

# DeepSide: A Deep Learning Framework for Drug Side Effect Prediction

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**Abstract**— The problem of adverse drug responses is significant in the fields of contemporary medicine as it usually results in severe issues, an increase in the number of hospitalizations, and an increase in expenses of medical care. Therefore, it is relevant to learn about potential drug side effects in time to ensure the patient safety and assist physicians in making judgment. Because of the use of lab tests, clinical trials, and hand analysis, the standard methods of determining whether a drug is safe rely on them. They are time-intensive, costly and not necessarily successful in discovering complicated patterns in huge volumes of biomedical information. To avoid these challenges, we introduce DeepSide, a DL model of automatic prediction of drug side effects on a dataset of drug images. In order to be able to distinguish the images of the drugs, the proposed approach involves the use of sophisticated convolutional neural network architectures, including VGG19 with Batch Normalization, DenseNet121, ResNet18 and ConvNeXt-Tiny. The information is prepared in terms of validating structured data, transforming it and performing controlled train-validation splitting to be used in reliable model training. Performance can be judged by means of standard classification measures such as Accuracy, Precision, Recall, F1-Score, ROC curve analysis and confusion matrix analysis. The DenseNet121 architecture is more effective in predicting the future as compared to the other models that were implemented. Its success rate in all the evaluative measures reached 99.2% of success. The better model is then designed into a Flask-based application to allow you to make predictions through images and view your confidence levels and display chemical structures more understandable. On the whole, the proposed solution is an effective and reliable method of automatic prediction of drug side effects, which results in more safety analysis and intelligent pharmaceutical decision support.

**Keywords**— Adverse Drug Reactions, Drug Side Effect Prediction, Medical Image Analysis, Deep Learning, Computational Pharmacology, Data-Driven Healthcare.”

## I. INTRODUCTION

Adverse drug reactions (ADRs) have been an ongoing issue in contemporary medicine as unwanted side effects of drugs. They are capable of creating severe health issues, protracted hospitalization and increased costs of treatment [1]. The necessity to identify potential risks of drugs in a correct way has been increasing along with the increase in the number of pharmaceutical goods and the complexity of biomedical information. Traditional safety review utilizes a lot of pharmacovigilance reports, clinical trials, and reading medical records by hand [2]. Although the methods provide helpful insights, they tend to be time and resource-intensive, and they have to be deciphered by professionals, which might postpone the decision-making process. Moreover, small trends may be impossible to detect using regular methods when working with a very large dataset, and it is difficult to anticipate early adverse drug events [3].

Although individuals continue to work on it, they have not yet managed to discover ADRs accurately prior to the widespread usage of drugs [4]. Current techniques do not necessarily integrate various strain of drug data such as chemical structures, biological activities and phenotypic effects in one study framework [5]. Therefore, safety tests are not as accurate and reliable as they should be, and hazardous reactions are not always discovered promptly. Assessing data that is heterogeneous and has high dimensions is difficult, and thus complete assessment proves to be more difficult. This

renders healthcare professionals difficult to obtain comprehensive view when they look at the safety profiles of newly and old compounds [6].

To address these issues, the ongoing work will be directed toward the design of a powerful and data-driven system that will be able to automatically infer potential side effects of drugs [7]. The approach is aimed at analyzing a large number of various pieces of information related to drug usage and locate thematic patterns related to adverse reactions. It also provides means of checking in the favor of safety which can be adopted by a large number of people, and is not difficult to comprehend [8]. The framework will enhance the detection precision and reliability of ADR because it incorporates biomedical information on various sources. The objectives involve reducing the workload that should be performed manually, providing more accurate predictions, and providing informative information to aid in making clinical decisions and drug testing [9].

An approach such as this would make a considerable impact since it may enhance the safety of drugs, reduce the cost of care, and reduce the risk to patients [10]. Dependable projections of ADRs can assist healthcare employees in making more superior decisions, ensure that they adhere to the regulations, and ensure that drug development is safer. Moreover, smart, automated tools that allow investigating huge volumes of biomedical information quickly may accelerate the study and allow precision medicine to advance. All in all, the proposed framework is a giant leap towards ensuring that modern healthcare interventions are safer, more efficient, and more effective.

## II. RELATED WORK

Recent advancements in drug safety research have contributed to the enhancement of predicting ADRs by using large biomedical datasets to enhance the prediction process. The L1000 platform resulted in the full connection map and above a million profiles. It became possible to investigate drug-induced alterations in molecules in a methodical manner and simplified high-throughput ADR experiments [11]. Likewise, the ML systems such as DrugClust have demonstrated that side effects can be predicted by clustering techniques by examining chemical and biological characteristics of drugs [12]. This demonstrates the usefulness of integrative computational models. Such studies demonstrate the significance of employing a combination of data sources to make ADR prediction more accurate and helpful.

There is also the need to predict the way the drugs and proteins will interact and the side effects that will occur as a result. Extensive proteome-wide studies have provided insight into potential off-target interactions resulting in ADRs, and this paper provides the basis on which a deeper examination of drug safety can be conducted [13]. The availability of databases such as SIDER and ADRCS has played a significant role in streamlining the information of ADRs thus, facilitating the labeling, grouping and locating adverse drug-related events [14, 16]. Data-driven prediction studies have become possible thanks to these resources and have been useful in both clinical and research applications. But, even

now, it is not easy to ensure that the datasets are complete and address all the subject matters.

Pharmacogenomics research has contributed to the understanding of the pharmacogenomic mechanism of ADRs. The studies of metabolic dysregulation and adverse reactions indicate that the variation between the responses of various individuals to drugs may influence the safety outcomes, which is why the individualized prediction frameworks are required [15]. Other studies have integrated chemical structures and protein interaction network to predict the patterns of bad drug reactions. This demonstrates that the integration of information across various dimensions could demonstrate minor links between molecular characteristics and clinical outcomes [17, 18]. Nevertheless, these methods are normally effective only on small scale datasets or they are not easily scaled when handling dense and heterogeneous data.

The large-scale predictive models have displayed the bad and the good about how things are done currently. Chemical, biological and phenotypic-oriented studies have demonstrated that they can more effectively predict ADRs yet they are again restricted due to the fact that they do not demonstrate comprehensively how intricate biological activities take place [19, 20]. The combination of various kinds of biomedical information to make it effective to make the correct predictions regarding a diverse population of substances still has certain issues despite much improvement achieved. The existing frameworks may not be capable of accommodating new drugs or discovering new trends in datasets that change rapidly.

The given study bridges these gaps by proposing a smart system that will be able to detect ADRs automatically by examining a significant amount of data simultaneously. The framework is expected to solve the issues with the past studies by integrating genetic, biological and phenotypic data to ensure more accurate predictions, making the framework more convenient and assisting doctors in making accurate decisions. This approach is aimed at enhancing the process of drug assessment, as well as making therapeutic intervention safer and better, and enhancing the quality of healthcare.

## III. MATERIALS AND METHODS

The proposed system, DeepSide, is based on advanced DL methods to accurately identify the side effects of drugs based on drug image data. The system is based on a structured Drug Image Dataset which contains labeled images of the various types of drugs which are associated with potentially bad effects. The approach begins by investigating and justifying the data to ensure that data is correct. Then, a data loading procedure is established, and a 7030 train validation split is controlled to train the model in a reliable way. In order to render models more universal and less prone to being overfit, data enhancement techniques such as picture resizing, horizontal and vertical image flips, rotation, and jittering colors are applied. The system uses several forms of convolutional neural networks to learn how to make hierarchy of visual representations of drug images. These are VGG19 BN, DenseNet121, ResNet18 and ConvNeXt-Tiny. Performance is measured by standard classification metrics

such as Accuracy, Precision, Recall and F1-Score and ROC curve and confusion matrix analysis. The most successful model is implemented in a Flask-based interface allowing to guess drugs on the fly, locate side effects, and visualise molecular structures.

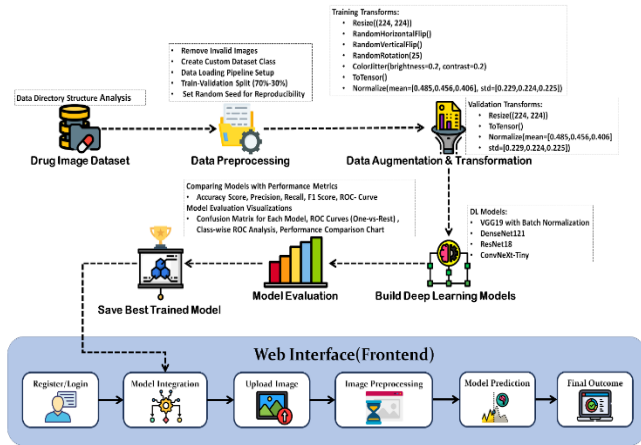


Fig.1 System Architecture

The overall layout of the system of drug side effects prediction system is presented in Figure 1. The structure begins with a picture dataset of drugs which is preprocessed through removing invalid images, creating a custom dataset and dividing the train-validation. The data augmentation and transformation aid the models to become more adaptable and subsequent development of deep learning models through numerous architectures follows. All performance measures are compared among the models to identify the most trained model. This is then implemented into a web interface. Users are able to register, upload photos and receive forecasts. This renders the drug safety analysis platform complete, fast and interactive.

*A) Dataset Collection*

The research works with a Drug Image Dataset of 20 distinct pharmaceutical compounds e.g. Ascozin, Bonamine, Decolgen, and Imodium are all famous medications. The data contains clear images of drug packages, labels and tablets. The sample names are marked with the name of the drug that it represents and this is the major class label. The dataset has a great number of diverse visual features, dosage forms and types of packaging, which allows examining the differences in the real-life. Its systematic labeling, and full coverage of widespread drugs, enables it to be used in automated prediction of side effects, therefore capable of training and evaluating image-based predictive models in a sound manner.

*B) Pre-Processing*

In order to ensure that the gathered drug images were of good quality to train the model, the pictures were cleaned, arranged and complemented in a premeditated manner. This enhanced the accuracy and predictability of the dataset by increasing its consistency, diversity and strength.

*Data Preprocessing:* In the process of preprocessing data, the drug images collected were thoroughly inspected so as to ensure that they were in good quality and consistent. Images that were invalid or damaged would be removed to ensure that noise was not added and damaged model training. An ordered dataset class was created to rank the pictures and labels accompanying the pictures. A systematic loading pipeline was then developed to process sets of data at a fast rate. A 70 percent-30 percent division was then used to split the dataset into training and validating groups. A fixed random seed was used to ensure that the tests could be repeated. This is to ensure that the input required to feed on the following step in the model development is good and reliable.

*Data Augmentation and Transformation:* The training subset was augmented and transformed in a number of ways to ensure that the dataset was more varied and that the model did not get too well fitted. They were manipulated in order to appear as real life changing the pictures in terms of their size, orientation, brightness and contrast, which was also supposed to be the mimicry of the changes that drug boxes and labels undergo. These alterations make the model more dependable by subjecting it to a wide range of various viewing conditions. Normalization was done to ensure that the data was evenly distributed so as to ensure that learning becomes faster and more effective when applied to unknown pictures.

*Data Augmentation and Transformation:* The validation subset was modified to become more standard and consistent which ensured that model performance was duly reviewed. The pictures were downsized and made uniform to the input requirements of the learning framework. The statistical distributions maintained the same channels. The assessment set was not subjected to random additions that would have safeguarded the integrity of the metrics, but they were on the training set. Such cautious planning ensures that the results of validation indicate the actual model performance and prevents the increase in its performance without any justification. This makes it possible to assess the predictability and generalizability of the model better.

*C) Algorithms*

*VGG19:* VGG19 network using Batch normalization is a network of deep convolutional networks with multiple stacked network layers that enhance the extraction and normalization of features that ensure the network learning remains stable. This combination causes convergence of a faster rate, better classification and improved generalization over a broad image source range.

*DenseNet121:* DenseNet121 employs layers which are densely connected in order to ensure that features are re-used and gradient flow is effective. It can learn to represent the data better, overcome the issue of vanishing gradients, and can learn effectively, identifying small patterns in large volumes of complex data in the form of pictures.

*ResNet18*: ResNet18 only uses the remaining connections to simplify the training of deep networks by solving issues of degradation. It ensures that feature transmission is more effective, models are more precise, and generalization is improved, and computing speed is high.

*ConvNeXt-Tiny*: ConvNeXt-Tiny applies modern convolutional design principles in order to achieve high representational capacity with low cost. It is more robust and has better feature extraction with correct predictions but capability to handle a large variety of image datasets.

IV. EXPERIMENTAL RESULTS

*Accuracy*: The ability of a test to discriminate between unwell and healthy individuals is referred to as its accuracy. To determine the level of accuracy of a test we must compute the percentage of cases that are true positives and true negatives. Mathematically this can be represented as.

$$Accuracy = \frac{TP + TN}{TP + FP + TN + FN} \quad (1)$$

*Precision*: The percentage of correctly classified cases or samples to the correctly classified positives is known as precision. Thus here is the way to determine the accuracy:

$$Precision = \frac{True\ Positive}{True\ Positive + False\ Positive} \quad (2)$$

*Recall*: Recall is used in ML to indicate the ability of a model to identify all the meaningful examples of a particular type of object. It displays the level of a model that is able to capture instances of a given class. It is the ratio of the correct positives predictions to the total number of the real positive.

$$Recall = \frac{TP}{TP + FN} \quad (3)$$

*F1-Score*: Correctness of a ML model can be evaluated by the F 1 score. It sums up the accuracy and the recall scores of a model. The accuracy measure is a number of times that a model was correct in the entire set of data.

$$F1\ Score = 2 * \frac{Recall * Precision}{Recall + Precision} * 100 \quad (4)$$

Table.1 Performance Evaluation

ML Model	Accuracy	Precision	Recall	F1-Score
VGG19	0.98865	0.98888	0.98871	0.98874
DenseNet	0.99230	0.99241	0.99240	0.99236
ResNet18	0.98010	0.98030	0.98026	0.98022
ConvNeXt-Tiny	0.98767	0.98824	0.98778	0.98788

According to the findings illustrated in Table 1, DenseNet was the most accurate model, the most precise, the most

recalling, and the F1-score of all the tested DL models. This implies that it was the most effective in making predictions.

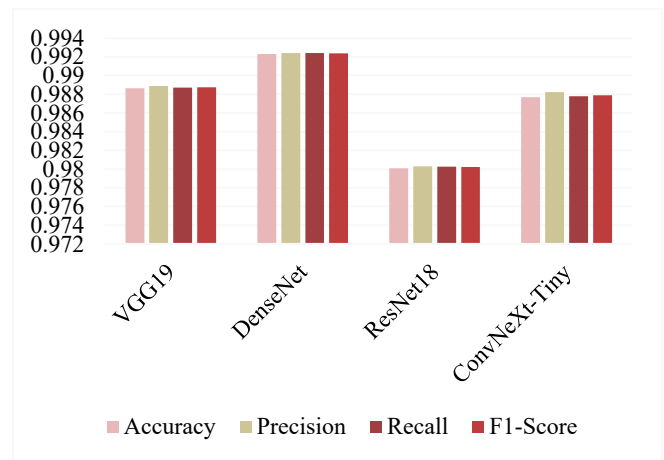


Fig.2 Comparison Graph

The tested models are compared in figure 2. It demonstrates that DenseNet achieves higher accuracy, precision, recall, and F1-score than other architectures regularly, which indicates the robustness and reliability of making predictions of this model.

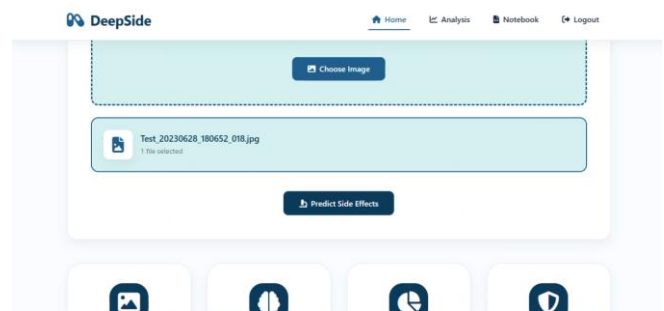


Fig.3 Upload Drug Image

Figure 3 depicts the input interface that individuals are allowed to post medical images to initiate an automated mechanism of forecasting potential drug side effects.

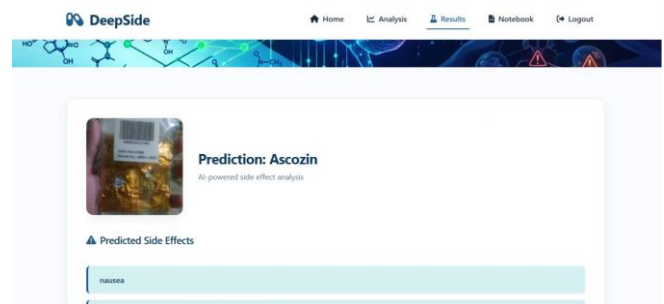


Fig.4 Predicted Results

The outcome of the prediction of the image that was uploaded is presented in Fig. 4. It identifies the drug as Ascozin and displays the potential side effects.

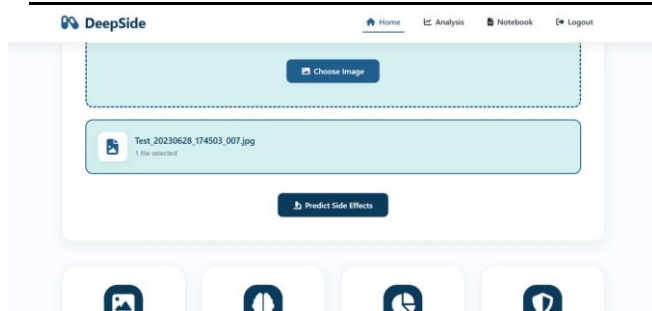


Fig.5 Upload Drug Image

Figure 5 depicts the upload interface that allows users to send images associated with drugs in terms of side effects research and it is fast.

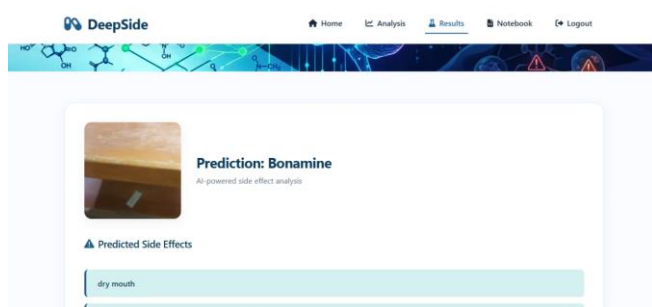


Fig.6 Predicted Results

The prediction of the picture uploaded by the system can be seen in figure 6. It indicates that the medication is Bonamine and that it has the side effects which accompany it.

## V. CONCLUSION

Poor drug reactions remain a significant issue in the current field of healthcare and we require precise and efficient methods to determine potential adverse effects in the initial stages. DeepSide is the system that has been developed to fulfill this requirement and which applies deep learning to automatically determine drug side effects on a collection of drug images. The system can produce useful visual representations of drugs using the combination of state-of-the-art CNN designs that include VGG19 with Batch Normalization, DenseNet121, ResNet18 and ConvNeXt-Tiny. To ensure that the model learning is precise, the technique utilizes structured dataset validation, transformation steps and controlled train validation splitting strategy. Model success is measured with such common measures as Accuracy, Precision, Recall, F1-Score, ROC curve analysis and confusion matrix analysis. This provides us with a complete picture of the effectiveness of the classification. The most accurate predictor of the tested architectures is denseNet121; the performance on all the measures of evaluation was approximately 99.2% and its generalization and classification reliability are good. It is equipped with predictive modeling and an application written in Flask, which assists in drug identification in terms of images, visualization of confidence scores, and molecular structure. This simplifies the system and also enables

increased user input. Altogether, DeepSide framework presents an efficient and dependable intelligent system of automatic prediction of drug side effects. This assists in improved improvement of drug safety research, making intelligent clinical decisions and its implementation in the healthcare support environment.

The DeepSide structure can be further improved in the future by performing some changes in it that will help it to become more effective in predicting drug side effects. The system can be generalized and more dependable with the inclusion of larger and diversified biomedical information to cover a broader spectrum of drug classes. The combination of more than one type of data such as chemical structures, molecular fingerprints and written drugs, can contribute to more accurate predictions. Researchers can also consider efficient architecture and optimization strategies so that they can make the model more efficient and scalable. Decisions arising out of models can also be made easier to understand by using methods in artificial intelligence which can be explained. It would be even easier to apply it to clinical decision-support tools, as this could be used in a healthcare and pharmaceutical research setting.

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