling continuous assessment of cardiovascular health and more timely interventions. Emerging trends in the field, such as precision medicine and the use of AI-driven decision-making tools, promise to further refine the treatment of CVDs, tailoring interventions to individual patient profiles. These advances, coupled with ongoing research, are critical in the fight against CVDs, offering new avenues for prevention, early diagnosis, and effective treatment.*



Keywords: *Cardiovascular Diseases, Diagnosis, Treatment, Gene Therapy, Telemedicine.*

1. INTRODUCTION

Cardiovascular diseases (CVDs) encompass a broad spectrum of heart and blood vessel disorders, including coronary artery disease, heart failure, arrhythmias, and stroke. These conditions represent the leading cause of death globally, responsible for an estimated 17.9 million deaths each year, which accounts for nearly 32% of all deaths worldwide. The burden of CVDs extends beyond mortality, affecting the quality of life for millions and imposing significant economic strains on healthcare systems. In response to this pervasive challenge, the medical community has made remarkable strides in the diagnosis, treatment, and management of cardiovascular diseases, driven by advances in technology, pharmacology, and a deeper understanding of the disease mechanisms. Historically, the diagnosis of cardiovascular diseases relied heavily on clinical assessment and basic diagnostic tools, such as electrocardiograms (ECGs) and stress tests. While these methods remain fundamental, the past few decades have witnessed a transformative shift towards more sophisticated diagnostic techniques. High-sensitivity cardiac biomarkers, such as troponins, have emerged as crucial tools in the early detection of myocardial infarction, enabling clinicians to identify heart attacks at much earlier stages and improve patient outcomes. In addition to biomarkers, advancements in imaging technologies have revolutionized cardiovascular diagnostics [1-3]. Techniques such as cardiac magnetic resonance imaging (MRI), computed tomography (CT) angiography, and echocardiography provide detailed visualizations of cardiac structures and functions, allowing for more accurate diagnosis and assessment of heart diseases. These imaging modalities not only enhance the detection of structural abnormalities but also enable the precise measurement of heart function, which is critical in the management of conditions like heart failure and valvular heart disease. Moreover, the integration of artificial intelligence (AI) and machine learning into diagnostic processes has further enhanced the precision and efficiency of cardiovascular care. AI algorithms are now capable of analyzing vast amounts of data from imaging studies, electronic health records, and wearable devices, providing predictive analytics that can forecast cardiovascular events and guide clinical decision-making. This shift towards data-driven, personalized medicine represents a significant advancement in the early detection and management of CVDs [3-5].

Table 1: Advances in Cardiovascular Diagnostics

Technique	Description	Benefits
High-Sensitivity Biomarkers	Early detection of myocardial infarction (e.g., troponins).	Enables timely intervention and improves patient outcomes.
Imaging Technologies	Cardiac MRI, CT angiography, echocardiography.	Provides detailed visualization of heart structure and function.
AI Integration	Algorithms analyzing imaging, EHR, and wearable data.	Enhances diagnostic accuracy, risk stratification, and personalized care.

Parallel to advancements in diagnostics, the treatment landscape for cardiovascular diseases has evolved dramatically. Traditional treatment modalities, such as lifestyle modification, pharmacotherapy, and surgical interventions, have been complemented by novel therapeutic approaches that offer improved efficacy and reduced risks. Pharmacological innovation has played a crucial role in this evolution. The development of new drug classes, such as PCSK9 inhibitors and sodium-glucose cotransporter-2 (SGLT2) inhibitors, has provided additional options for managing hyperlipidemia and heart failure, respectively. PCSK9 inhibitors, for example, have been shown to significantly lower low-density lipoprotein cholesterol (LDL-C) levels, thereby reducing the risk of atherosclerotic cardiovascular events. SGLT2 inhibitors, initially developed for diabetes management, have demonstrated significant benefits in heart failure patients, including reduced hospitalization rates and mortality, even in those without diabetes. In addition to pharmacotherapy, minimally invasive procedures have revolutionized the treatment of structural heart diseases [5-7].



Tran's catheter aortic valve replacement (TAVR), for instance, has emerged as a viable alternative to open-heart surgery for patients with aortic stenosis, particularly those at high surgical risk. This procedure, which involves the placement of a new valve via a catheter, has been associated with lower complication rates, shorter hospital stays, and quicker recovery times compared to traditional surgical approaches. Similarly, percutaneous coronary interventions (PCI) have become the standard of care for many patients with coronary artery disease, providing effective revascularization with minimal invasiveness. Gene therapy and regenerative medicine represent another frontier in cardiovascular treatment. These innovative approaches aim to repair or replace damaged tissues and correct genetic defects that contribute to cardiovascular diseases. For example, gene therapy techniques are being explored to address inherited cardiomyopathies and other genetic heart conditions. Regenerative medicine, including stem cell therapy, holds promise for regenerating damaged heart tissue, offering hope for patients with conditions like heart failure, where the heart's ability to pump effectively is compromised. As the field of cardiovascular medicine continues to advance, several emerging trends are poised to shape the future of CVD management. One of the most significant trends is the increasing adoption of precision medicine, an approach that tailors treatment to the individual characteristics of each patient. Precision medicine in cardiology involves the integration of genetic, biomarker, and environmental data to develop personalized treatment plans that optimize outcomes and minimize adverse effects. This

approach is particularly relevant in the management of complex cardiovascular conditions, where a one-size-fits-all strategy may be less effective [7-9].

Table 2: Emerging Therapeutic Trends

Therapy Type	Description	Benefits
PCSK9 Inhibitors	Lower LDL-C levels to reduce cardiovascular risks.	Effective for patients unresponsive to statins.
SGLT2 Inhibitors	Initially for diabetes; reduces heart failure risks.	Lowers hospitalization and mortality rates.
Minimally Invasive Techniques	Includes TAVR and PCI for structural heart diseases.	Reduced recovery time and complications.
Gene Therapy	Targets genetic defects causing CVDs.	Potential treatment for inherited cardiomyopathies.
Regenerative Medicine	Stem cell therapy for damaged tissue.	Offers hope for advanced heart failure cases.

Telemedicine and wearable technology are also playing an increasingly important role in cardiovascular care. The COVID-19 pandemic accelerated the adoption of telemedicine, enabling patients to receive care remotely and reducing the need for in-person visits. For cardiovascular patients, telemedicine offers the advantage of continuous monitoring and timely interventions, particularly for those with chronic conditions like hypertension and heart failure. Wearable devices, such as smartwatches and fitness trackers, further enhance remote monitoring by providing real-time data on heart rate, blood pressure, and other vital signs. These technologies empower patients to take a more active role in managing their health and provide clinicians with valuable data to guide treatment decisions. The use of AI in cardiovascular medicine is expected to expand, with AI-driven tools increasingly being used to assist in clinical decision-making, risk stratification, and treatment planning. These tools have the potential to reduce the burden on healthcare providers, improve diagnostic accuracy, and ultimately enhance patient outcomes. As AI algorithms become more sophisticated, they will likely play a central role in the ongoing shift towards more personalized, data-driven cardiovascular care [9-10].

2. RELATED WORKS

Cardiovascular diseases (CVDs) have been a focal point of medical research for decades, given their status as the leading cause of mortality worldwide. The continuous evolution of diagnostic techniques, therapeutic strategies, and emerging trends in treatment reflects the medical community's commitment to combating the global burden of these conditions. In recent years, significant advancements have been made in the field, particularly in the areas of diagnosis, treatment modalities, and innovative therapeutic approaches, all of which are crucial in improving patient outcomes and quality of life. One of the most notable areas of progress in cardiovascular disease management is the advancement of diagnostic techniques. Historically, the diagnosis of CVDs was primarily based on clinical assessments and basic tools such as electrocardiograms (ECGs) and stress tests [11]. While these methods remain



essential, the past few decades have seen the introduction of more sophisticated diagnostic technologies that have transformed the landscape of cardiovascular care. High-sensitivity cardiac biomarkers, such as troponins, have emerged as key tools in the early detection of myocardial infarction. These biomarkers allow for the identification of heart attacks at much earlier stages than was previously possible, facilitating timely interventions that can significantly improve patient outcomes. In addition to biomarkers, advanced imaging technologies have also played a pivotal role in enhancing the diagnosis of CVDs. Cardiac magnetic resonance imaging (MRI), computed tomography (CT) angiography, and echocardiography are among the imaging modalities that provide detailed visualizations of the heart and blood vessels. These technologies enable more accurate assessments of cardiac structure and function, which are critical in diagnosing conditions such as heart failure, valvular heart disease, and coronary artery disease. The precision offered by these imaging techniques allows for earlier detection of abnormalities, better risk stratification, and more tailored treatment plans [12-15].

Table 3: Key Innovations in Cardiovascular Disease Management

Innovation Type	Examples/Methods	Impact on Patient Care
Diagnostic Advances	High-sensitivity troponins, MRI.	Improved early detection and targeted interventions.
Pharmacological Innovations	PCSK9 inhibitors, SGLT2 inhibitors.	Expanded options for hyperlipidemia and heart failure management.
Precision Medicine	Tailored treatments using genetic data.	Reduced adverse effects and optimized outcomes.
Telemedicine & Wearables	Smartwatches, remote monitoring.	Enhances patient engagement and continuous health assessment.

Another significant development in cardiovascular diagnostics is the integration of artificial intelligence (AI) and machine learning. AI-driven algorithms have shown great potential in analyzing complex data from imaging studies, electronic health records, and wearable devices. These tools can predict cardiovascular events, guide clinical decision-making, and personalize treatment strategies based on a patient’s unique risk profile. The ongoing refinement of AI in diagnostics represents a major step forward in the field, as it enables more efficient and accurate detection of cardiovascular conditions, ultimately improving patient outcomes. Alongside these diagnostic advancements, the treatment of cardiovascular diseases has also evolved dramatically. Traditional treatment approaches, such as lifestyle modifications, pharmacotherapy, and surgical interventions, have been complemented by novel therapeutic strategies that offer enhanced efficacy and reduced risks. The development of new drug classes has been a particularly important area of research. For instance, PCSK9 inhibitors have emerged as effective tools for managing hyperlipidemia, particularly in patients who do not respond adequately to statins. These inhibitors significantly lower low-density lipoprotein cholesterol (LDL-C) levels, thereby reducing the risk of atherosclerotic cardiovascular events. Similarly, sodium-glucose cotransporter-2 (SGLT2) inhibitors, originally developed for the treatment of diabetes, have demonstrated significant cardiovascular benefits, particularly in patients with heart failure. Clinical trials have shown

that SGLT2 inhibitors can reduce the risk of hospitalization and mortality in heart failure patients, even those without diabetes, making them a valuable addition to the therapeutic arsenal against cardiovascular diseases. In the realm of procedural interventions, minimally invasive techniques have revolutionized the treatment of structural heart diseases. Transcatheter aortic valve replacement (TAVR) has emerged as a viable alternative to traditional open-heart surgery for patients with aortic stenosis, especially those at high surgical risk. TAVR has been associated with lower complication rates, shorter hospital stays, and quicker recovery times, making it an increasingly popular option. Similarly, percutaneous coronary interventions (PCI) have become the standard of care for many patients with coronary artery disease, offering effective revascularization with minimal invasiveness [15-20].



Emerging therapeutic trends are also shaping the future of cardiovascular care. Precision medicine, which tailors treatment to the individual characteristics of each patient, is gaining traction in the management of complex cardiovascular conditions. This approach integrates genetic, biomarker, and environmental data to develop personalized treatment plans that optimize outcomes and minimize adverse effects. Research into precision medicine is ongoing, with the goal of further refining these strategies to ensure they can be effectively implemented in clinical practice. Gene therapy and regenerative medicine represent another promising frontier in cardiovascular treatment. These innovative approaches aim to repair or replace damaged tissues and correct genetic defects that contribute to cardiovascular diseases. Early-phase clinical trials have explored the safety and efficacy of these therapies, showing potential for treating conditions that have limited options under current medical practices. Additionally, the integration of telemedicine and wearable technology into cardiovascular care is becoming increasingly important. Telemedicine has allowed for remote monitoring and management of chronic cardiovascular conditions, reducing the need for in-person visits and enabling timely interventions. Wearable devices, such as smartwatches and fitness trackers, provide continuous monitoring of vital signs like heart rate and blood pressure, empowering patients to take a more active role in managing their health and providing clinicians with valuable data for guiding treatment decisions. The research and development efforts in the field of cardiovascular diseases have led to significant advancements in diagnosis, treatment, and emerging therapeutic trends. These innovations



are transforming the way cardiovascular diseases are managed, offering new avenues for improving patient outcomes and reducing the global burden of these conditions. As the field continues to evolve, ongoing research will be critical in further enhancing the quality of care for individuals affected by cardiovascular diseases [20-25].

Table 4: Literature Review Summary

Focus Area	Key Studies	Findings
Biomarkers for CVDs	High-sensitivity troponins.	Crucial for early MI detection.
Imaging Technologies	Cardiac MRI, CT angiography.	Revolutionized cardiac structure assessment.
Telemedicine Applications	COVID-19's role in telehealth adoption.	Increased remote care and chronic disease monitoring capabilities.
Emerging Therapies	Gene and regenerative medicine.	Potential solutions for hard-to-treat conditions like heart failure.

3. METHODOLOGY

The methodology for this article on "Cardiovascular Diseases: Advances in Diagnosis, Treatment, and Emerging Therapeutic Trends" involves a systematic approach to reviewing and synthesizing current knowledge in the field. The process begins with a comprehensive literature search aimed at identifying relevant studies, clinical trials, reviews, and expert opinions. Major academic databases such as PubMed, Scopus, Web of Science, and Google Scholar are utilized for this search. Keywords including "cardiovascular diseases," "diagnosis," "treatment," "emerging therapies," "precision medicine," "gene therapy," "minimally invasive procedures," and "telemedicine" guide the search to ensure a broad coverage of relevant literature. The search is typically limited to articles published within the last 10–15 years to focus on recent advancements, although seminal works from earlier periods are also reviewed for their foundational contributions. Once the literature search is complete, the next step is to apply selection criteria to determine which studies and articles will be included in the review. The inclusion criteria focus on peer-reviewed articles, clinical trials, meta-analyses, and comprehensive review articles that address innovations in diagnostic techniques, treatment modalities, and emerging trends in cardiovascular care. This includes research on specific cardiovascular conditions like coronary artery disease, heart failure, and aortic stenosis, provided they offer insights applicable to broader advancements in the field. Studies are excluded if they are not available in English, are outdated, or have methodological limitations such as small sample sizes or insufficient data quality. Data extraction involves a thorough examination of the selected studies to extract relevant information. Key data points include advancements in diagnostic technologies, new therapeutic approaches, and emerging trends such as precision medicine, gene therapy, and the integration of telemedicine and wearable technology. Each study's findings are reviewed to assess the quality and relevance of the data, ensuring that the information presented in the article is accurate and up-to-date. Following data extraction, the analysis phase involves synthesizing the extracted information to provide a cohesive overview of the current state of cardiovascular disease management. This includes identifying common themes,



advancements, and gaps in the existing research. The synthesis aims to present a comprehensive view of how diagnostic and therapeutic approaches have evolved and what future directions might look like. By following this methodology, the article offers a detailed and informed perspective on the latest advancements in cardiovascular disease management, contributing to a deeper understanding of the field and highlighting potential areas for future research and development.

4. RESULTS AND DISCUSSION

The results and discussion section of this article on "Cardiovascular Diseases: Advances in Diagnosis, Treatment, and Emerging Therapeutic Trends" reveals significant advancements in the field, highlighting improvements in diagnostic techniques, treatment modalities, and emerging therapeutic trends. Recent advancements in diagnostic techniques have notably enhanced the early detection and management of cardiovascular diseases. High-sensitivity cardiac biomarkers, particularly troponins, have revolutionized the diagnosis of myocardial infarction by enabling the identification of heart damage at much earlier stages than traditional methods. This early detection leads to more timely interventions and improved patient outcomes. Studies have demonstrated that high-sensitivity troponin assays can detect myocardial injury with greater precision, which significantly reduces the risk of missed or delayed diagnoses. Imaging technologies have also experienced substantial advancements. Cardiac magnetic resonance imaging (MRI) and computed tomography (CT) angiography have become integral tools in assessing cardiac structure and function. Cardiac MRI provides detailed images of myocardial tissue, aiding in the diagnosis of conditions such as cardiomyopathies and myocarditis. CT angiography offers high-resolution images of coronary arteries, which is crucial for detecting coronary artery disease and evaluating coronary artery anomalies. Furthermore, enhancements in echocardiography, including 3D imaging, have provided more detailed assessments of cardiac anatomy and function, making it a cornerstone of cardiac imaging [25-30].

The integration of artificial intelligence (AI) into cardiovascular diagnostics has been transformative. AI algorithms are now used to analyze vast amounts of data from imaging studies and electronic health records, offering predictive analytics that enhance diagnostic accuracy. AI-driven tools, for example, can assess ECGs with high precision, identifying arrhythmias and other abnormalities that might be missed by traditional methods. This integration of AI has the potential to significantly improve early detection, risk stratification, and personalized treatment planning. In terms of treatment modalities, there have been notable innovations. New pharmacological agents, such as PCSK9 inhibitors and sodium-glucose cotransporter-2 (SGLT2) inhibitors, have markedly improved the management of cardiovascular conditions. PCSK9 inhibitors target a protein involved in cholesterol metabolism, substantially lowering low-density lipoprotein cholesterol (LDL-C) levels and reducing the risk of cardiovascular events. SGLT2 inhibitors, initially developed for managing diabetes, have shown cardiovascular benefits beyond glucose control, including reduced heart failure hospitalization and mortality [30-35].



Minimally invasive procedures have also transformed the treatment of structural heart diseases. Tran's catheter aortic valve replacement (TAVR) has emerged as a viable alternative to traditional open-heart surgery for patients with aortic stenosis, particularly those at high surgical risk. TAVR offers several advantages, including reduced recovery times and lower complication rates. Similarly, percutaneous coronary interventions (PCI) have become the standard of care for many patients with coronary artery disease, providing effective revascularization with minimal invasiveness. Gene therapy and regenerative medicine represent cutting-edge areas in cardiovascular treatment. Gene therapy aims to address genetic defects underlying specific cardiovascular conditions, while regenerative medicine focuses on repairing or replacing damaged heart tissue [35-40]. Early studies in these areas have shown promising results, with gene therapy potentially offering solutions for inherited cardiomyopathies and regenerative approaches providing new options for treating heart failure. Emerging therapeutic trends include precision medicine, telemedicine, and wearable technology. Precision medicine, which tailors treatment based on an individual's genetic, biomarker, and environmental profiles, is gaining traction in cardiovascular care. This personalized approach allows for more effective treatment strategies, potentially improving outcomes and minimizing adverse effects. Telemedicine has become increasingly important, particularly in the context of chronic disease management. Remote monitoring and virtual consultations facilitate continuous patient care and timely interventions, reducing the need for in-person visits and improving access to care. Wearable technology, such as smartwatches and fitness trackers, provides real-time monitoring of vital signs like heart rate and blood pressure, empowering patients to take a more active role in managing their health and providing clinicians with valuable data to guide treatment decisions [40-49].

5. CONCLUSION

The field of cardiovascular disease management has witnessed remarkable advancements in recent years, driven by significant innovations in diagnostics, treatment, and emerging therapeutic trends. The integration of high-sensitivity cardiac biomarkers and advanced imaging technologies has greatly enhanced early detection and accurate diagnosis, enabling timely interventions that significantly improve patient outcomes. The development of novel pharmacological agents, such as PCSK9 inhibitors and SGLT2 inhibitors, has transformed the treatment landscape by offering new options for managing hyperlipidemia and heart failure, while minimally invasive procedures like transcatheter aortic valve replacement (TAVR) and percutaneous coronary interventions (PCI) have revolutionized the approach to structural heart diseases. Emerging trends in precision medicine, gene therapy, and regenerative medicine further underscore the progress in cardiovascular care. Precision medicine, which tailors treatment based on individual genetic and biomarker profiles, promises to enhance the effectiveness of therapies and reduce adverse effects. Gene therapy and regenerative approaches hold potential for addressing genetic defects and repairing damaged heart tissue, offering hope for patients with previously limited treatment options. Additionally, the rise of telemedicine and wearable technology has facilitated continuous monitoring and remote care, improving patient engagement and access to care. These advancements collectively represent a significant leap forward in the management of



cardiovascular diseases, with the potential to transform patient care and reduce the global burden of these conditions. As research and technology continue to evolve, ongoing efforts in these areas will be crucial in addressing the challenges of cardiovascular diseases and further enhancing treatment outcomes. The continued exploration of innovative approaches and the integration of new technologies into clinical practice will be vital in shaping the future of cardiovascular care and ensuring that patients benefit from the latest advancements in the field.

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, Simegnaw 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 Insight 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).