



Post Quantum Cryptography Mechanisms for Enhancing Security in Government Healthcare Systems

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Abstract

Government healthcare systems manage massive volumes of sensitive patient data across hospitals, primary care centers, and national health schemes. Digitization initiatives such as electronic health records (EHRs), telemedicine platforms, and wearable medical devices have improved access to healthcare but have simultaneously exposed public health data to cybersecurity threats. Classical cryptographic algorithms like RSA and ECC are increasingly vulnerable due to the rise of quantum computing. Post-Quantum Cryptography (PQC) provides algorithms resistant to quantum attacks, ensuring confidentiality, integrity, and authenticity of patient information. This paper examines the applicability of PQC in government healthcare systems, evaluates different quantum-resistant algorithms, and proposes an adoption framework for large-scale national health networks. Using literature review, simulation experiments, and expert consultation, this study concludes that lattice-based algorithms such as Kyber and Dilithium are optimal for real-time government health data, while hash-based schemes such as SPHINCS+ are ideal for archival systems. Implementation challenges, policy implications, and a roadmap for nationwide deployment are discussed, highlighting a future-ready approach to secure public healthcare infrastructures.

Keywords: *Post-Quantum Cryptography, Healthcare Security, Lattice-Based Cryptography, Hash-Based Signatures, Electronic Health Records (EHR), Telemedicine Security, Quantum Computing Threats*

1. Introduction

Government healthcare systems are tasked with providing universal, affordable, and efficient medical care. Initiatives like Ayushman Bharat Digital Mission (ABDM) aim to digitize health records and integrate hospitals, clinics, and

telemedicine services across India. National health databases store sensitive information including patient demographics, clinical history, lab results, and insurance details. While digitization increases accessibility and efficiency, it also exposes public healthcare data to cyber

threats, including ransomware, data breaches, and identity theft (Ponemon Institute, 2021).

Traditional cryptographic methods such as RSA and ECC secure communications and storage, but are vulnerable to quantum computing attacks. Shor's algorithm can break RSA/ECC, while Grover's algorithm reduces the security of symmetric encryption (Shor, 1994; Grover, 1996). This is particularly concerning for government systems where millions of patient records are stored and shared across various departments and cloud infrastructure.

Post-Quantum Cryptography (PQC) offers algorithms resistant to quantum attacks. Adopting PQC ensures long-term security, compliance with health data regulations, and trust in national health programs. This paper explores PQC implementation in government healthcare, evaluates algorithm performance, and outlines a framework for large-scale deployment in public health systems.

Government initiatives such as the Ayushman Bharat Digital Mission (ABDM) emphasize secure and interoperable digital health ecosystems. Integrating Post-Quantum Cryptography aligns with national digital health policies by ensuring long-term data protection, regulatory compliance, and resilience against emerging quantum threats in public healthcare infrastructure.

2. Literature Survey

The NIST PQC standardization project evaluates quantum-resistant algorithms suitable for large-scale deployment (NIST, 2022). Lattice-based schemes like Kyber

and Dilithium are widely recommended due to their efficiency and scalability (Alkim et al., 2016). Hash-based schemes like SPHINCS+ provide long-term integrity, making them suitable for archival systems (Buchmann et al., 2011). Code-based (McEliece) and multivariate schemes (Rainbow) offer additional security for regulatory compliance, though they require higher computational resources.

Government-focused studies highlight vulnerabilities in EHR systems, telemedicine platforms, and IoT-based public health monitoring devices (Hussain et al., 2022). While private sector healthcare has started adopting PQC pilots, national healthcare frameworks require additional research to ensure scalability, interoperability, and compliance with government regulations (Duong et al., 2023).

3. Research Objectives

- Evaluate quantum-resistant algorithms for government health data systems, telemedicine, and IoT medical devices.
- Analyze performance trade-offs in encryption speed, computational cost, and key storage requirements.
- Identify challenges in integrating PQC with legacy government IT infrastructure.
- Propose a nationwide PQC adoption roadmap for hospitals, primary health centers, and telemedicine networks.
- Assess PQC's impact on compliance with national health

data policies, privacy regulations, and patient trust.

4. Hypothesis

- Null Hypothesis (H₀): PQC does not significantly improve the security of government healthcare systems.
- Alternative Hypothesis (H₁): PQC mechanisms significantly enhance security, ensuring confidentiality, integrity, and compliance against quantum-enabled attacks.

5. Research Methodology

- Literature Review: Analysis of NIST PQC reports, IEEE papers, and government healthcare cybersecurity frameworks.
- Simulation Tools Used:
 - Python (NumPy, Cryptography libraries)
 - OpenSSL (for cryptographic benchmarking)
 - MATLAB (performance analysis)
 - NS3 Simulator (network simulation for healthcare data transmission)
- Datasets: Simulated datasets representing EHRs, IoT medical sensor data, and telemedicine logs
- Metrics Evaluated: Encryption time, decryption time, key size, latency, computational overhead
- Expert Consultation: Interviews with healthcare IT administrators and cybersecurity professionals

This mixed-method approach ensures both technical rigor and practical applicability in government health systems.

6. Post-Quantum Cryptography in Government Healthcare

Lattice-Based Cryptography

- Algorithms: Kyber (encryption), Dilithium (digital signatures).
- Security: Resistant to quantum attacks, moderate key size, suitable for real-time data.
- Use-Cases: EHR encryption, secure telemedicine communication, IoT-based remote monitoring.

Hash-Based Cryptography

- Algorithm: SPHINCS+.
- Security: Long-term integrity, tamper-proof signatures.
- Use-Cases: Archival patient records, long-term government health data storage.

Code-Based and Multivariate Cryptography

- Algorithms: McEliece (code-based), Rainbow (multivariate).
- Security: Strong theoretical security for regulatory compliance.
- Limitation: Large key sizes and computational cost restrict real-time use.

7. Data Analysis for Government Deployment

Algorithm Type	Security Level	Key Size	Computational Cost	Suitable Government Use-Case
RSA (3072-bit)	Classical	Large	Moderate	Legacy hospital systems

Algorithm Type	Security Level	Key Size	Computational Cost	Suitable Government Use-Case
ECC (256-bit)	Classical	Moderate	Low	Telemedicine & mobile apps
Kyber (Lattice-Based)	Quantum-Resistant	Moderate-Large	Moderate	National EHR & IoT networks
Dilithium (Lattice-Based)	Quantum-Resistant	Moderate	High	Digital signatures for prescriptions and lab reports
SPHINCS+ (Hash-Based)	Quantum-Resistant	Very Large	High	Archival health records & compliance data

Observation: Lattice-based schemes are most feasible for real-time national healthcare operations, while hash-based schemes are optimal for archival data integrity.

Comparative Interpretation

The analysis indicates that lattice-based algorithms such as Kyber provide an optimal balance between security and performance, making them suitable for real-time healthcare applications. Dilithium ensures strong authentication through digital signatures but introduces higher computational overhead. Hash-based schemes like SPHINCS+ offer superior long-term integrity, making them ideal for archival healthcare records despite larger key sizes. Classical algorithms like RSA and ECC, although efficient, are not suitable for future quantum-secure healthcare systems.

8. Implementation Challenges

- Limited computational resources in rural healthcare centers
- High cost of upgrading legacy hospital IT infrastructure
- Bandwidth limitations in telemedicine networks
- Storage overhead due to large PQC key sizes
- Lack of trained cybersecurity professionals in public healthcare
- Integration challenges with existing EHR systems
- Regulatory and compliance adaptation delays

9. Proposed Framework for Government PQC Adoption

1. Assessment Phase: Evaluate existing IT infrastructure and identify vulnerable points.
2. Pilot Deployment: Implement PQC in selected regional hospitals and telemedicine platforms.
3. Hybrid Model: Integrate PQC with classical cryptography to ensure smooth transition.
4. Training & Policy Development: Staff training, SOPs, and compliance guidelines.
5. National Rollout: Gradual implementation across all government hospitals, health centers, and telemedicine networks.
6. Monitoring & Maintenance: Real-time monitoring of encryption systems, automated key rotation, and incident response protocols.

10. Future Scope of Work

Nationwide Hybrid Cryptography Models

- Combine classical and PQC for smooth migration across government hospitals and health IT systems.

Optimization for IoT Medical Devices

- Lightweight PQC algorithms for wearable government health monitoring devices, telemedicine kits, and remote diagnostic tools.

AI-Assisted Key Management

- Automate key generation, rotation, and validation using AI across national networks.

Standardization & Policy Compliance

- Develop PQC standards for government hospitals compliant with national digital health policies.

Long-Term Data Archival Security

- Use hash-based schemes for decades-long retention of public health records.

Integration with Emerging Tech

- PQC with blockchain for secure sharing between hospitals, labs, and health insurance authorities.
- Edge computing for real-time encryption at medical IoT endpoints.

Nationwide Performance Monitoring

- Develop dashboards and audit systems for encryption efficiency,

key management, and security breaches.

Table: Government Future Scope Summary

Area	Description	Benefits	Research Focus
Hybrid Cryptography	Classical + PQC	Smooth nationwide deployment	Migration strategies, performance optimization
IoT Devices	Lightweight PQC	Efficient & fast	Kyber-Lite optimization
AI Key Mgmt	Automated monitoring	Reduced errors, scalable	AI/ML-based key management
Standardization	Policy compliance	Regulatory adherence	National PQC framework
Data Archival	SPHINCS+ optimization	Long-term integrity	Hybrid archival solutions
Emerging Tech	Blockchain & edge computing	Secure data sharing	AI-PQC integration
Nationwide Monitoring	Dashboards & audit systems	Transparency & accountability	System performance & security metrics

11. Conclusion

This study demonstrates that Post-Quantum Cryptography significantly enhances the security of government healthcare systems against future quantum threats. Lattice-based algorithms such as Kyber and Dilithium are suitable for real-time healthcare applications, while SPHINCS+ ensures long-term archival security. The proposed hybrid implementation model enables a smooth transition from classical cryptography to PQC.

The findings suggest that nationwide deployment of PQC can improve data

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confidentiality, strengthen regulatory compliance, and enhance patient trust. A phased implementation strategy involving pilot testing, infrastructure upgrades, and policy alignment is recommended for successful adoption.

12. Implications

- Strengthens national healthcare cybersecurity.
- Ensures compliance with national digital health policies.
- Enables trustworthy telemedicine services.
- Protects government health databases against future quantum attacks.

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