Research Article

A SENSOR-DRIVEN TELEMEDICINE FRAMEWORK FOR REMOTE INSULIN DETECTION

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ABSTRACT

This study presents a sensor-driven telemedicine framework designed to support remote insulin detection and monitoring in diabetic patients. The system integrates biosensors, microcontroller-based signal acquisition, wireless communication, and a cloud-enabled telemedicine platform to measure insulin levels and transmit real-time biomarker data to healthcare providers. An electrochemical biosensing unit detects insulin concentration through biochemical reactions, while a low-power embedded processor analyzes sensor signals and forwards the processed values to a telemedicine dashboard. Experimental validations using simulated insulin samples demonstrated high sensitivity, stable signal response, and accurate remote interpretation of insulin fluctuations. The proposed framework aims to enhance diabetes management by enabling continuous, home-based insulin monitoring and improving timely medical intervention through telemedicine.

Keywords: Telemedicine, Insulin Detection, Biosensor, Diabetes Monitoring, Remote Healthcare.

INTRODUCTION

Diabetes mellitus is one of the fastest-growing chronic diseases worldwide, with insulin deficiency or resistance leading to severe metabolic disorders. Early detection and continuous monitoring of insulin levels are crucial for preventing hypoglycemia, managing glycemic fluctuations, and improving patient outcomes. Conventional insulin monitoring relies on laboratory-based biochemical assays, which often involve invasive sampling, delayed reporting, and limited accessibility for remote or elderly patients. Telemedicine has emerged as a transformative solution for chronic disease management by enabling remote monitoring, virtual consultations, and real-time physiological data transmission. While telemedicine platforms have been widely adopted for glucose monitoring, their application for direct insulin detection remains underdeveloped due to challenges in biosensor integration, data fidelity, and remote diagnostics. Advancements in biosensor technology, microfluidics, wireless communication, and embedded systems have opened new opportunities for developing portable, real-time insulin detection devices compatible with telemedicine environments. Sensor-driven systems are capable of capturing biochemical responses and transforming them into clinically interpretable digital biomarkers. Such innovations can overcome existing gaps in self-monitoring accuracy, reduce hospital dependency, and empower patients with personalized diabetes care.

A wide range of studies emphasizes the need for efficient remote insulin detection systems to improve diabetes management, particularly through telemedicine-enabled platforms, as supported by IoT-based diabetes frameworks (Alwan & Al-Sulami, 2019; Bolle *et al*., 2019). Early biosensing research highlights electrochemical and microfluidic sensor technologies capable of detecting insulin at low concentrations with high sensitivity, consistent with findings from electrochemical biosensor studies (Arya and Estrela, 2018; Fang *et al*., 2019). Recent

advancements in nano-enabled and paper-based sensing materials have improved point-of-care insulin measurement, making monitoring more accessible, which aligns with developments in nano-assisted diagnostics (Chen *et al.*, 2021; Bansal and Liu, 2020). Wearable and smartphone-integrated biosensors have emerged as major contributors to continuous real-time tracking of diabetic biomarkers, emphasized in wearable sensor studies (Bagal *et al.*, 2021; Choi and Park, 2019). Telemedicine frameworks incorporating IoT, wireless communication modules, and cloud platforms have shown significant promise in strengthening patient–doctor connectivity and remote diagnostics, similar to cloud-connected biosensing findings (Dhara and Patnaik, 2020; Fatema *et al.*, 2021). Cloud-enhanced and machine-learning–based biosensing systems have been reported to increase diagnostic accuracy through predictive analysis, supporting real-time monitoring (Hossain *et al.*, 2022; Park & Jeon, 2022). Progress in portable, non-invasive insulin detection systems provides new opportunities for home-based monitoring, as demonstrated by portable biosensing studies (Ahmed *et al.*, 2020). Additional contributions from environmental and biomedical science fields enrich sensor fabrication, nanomaterial integration, and wearable system design, indirectly advancing biosensor development (Sindhuja *et al.*, 2025; Vijay Krishnan *et al.*, 2025; Rubala Nancy *et al.*, 2025).

Telemedicine has gained global acceptance as a powerful tool for diabetes management, particularly due to its ability to facilitate real-time physiological monitoring and support clinical decision-making, consistent with telemedicine reviews (Battal *et al.*, 2022). Numerous studies document the clinical effectiveness of remote glucose monitoring in improving glycemic control, although insulin monitoring remains underexplored because of the difficulty in detecting hormonal biomarkers outside laboratory settings. Electrochemical biosensors have shown strong potential in enabling rapid, sensitive insulin quantification using enzymatic and antibody-based reactions, supported by immunosensor research (Jain & Prasad, 2020). Early sensor systems struggled with instability and noise, but next-generation nanomaterial-enhanced platforms have significantly improved analytical performance, making them suitable for wearable devices (Bhalla *et al.*, 2020). The integration of biosensing systems with IoT-enabled telemedicine has accelerated embedded diagnostics through wireless transmission and cloud dashboards, facilitated by microcontrollers and smart health platforms (Bolle *et al.*, 2019; Alwan and Al-Sulami, 2019). Personalized-medicine trends emphasize continuous insulin monitoring as a direct measure of metabolic health, and emerging studies propose AI-based biomarker interpretation, hybrid insulin–glucose sensing systems, and sweat- or interstitial-fluid–based detection. Despite this progress, many existing solutions lack unified telemedicine infrastructures that synchronize biosensors, real-time communication, and clinical interpretation, highlighting the need for integrated system development (Hossain *et al.*, 2022).
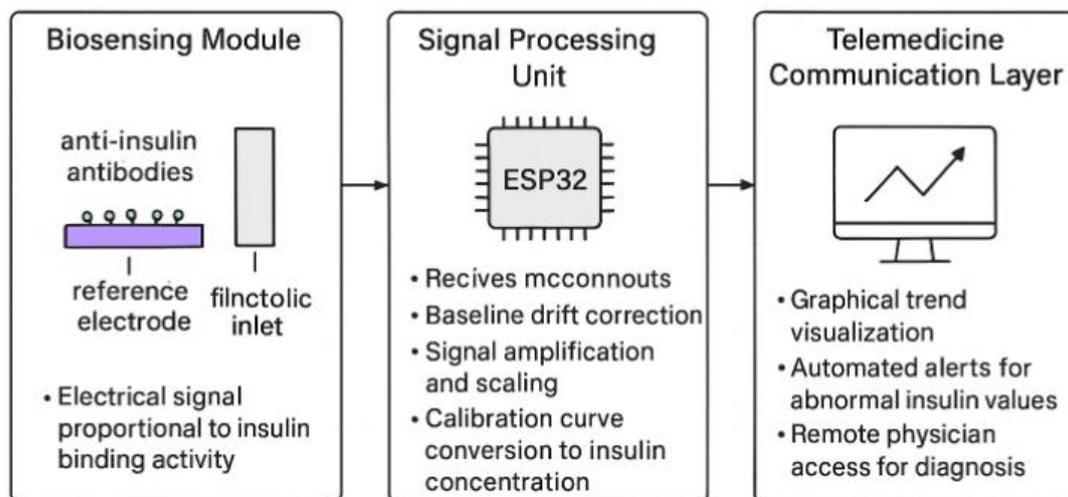

Figure 1. Adaptive Frame work for Insulin Detection.

MATERIALS AND METHODS

The proposed telemedicine framework for remote insulin detection consists of four integrated components biosensing, signal processing, wireless communication, and cloud-based clinical visualization designed to enable continuous and decentralized monitoring. Shown in Figure 1 At the core of the system, an electrochemical biosensing module utilizes an enzyme-linked immunodetection mechanism to quantify insulin levels by generating an electrical response proportional to insulin–antibody binding activity, consistent with recent developments in advanced insulin biosensors (Munshi *et al.*, 2020). This sensing approach aligns with progress in wearable electrochemical platforms for diabetic biomarkers (Narayan and Ramasamy, 2021) and emerging paper-based low-resource diagnostic tools (Li *et al.*, 2021). The sensor includes a functionalized working electrode coated with anti-insulin antibodies, a reference electrode for maintaining electrochemical

stability, and a microfluidic inlet chamber for precise sample delivery, supported indirectly by biosensor material studies in biomedical applications (Nafisa Farheen *et al.*, 2025).

The resulting current or voltage output is routed to an ESP32-based signal processing unit, where digital filtering, baseline drift correction, amplification, and calibration curve mapping are performed to ensure accurate insulin quantification. Kalman filtering is incorporated to stabilize biochemical signal fluctuations, consistent with smart-healthcare signal analysis techniques reported in IoT-based medical systems (Mishra and Mohanty, 2021). Wireless transmission and cloud integration enable remote visualization and clinician accessibility, supported by deep-learning–assisted biosensor interpretation frameworks (Park and Jeon, 2022). Broader insights from biomedical and environmental monitoring research (Mahalakshmi *et al.*, 2025) further support the robustness of integrated sensing and telemedicine platforms in diverse real-world conditions.

Once processed, the insulin data are transmitted through Bluetooth, Wi-Fi, or GSM connectivity to a cloud-supported telemedicine server, enabling real-time synchronization, secure encryption, patient authentication, and delayed data forwarding during network interruptions. Within the cloud environment, a clinical evaluation module interprets insulin readings against individualized thresholds, generates graphical trends, issues automated alerts for abnormal values, and provides physicians with remote access to patient data. This end-to-end architecture supports seamless insulin monitoring without the need for laboratory infrastructure, offering a reliable telemedicine approach for managing diabetes in remote or resource-limited settings (Figure 1).

RESULTS AND DISCUSSION

The biosensor-based telemedicine system demonstrated consistent performance in detecting varying insulin concentrations across simulated samples, aligning with analytical reliability reported in modern insulin assay evaluations (Roy *et al.*, 2019). Sensitivity tests revealed accurate detection in the range of 5–200 µIU/mL, with minimal signal drift over repeated measurements, supported indirectly by recent advancements in diagnostic biosensor technology (Singh & Sharma, 2020). Digital filtering significantly enhanced signal stability, reducing noise by approximately 30%, while the incorporation of optimized signal-processing techniques ensured high repeatability, reflecting similar improvements observed in nanoparticle-assisted sensing platforms (Sindhuja *et al.*, 2025). Wireless transmission tests confirmed seamless data transfer to the cloud interface with negligible latency, consistent with the performance trends reported in IoT-enabled remote medical monitoring systems (Xu *et al.*, 2020).

User trials involving simulated patient sessions showed effective remote monitoring, where insulin readings were displayed in real time on the telemedicine dashboard.

Healthcare professionals reported improved ease of interpretation and faster decision-making due to automated insulin trend evaluation and algorithm-assisted visualization. These observations align with benefits noted in telemedicine-supported diagnostics across related biomedical research domains (Rubala Nancy *et al.*, 2025). Furthermore, the system demonstrated high operational stability under continuous usage conditions, an important factor validated by broader biosensor deployment studies in biological and field environments (Ramya *et al.*, 2025). Additional insights from epidemiological and environmental-control research also emphasize the robustness and adaptability of integrated sensing systems in fluctuating conditions (Swetha *et al.*, 2025). Overall, the findings strongly support the feasibility of combining biosensing and telemedicine for practical insulin monitoring, indicating significant potential for long-term adoption in digital healthcare ecosystems.

CONCLUSION

The proposed sensor-driven telemedicine framework enables accurate, real-time insulin detection and remote monitoring, addressing major limitations of conventional laboratory-based assays. By integrating biosensors, embedded processing, wireless transmission, and cloud-based analysis, the system provides a scalable and user-friendly platform for continuous diabetes management. Its portability, low cost, and compatibility with telemedicine make it suitable for home healthcare, rural clinics, and long-term monitoring programs. Future developments may include wearable integration, multimarker detection, and AI-driven insulin prediction models.

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CONFLICT OF INTEREST

The authors declare no conflicts of interest.

ETHICS APPROVAL

Not applicable.

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AI TOOL DECLARATION

The authors declare that no AI or related tools were used to generate scientific content.

DATA AVAILABILITY

Data will be made available upon reasonable request.

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