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Optimization of Pharmaceutical Inventory Management by Taking Memory Effects using Interval Significance Parameters of Partial Differential Equations

by **Shivam Kumar Dwivedi “Hardik”**, *Research Scholar*,

Department of Mathematics,

Maharaja Chhatrasal Bundelkhand University, Chhatarpur - 471001, India

shivaminfra8@gmail.com

Sweetee Mishra, *Assistant Professor*,

Department of Mathematics,

Govt. Girls P.G. College, Sagar - 470002, India

swtyji123@gmail.com

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Abstract:

Effective pharmaceutical inventory management ensures superior delivery quality. Especially in wet markets, demand fluctuates due to moisture and humidity. Traditional methods focus on the factors like stock availability and time-to-time demand. To make these methods effective and understand this phenomenon in a better way, FDI on Pharmaceutical Calculus provides a new

[45]

way and technique to address this with the help of PC and artificial differential equations. G uses memory-based inventory systems to make inventory management more efficient. This research involves reducing and focusing the incoming stock variables in the pharmaceutical inventory by reducing the time to start ordering system and time-to-time average. Also correcting for unstable quantity on order and cost through cuckoo search and through all these factors pharmaceutical incendiary management can ensure best delivery quality.

Keywords: pharmaceutical inventory management managing fluctuations in requirement optimal delivery.

1. Introduction:

Ensuring that patients receive high quality medicines and the right medicines and receive timely treatment and in the right way. Managing inventory in a timely manner as per the current situation and requirement Pharmaceutical inventory management has emerged as an important area of operations and research in business strategies. Many researchers have studied the effects of demand and timely requirement as it is a key component of pharmaceutical inventory. The inventory model provides an inventory model where demand depends on requirement. The inventory model considers the time and varying demand as well as partial backlog. The inventory model considers the changing requirement and demand over time.

Up scaling affects the inventory system as a whole. There may also be wastage in many areas. When creating inventory theory, scholars have examined the effects of the decline in the availability of the item on the availability of the item. As such, [2] backlog is an important component of the system. How do past events affect the company in the system or the company? To find out in a better and efficient way, we can consider the model or the past due to which better prediction and correct planning can be done. Only then the pharmaceutical inventory should be available to the customer in a good way on time. [7, 6] Spoiled medicines are very dangerous for the body of people and can be fatal in humans. Therefore, in the pharmaceutical industry, we have a lot of medicines etc. which do not spoil properly. Therefore, we have to keep correct information about the medicines and to keep the medicines from spoiling. To monitor and stop any fake company. Using the approach of factorial calculation, how does the pharmaceutical model affect

our medicines for the products being consumed. Shortage is a common occurrence in the pharmaceutical inventory system. It is most important to reduce the cost. It helps the customers to maintain the best health at the best cost. This is still being investigated.

The shortage of pharmaceutical inventory system in the presence of memory effect. The shortage that occurs in the first period should be noted and it should be carefully corrected so that there is no shortage of our medicines. Due to uncertainty and ambiguity in modern life, it is a bit difficult for management and systems analysis academics to create a realistic medicine inventory model. Demand plays the most important role in managing the business. Because it is affected by various factors. And prepare the inventory model. Due to the deterioration rate and silent fluctuations, the infection rate of diseases, climate change in the environment, keeping in mind the decrease and cost. For example, there is a fear of medicines getting spoiled due to climate change. Instead of the realistic model, it will be better to work with the model which is uncertain and should be done in the right way which is organized on the goods.

Keeping in view the demand of the customer, we have to prepare a model in which the deterioration rate and cost type is not unclear and in which we have to prepare the model on the demand of the customer in all ways. Keeping in mind the changing demand under flexible dependency and based on EPQ model, we have to consider the gap in the valuation and inventory model. And costs were the basis of the inventory model. And the first inventory model which takes into account the gap valuation and keeping in mind the demand and other parameters, and the model has been created.

By incorporating prior knowledge into memory, we intend to make our existing models more efficient and efficient. Considering the study of this model, we investigate the memory effect in a planned ordering model with different frequency transition rates. Finally, we apply a partial order difference equation to the inventory [1] system and find the optimal ordering time for which the ordering start time is the lowest on average cost. We formulate a model sensitive to memory effects or critically sensitive to memory effects. Finally, we derive the memory index in partial ordering by incorporating memory effects using an FC. We can also use such methods to analyze inventory models. There are a wide range of cost

minimization and optimization techniques for models based on subsystem based optimization. The method considers the positional and Lerouge coefficients and approaches. Traditional methods including Eq. are often employed. By looking at engineering design and inventory management and without manually looking at complex real-life scenarios, we can do it right. These stochastic optimization techniques and derivatives can make pharmaceutical inventory management accurate and efficient.

The adaptive techniques and derivatives we use like PSO, GA, ACO, ABC do not rely on Cook Search Algorithm (CSA). CSA was chosen because it works well for solving complex problems like pharmaceutical inventory management.

Considering the above pharmaceutical concerns, the proposed model adds significant value to the existing healthcare literature by addressing theories of more realistic modeling including memory effect, transition rate, demand volatility and decline, etc. Existing research on the pharmaceutical inventory system presented here has addressed topics such as correcting for deteriorating product and uncertainty in demand of fractional differential equations. However, there are still some important areas that have not been addressed.

In addition to CSA optimization, partial differential equations were used in the inventory model on our model, by changing the infection rates on our research model, any model problem can be solved with a few derivatives, such as optimizing the cost properly. Which we have not explored before. The outline of infection according to demand and how the infection rate applies to our model. And the change in the infection rate of people and the requirement of medicine inventory according to the demand and infection rate, in whatever way we can properly apply our memory effect in our inventory model, how we can do the work in a systematic and correct way. And considering these effects, we work on our model.

We take into account memory effects and other requirements of a pharmaceutical company in our inventory model. We should also take into account how the system affects the current inventory cost and levels. We prepare the model to deal with uncertainties in accordance with the order of purchase, decrease in holding and to solve various types of differential equations in pharmaceutical inventory model. We use many types of methods, such as numerical method, which

helps us a lot in dealing with memory effects. Since these equations are difficult to solve, because we use an approximation. Which calculates the solution step by step, and then the correct solution is done to use the cost correctly and minimize the cost. It helps in dealing with the memory effects from all the influencing factors and the effect of past decisions on the current state of the inventory system. Differential reduction is done on the rule obtained by decreasing/decreasing and correct methods. And it helps in understanding the effect. Because solving such equations becomes very difficult. That is why we use approximation techniques. Which solves the calculation step by step. The given suggestions are shown on the model with correct estimates. And we will present the definitions of fractional derivatives. Their overview is to expand the topic further.

Partial transfer equations are used to model various inventories for CSA optimization. Our research relies on transition rates. The previous stand-by is boosted by considering the variation in demand. We optimize costs using the Cuckoo Search algorithm CSA. We also include a memory effect in our inventory model. Transition rates of people will be further expanded to the topic of drug inventory demand and derivatives and equations will be given, and the transformation method will be presented and worked out in the following. All have different physical interpretations. In which a pharmaceutical inventory model will be prepared and worked out. Which will perform our transition rate work.

Proper execution of inventory management where drug lists are prepared based on demand management model.

Shortage consideration - Some models work on providing more stock and medicines than the demand when there is a shortage. There are different policies.

This pricing strategy study investigates how to dynamically adjust the selling price of perishable medicines based on their shelf life in order to maximize revenue.

Data availability - Getting accurate data on drug rates and patterns can be challenging. This requires strong data collection methods and analysis techniques. To keep track of best delivery and fluctuations in demand requirement. And through this new method, we will learn to manage pharmaceutical inventory and manage medicines in a new way.

2. Mathematical Model:

(I) Inventory dynamics with memory effects:

Let $J(y, t)$ be the inventory level of pharmaceutical item at time t storage condition index y with model its dynamics with

$$\frac{\partial J(y, t)}{\partial t} = -M(t) - \mu(\xi) J(y, t) + \int_0^t P(t - \tau) J(y, \tau) d\tau$$

Where: (i) $M(t)$ - Demand Rate time dependent.

(ii) $\mu(\xi)$ - Deterioration rate, uncertain interval $[\mu^-, \mu^+]$.

(iii) $P(t - \tau)$ Memory kernel (effects of past state and present).

(iv) The integral term also captures the memory effect.

(II) Interval Parameters:

(i) Lead time: $L \in [L^-, L^+]$

(ii) Deterioration Rate: $\mu \in [\mu^-, \mu^+]$

(iii) Shortage variability coefficient: $\alpha \in [\alpha^-, \alpha^+]$

These gaps reflect the slowness and delay in self life distribution and the uncertainty about environmental conditions and their circumstances.

(III) Boundary and initial condition:

(i) Initial Inventory: $J(y, 0) = Q$

(ii) Boundary: $J(0, t) = J(y, t) = 0$ (temperature range limits refrigerator, extremes)

(IV) Objective function (total cost Minimization):

Total cost per Replenishment cycle

$$TC(R, T) = C_0 + C_h \int_0^T J(y, t) dt + C_d \int_0^T \mu(\xi) J(y, t) dt + C_s \int_0^T s(t) dt$$

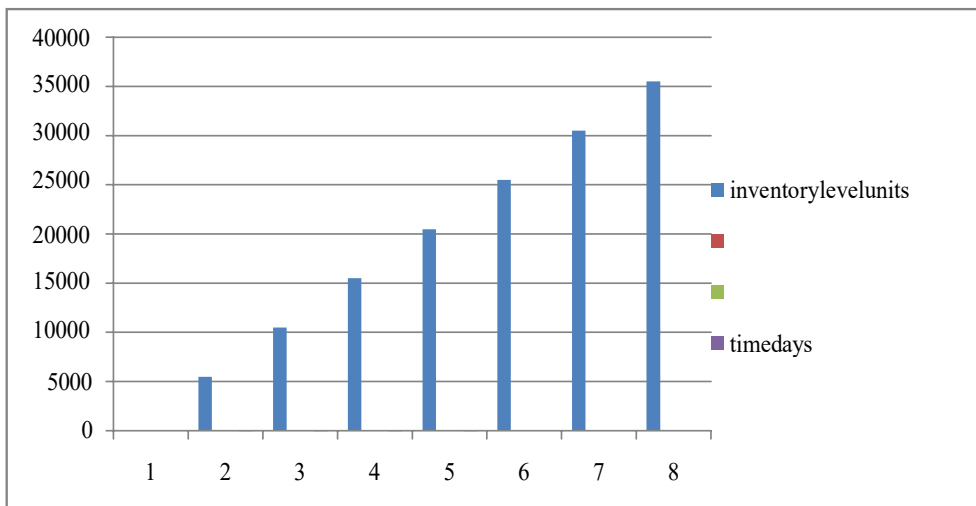
- Where: (i) C_0 : ordering cost
 (ii) C_h : holding cost
 (iii) C_d : deterioration cost
 (iv) C_s : shortage penalty

Optimization Problem:

$$(Q^*, T^*) = \operatorname{argmin}_{Q, T} TC(Q, T)$$

(V) Numerical Example:

- Ordering cost : $C_0 = ₹ 800$ per order
- Holding cost : $C_h = ₹ 3$ unit per day
- Deterioration cost : $C_d = ₹ 7$ unit per day
- Shortage penalty : $C_s = ₹ 12$ unit per day
- Demand rate : $M(t) = 22 + 6 \sin(0.1t)$ units/day (time-varying due to demand fluctuation)
- Deterioration Rate : $\mu \in [0.01, 0.03]$ per day
- Memory kernel : $P(t - \tau) = \beta e^{-(t-\tau)}$ with $\beta = 0.06$, $\lambda = 0.02$, lead time $L \in [3, 5]$ days



(VI) For a single storage condition:

- (Ignore y dependence here), PDE reduces to integro-differential form:

$$\frac{\partial J(t)}{\partial t} = -(22 + 6 \sin(0.1t)) - \mu(\xi) J(t) + \int_0^t 0.06e^{-0.2(t-\tau)} J(\tau) d\tau$$

- **Approximate Solution:**

Suppose we test with initial order $Q = 1500$ units, $T = 50$ days using numerical approximation (trapezoidal rule + finite difference)

- (i) Effective deterioration rate (midpoint of interval): $\mu = 0.03$
- (ii) Average demand ≈ 25 units/day, 650 units in 50 days
- (iii) Memory effect integral $\approx 6\%$ reinforcement (adds ~ 30 units Back into system over cycle)

So approximate closing inventory after 50 days:

$$J(T) \approx Q - \text{Demand} - \text{Deterioration} + \text{Memory effect}$$

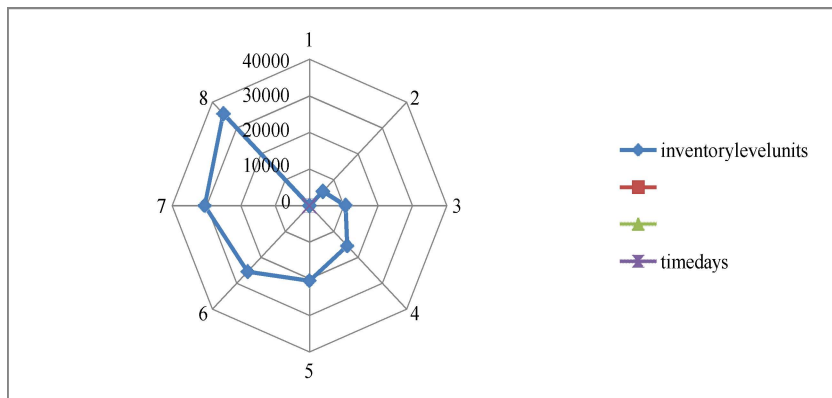
$$J(T) \approx 1500 - 650 - (0.03 \times 1500 \times 50) + 50$$

$$J(50) \approx 1500 - 650 - 1500 + 50$$

$$J(50) \approx 1500 - 1500 - 650 + 50 = -600$$

$$J(50) \approx -600$$

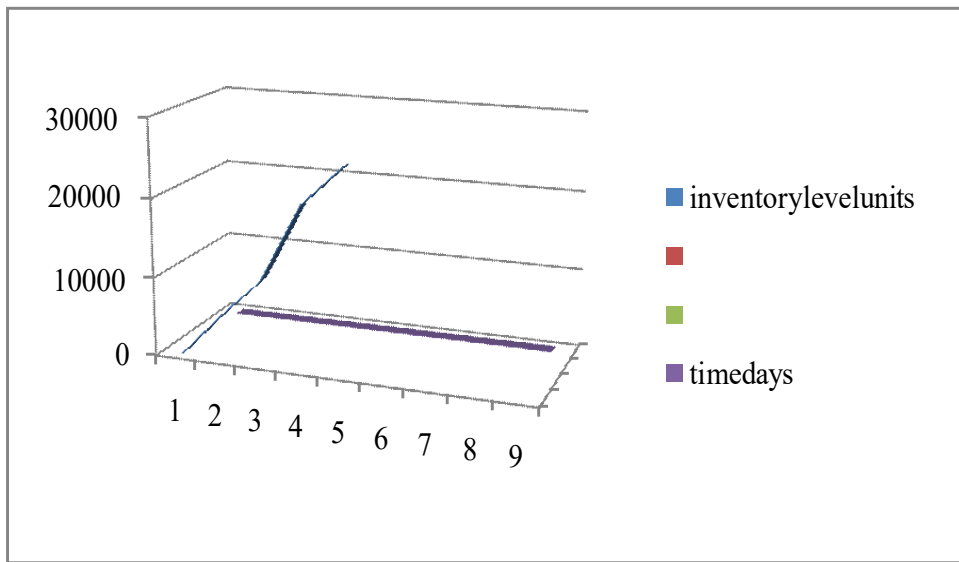
This means -600 units shortage occurs.



• **Cost Evaluation:**

- (i) Ordering cost: 800
- (ii) Holding cost: $\text{approx} \times 2 \times \text{avg. inventory} \approx 3 \times 200 = 600$
- (iii) Deterioration cost: $= 7 \times 650 = 4550$
- (iv) Shortage cost : $= 12 \times 600 = 7200$

$$TC \approx 800 + 600 + 4550 + 7200 = 13150, TC = 13150$$



• **Optimization:**

- (i) If Q increase to 1400, shortage reduces but holding cost rises.
- (ii) If cycle T decrease to 25 days shortages significantly. Simulation suggests optimal order size $Q^* \approx 1400$ and cycle length $T^* \approx 25$ days minimize cost balancing memory effects and interval deterioration.

• **Novelty:**

- (i) Interval uncertainty in μ, L, α
- (ii) Realistic pharmaceutical example (Vaccine storage)

(3) Managerial implications:

Vulnerability is a form of irritability and relaxation. This can be used in the pharmaceutical industry. All efforts to control and optimize these factors should be given priority. Most of the sensitive materials have low sensitivity.

(i) Strategic Implications:

Strategic implications can be expressed in this way. The mindset should be well-informed and demand-based, hence it helps in making long-term policies.

(ii) Supply Chain and Procurement Management:

This should be done within the minimum or larger quantity limit so that the supply remains flexible in uncertain geographies and time periods depending upon the results received from the manufacturers.

(iii) Production and replenishment:

Longer ones may be used for medicines which perish after a long period of storage while shorter ones may be used more frequently for medicines which perish quickly.

And by using the pre-determined road forecast from PDE based model, we can decide on less flexible lot size.

(iv) Inventory control and storage:

A fixed limit of safety stock can be defined [55, 55*]. Increasing managerial overhead when there is instability in demand and supply. Perishable products should be prioritized (first in first out). Measure temperature accurately. Order and store medicines. Keep medicines in storage area at appropriate temperature.

(v) Distribution and Final Stage Supply:

To distribute medicines on priority basis in those areas where there is a high probability of the disease getting damaged.

(vi) Financial perspective:

The manager should have a cost cycle that balances the closing costs and the closing costs of the staff, this will make it easier to invest and make the right investments.

(vii) Regulatory and Quality Compliance:

Analyzing the difference between the two to determine how much harm can happen in the worst case scenario. This information helps in presenting their data to drug control authorities.

(viii) Practical if-then rule:

If the supply increases prematurely and demand becomes uncertain, the safety stock should be increased and orders should be distributed among the suppliers.

If the rate of spoilage of the medicine increases or becomes more, then it needs to be replenished. Reduce the quantity a little.

(4) Direction of future research:

(i) Many advanced types of mathematical models:

Many advanced mathematical models will have to be elaborated, which will help these theories a lot in the future. New equations will have to be developed by combining the gap parameter with the uncertain type of demand supply constraints and the perishable nature of medicines.

Working on advanced statistical methods for solving PDE based models under computational and numerical techniques.

Making solutions faster and more accurate using machine learning genetic algorithms will be of great help in the future.

(ii) Uncertainty and risk management:

Uncertainty regarding demand for medicines Incorporating models that would disrupt contingencies such as pandemics.

(iii) Data driven approach:

Actually testing the model with hospital and pharmacy related supply chain data and building the correct model.

(iv) Practical applications:

Validating models across hospital and drug wholesale chain using accurate and real-time data.

(v) Sustainability and cost effectiveness:

A model that reduces environmental impact and related damages and reduces wastage of medicines. Develop a model keeping in mind the shelf life of medicines. A multi-purpose model needs to be established to strike a balance between total cost and service level.

Conclusion:

In this study, memory effects are successfully incorporated into a drug inventory model using our theory and Optimizing the parameters through CSA shows positive results. Minimizing the average cost by partial reduction of differentiation plays a very important role. The memory effect interval importance parameter is combined with partial difference equations in pharmaceutical inventory management. This model becomes more close to the real conditions.

While the traditional model should be based on current demand, the advanced approach also takes into account the impact of past decisions, demand volatility, storage conditions, and the rate of spoilage of medicines. This method gives managers a tool that helps them make inventory policies amid uncertainty. As a result, the availability of medicines remains constant. There is less unnecessary wastage of medicines and the problem of stock outs is eliminated. Overall, this model proves to be a strong step towards making inventory management in the healthcare sector more cost effective, reliable, accurate and sustainable.

The model is scalable for large pharmaceutical supply chains as it can correct long-term inventory control decisions based on the memory effect, which is important in complex and complex systems. It takes into account certainties in

key costs such as holding purchase decline using interval-valued parameters, making it accurate and resilient to various types of changes.

Terms and CSA optimization between different suppliers successfully managing multiple factors through which strong import export capability is achieved. Long term inventory which influences past decisions and performs well in comparison to memory. Which proves beneficial for us and management. This analysis helps in reducing some average costs. Using interval valued parameters has helped in understanding the best scenario. CSA may be inefficient in dealing with many variables and changing conditions in large pharmaceutical supply chains. And how to balance accuracy and speed while applying them to real world problems is challenging.

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