



Artificial Intelligence and medical specialties: support or substitution?

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Abstract

The rapid advancement of artificial intelligence (AI) in healthcare has spurred extensive debate regarding its potential to replace human expertise across various medical specialties. This narrative review critically examines the integration of AI within diverse medical specialties to discern its role as a substitute or supporter. The analysis encompasses AI's impact on diagnostic precision, treatment planning, and patient care. Although AI systems have demonstrated remarkable proficiency in tasks reliant on data analysis and pattern recognition, they fall short in areas necessitating nuanced decision-making, empathetic communication, and the application of human medical expertise in diagnosis and treatment planning. The rapid evolution of AI applications within medical specialties is propelled by the swift advancements in both hardware and software technologies, fostering a dynamic synergy that continues to redefine the boundaries of precision and efficiency in healthcare delivery. While AI demonstrates remarkable capabilities in automating tasks, it is underscored that its integration in complex domains necessitates a balanced approach that preserves the indispensable contributions of human activity.

Keywords: artificial intelligence, medical specialties, machine learning, healthcare systems

Introduction

The healthcare landscape is in a complex transformation driven by the relentless advancement of artificial intelligence (AI) and machine learning technologies [1]. These innovations have ushered in an era of unprecedented data processing and diagnostic capabilities, promising more efficient and accurate healthcare delivery [2,3]. Yet, as AI continues to evolve, it prompts us to ponder a fundamental question: Are all medical specialties replaceable by artificial intelligence-powered robots?

Artificial intelligence is defined as the scientific study of replicating human cognitive capacities within computing systems. This includes activities like learning, reasoning, problem-solving, and decision-making

using algorithms and statistical models [4]. These algorithms frequently use artificial neural networks, which are inspired by the structure and function of the human brain and allow machines to uncover patterns and correlations from large volumes of data. This allows them to adapt to new situations, generalize knowledge, and make autonomous decisions [2,3].

Medicine has been a quintessentially human endeavor characterized by applying knowledge, empathy, and creativity to diagnose and treat diverse medical conditions for centuries [5]. Medical professionals, from primary care physicians to specialists, have honed their expertise through years of training and experience and have been revered for their ability to adapt their skills to unique patient cases [6].

However, the emergence of AI challenges this paradigm with its ability to analyze massive datasets, rapidly identify patterns and provide diagnostic insights that often surpass human capabilities [6,7]. They can assist in treatment planning, automate administrative tasks, and enhance the overall efficiency of healthcare delivery [8]. But can AI truly replace the creative and nuanced aspects of medical practice that have long been considered the purview of human clinicians?

Artificial neural networks are developing at a rapid pace, and this development will influence many different medical specializations as technology and software continue to grow. This phenomenon may be explained by the confluence of two major paradigms: medical informatics, a subject concerned with using digital tools for healthcare, and deep learning, which makes use of complex neural networks that mimic the structure of the human brain [9]. The quick development of computer-aided diagnostic software is facilitated by this convergence, which makes it possible to analyze enormous medical datasets such as genetic data, electronic health records, and medical imaging. As a result, we should anticipate a paradigm change in medical diagnosis, marked by higher automation, better accuracy, and customized treatment regimens, which will radically change the way healthcare is delivered throughout all healthcare specializations [10].

This narrative review delves into the evolving role of AI in healthcare and examines the extent to which medical specialties, traditionally reliant on human medical expertise, are susceptible to AI-driven disruption. We will explore the capabilities of AI in various medical domains, from psychiatry to critical care, and assess the potential of these technologies to replicate or augment human medical expertise. We will also consider the ethical, practical, and societal implications of this AI-driven transformation, seeking a balanced perspective on the future of healthcare.

As we embark on this exploration, it becomes apparent that the interplay between AI and medical specialties is not a dichotomy of replacement or preservation but rather a complex evolution. By critically examining this interplay, we aim to shed light on the transformative potential of AI in medicine while highlighting the enduring value of human medical expertise in the healthcare ecosystem.

Present

The integration of AI into medicine marks a transformative era in healthcare. Applications of AI are making an impact across multiple domains, enhancing patient care, diagnostics, and the overall delivery of healthcare services [5-12].

A standout application of AI in medicine lies in the realm of medical imaging. Algorithms that are generated by AI can accurately analyze medical images such as ultrasonography images, X-rays, MRIs, and CT scans [13-17]. These algorithms excel human experts

at detecting abnormalities, tumors, fractures, and other conditions, frequently outperforming human capabilities in speed and accuracy. Radiologists and clinicians can benefit from AI-powered tools that enhance their ability to make faster and more precise diagnoses [18,19]. Beyond medical imaging, AI is also proving its worth in pathology. Pathologists can utilize AI algorithms to assist in analyzing histopathological slides, helping detect cancerous cells and tissue abnormalities [20,21].

Furthermore, AI plays a crucial role in the realm of personalized medicine by identifying the most effective treatment options and predicting potential adverse medication reactions by analyzing a patient's genetic data and medical history [22]. This enables clinicians to tailor treatments to individual patients, optimizing outcomes while minimizing risks. Also, AI aids in drug discovery and development by analyzing vast datasets to identify potential drug candidates and predict their safety and efficacy. This accelerates the drug development process and promises to bring new treatments to the market more quickly [23,24].

Moreover, AI is reshaping healthcare operations and administration. Chatbots and virtual assistants are employed for appointment scheduling, patient queries, billing, streamlining administrative tasks, and improving patient experience [25-30]. Predictive AI-driven analytics assist hospitals in managing resources efficiently, predicting patient admissions, and even preventing readmissions. Additionally, AI has made significant strides in disease monitoring and management [31-36].

Machine learning algorithms, trained on vast datasets of medical images and patient records, demonstrate remarkable accuracy in tasks like tumor detection, pneumonia identification, and early-stage diagnosis of neurological disorders. These algorithms act as intelligent assistants to clinicians, analyzing patient data and medical literature to suggest evidence-based treatment options and flag potential risks [26,27]. This real-time assistance empowers doctors with informed decision-making, even in complex cases. Additionally, AI-driven chatbots offer patients 24/7 access to health information and preliminary symptom assessment, potentially alleviating pressure on healthcare systems. Furthermore, AI is revolutionizing drug discovery and development by analyzing the immense volume of data with unprecedented speed and accuracy. This translates to quicker identification of novel drug targets, optimized design of potential molecules, and predicted efficacy and safety profiles, ultimately accelerating the journey of life-saving medications to patients [29]. While ethical considerations regarding data privacy, potential biases in algorithms, and the need for transparent and explainable AI models remain paramount, the current potential of AI in diagnostics and clinical support shows a promising picture for a future of personalized, data-driven, and efficient healthcare for all [32].

These examples illustrate the breadth of AI

applications available in medicine today. While AI is undoubtedly transforming healthcare, it's essential to recognize that its integration should be approached carefully, considering ethical, regulatory, and data privacy concerns to ensure that the benefits of AI in medicine are realized responsibly and inclusively [30].

Managing complex healthcare situations

One significant advantage of AI and robots is their ability to deliver precision and consistency in caregiving. For patients with severe dementia, these technologies can provide unwavering reminders for medication schedules, mealtimes, and daily activities [25-32]. This reduces the strain on caregivers and ensures that patients receive reliable care. Additionally, AI-driven robots can assist with mobility and rehabilitation, reducing the burden on healthcare providers and ensuring consistent care for patients recovering from surgery or with limited mobility. These technologies also provide emotional support to patients, particularly those with severe dementia who require companionship. Robots powered by AI can engage in conversation, play soothing music, or display comforting visuals, contributing to patients' overall well-being [25-32].

In situations involving contagious diseases, round-the-clock availability is crucial. Robots operated by AI can operate without breaks, guaranteeing continuous monitoring and care for patients. This minimizes the risk of exposure to healthcare workers, ultimately helping to contain the spread of infectious diseases. Another key benefit is the reduction in human contact. In scenarios where limiting physical interaction is vital, robots equipped with AI can perform tasks like delivering medication, monitoring vital signs, and offering emotional support. This reduces the necessity for direct human involvement, safeguarding patients, and healthcare providers [20-30].

Furthermore, AI's ability to create personalized treatment plans based on patient data is a significant advantage. Patients with complex health conditions, multiple comorbidities, or severe dementia can receive tailored care plans that enhance their overall well-being and outcomes [25,26].

Enhancing efficiency in healthcare

In healthcare settings, efficiency is paramount. Robots can streamline tasks such as drug dispensing, laboratory testing, and sample analysis, allowing healthcare professionals to focus on more critical aspects of patient care [2,3]. In response to patient dissatisfaction stemming from limited physician consultation time, the integration of AI into healthcare systems holds significant promise for resolution [1]. Technologies operated by AI have substantial potential to address the limited physician-patient consultation time challenge. Through data-driven optimization, predictive analytics, NLP, and virtual

assistants, AI will enhance the efficiency and effectiveness of healthcare consultations, ultimately leading to increased patient satisfaction and improved healthcare outcomes [4].

Data analysis and predictive capabilities, both executed with AI, are also instrumental in managing complex healthcare situations [1]. It can analyze extensive patient data to identify patterns, track disease progression, and predict outbreaks. This information enables healthcare professionals to make informed decisions, allocate resources effectively, and respond promptly to emerging healthcare challenges [4]. Systems operated by AI will efficiently process vast troves of patient data, including electronic health records and medical literature, ensuring that physicians can access comprehensive information promptly. Moreover, predictive algorithms will assist physicians in identifying patient needs, allowing them to prioritize tasks effectively and address critical issues promptly [4].

Improving communication in medicine

Natural language processing (NLP) techniques enable AI to extract and summarize complex medical information from various sources [1,2]. This allows for more effective and comprehensible communication between physicians and patients, ensuring that patients are well-informed about their treatment options. NLP capabilities will further enhance communication during consultations and will facilitate the transcription and summarization of conversations, guaranteeing that consultations are more focused and productive [3-5].

Patients' disappointment with limited information about new therapies within physicians' knowledge presents a pressing concern in healthcare. Integrating AI into medical practice offers a promising avenue for addressing this issue [4,5]. Intelligent systems can continuously and rapidly sift through vast volumes of medical literature, research studies, and clinical trials, distilling the most up-to-date and relevant information about new therapies [1,3]. Machine learning algorithms can identify emerging treatment options, potential side effects, and patient-specific recommendations based on a patient's medical history and genetic profile [6].

Moreover, AI-powered decision support systems can assist physicians in staying current with the latest advancements in medical science. These systems can provide real-time alerts and recommendations based on new research findings and treatment guidelines, helping physicians make informed decisions about therapy selection and patient care [4-6]. By leveraging its data processing, NLP, and decision support capabilities, AI can empower both healthcare providers and patients with timely, accurate, and accessible information, ultimately improving patient satisfaction and the quality of healthcare delivery [6-10].

Artificial Intelligence and access to healthcare

Telemedicine, powered by AI, allows healthcare providers to conduct remote consultations, providing a convenient alternative to in-person visits. This is especially valuable in cases involving contagious diseases, as it minimizes physical contact and lowers the risk of transmission [17]. Patients in remote or underserved areas can also benefit from access to healthcare through telemedicine. This can help distribute the patient load more evenly across healthcare providers and reduce the pressure on physical consultation time [10].

The financial barriers to healthcare access, including the lack of money or health insurance, remain significant challenges in many parts of the world, particularly in low-income regions like Africa and other countries affected by war or extreme poverty [1]. Intelligent models can play a transformative role in addressing these issues by improving healthcare efficiency, reducing costs, and expanding access to medical services [2].

Firstly, AI can enhance the efficiency of healthcare delivery, making it more cost-effective. Predictive AI-driven analytics can help optimize resource allocation, reduce waste, and improve healthcare facilities and personnel utilization [1-5]. This can lead to cost savings that benefit both patients and healthcare systems.

Additionally, AI-powered telemedicine and mobile health applications can extend healthcare access to remote and underserved areas. Patients in these regions can consult with healthcare providers virtually, reducing the need for expensive and time-consuming travel. AI can support remote diagnosis and monitoring, providing timely interventions and reducing the burden on already strained healthcare infrastructures [1-5].

Furthermore, AI can enable the development of low-cost medical devices and diagnostics. Intelligent algorithms can enhance the accuracy and affordability of diagnostic tests, making them more accessible to patients in economically challenged areas. For instance, AI-powered smartphone apps can help screen for diseases, reducing the need for expensive laboratory tests and specialized equipment [11].

Cognitive technology can also facilitate medical education and training, essential for building healthcare capacity in underserved regions. Online courses, virtual simulations, and AI-driven educational platforms can help train healthcare professionals, allowing them to deliver high-quality care even in resource-constrained environments [12].

The automation of medical specialties presents a complex and multifaceted challenge within the realm of AI and healthcare technology [17]. Medical specialties characterized by routine and data-driven tasks are most susceptible to replacement by AI. Radiology, for example,

relies heavily on image analysis, making it amenable to AI's precise diagnostic capabilities. Pathology, ophthalmology, and dermatology also involve image analysis and pattern recognition, making AI a valuable assistant [1, 2, 4, 17]. While significant strides have been made in automating various aspects of medical practice, certain specialties remain notably resistant to full automation due to their inherent complexity and the nuanced nature of human-patient interactions. These specialties primarily include psychiatry, pediatrics, internal medicine, emergency medicine, intensive care medicine, and surgery.

Psychiatry

This field revolves around the intricacies of human emotions, behavior, and cognitive processes, making it highly reliant on the nuanced understanding of patients' experiences. Psychiatric assessments require empathetic engagement, active listening, and the ability to establish rapport with individuals struggling with mental health issues [33]. These interpersonal skills and the capacity to interpret non-verbal cues and subtle mood changes are inherently human and central to effective psychiatric care [33].

Diagnosing mental health conditions involves not only the consideration of symptomatology but also a deep exploration of a patient's life history, trauma, social context, and personal values. This holistic approach requires empathy and cultural sensitivity, qualities that are challenging to automate. Moreover, treating mental health disorders often involves psychotherapeutic interventions that rely heavily on the therapeutic alliance between the psychiatrist and the patient [33].

Psychiatrists also frequently encounter situations where ethical and moral considerations, such as involuntary hospitalization or decisions regarding capacity and consent, play a crucial role. These complex ethical dilemmas necessitate a nuanced and context-specific approach that is best addressed by human clinicians. The psychiatric field acknowledges the therapeutic relationship's impact on patient outcomes, underscoring the importance of human presence and understanding in mental healthcare [33].

Psychiatry's unique focus on human emotions, behavior, and therapeutic relationships makes it a medical specialty inherently resistant to full automation. While AI can be a valuable tool in aiding psychiatric assessments and treatment planning, the complexity of mental health conditions and the need for empathy, cultural competence, and ethical judgment ensure that human psychiatrists remain indispensable in providing compassionate and effective mental healthcare [33-36].

Psychiatrists require diverse creativity skills to address mental health disorders' complex and multifaceted nature effectively. These abilities in psychiatry encompass divergent thinking, innovative treatment planning,

cultural competence, and ethical reasoning. Also, the mentioned proficiencies enable psychiatrists to provide individualized, effective, and empathetic tailored care to patients with diverse and often intricate mental health needs [34,35].

Firstly, they must employ divergent thinking to generate a wide range of potential diagnostic hypotheses and treatment strategies when faced with the heterogeneous and often atypical presentations of psychiatric conditions. This requires viewing a patient's symptoms from various perspectives and considering less conventional explanations. Furthermore, psychiatrists often encounter patients with complex ethical dilemmas, requiring creative, moral reasoning and problem-solving to navigate issues related to autonomy, confidentiality, and the well-being of patients and others [35,36].

Additionally, creativity in psychiatry extends to treatment planning, as psychiatrists often need to tailor interventions to individual patients' needs. This demands the capacity for innovative therapeutic approaches, such as integrating novel psychotherapeutic techniques or exploring emerging pharmacological options [33-36].

Emotion recognition technology in healthcare offers diverse applications, including monitoring the emotional states of patients in mental health treatment, aiding in disease diagnosis and monitoring treatment effectiveness through facial expressions, improving patient communication by assisting healthcare providers in interpreting emotional states, facilitating clinical research by detecting and tracking emotional changes in participants, and enhancing the customer experience in healthcare settings by addressing negative emotions in real-time [33-36].

The potential role of intelligent agents in psychiatry holds promise for revolutionizing mental health care delivery. These software entities, designed to simulate human intelligence, can be programmed with AI techniques like machine learning, natural language processing, and computer vision [37]. In the realm of psychiatry, intelligent agents could serve as virtual mental health assistants, gathering patient information, analyzing data related to emotional states, and making decisions based on their analysis. They can adapt to changing conditions, learn from patient data, and continually improve their performance over time [37]. Such agents could enhance diagnostic processes, aid in treatment planning, and provide ongoing monitoring of mental health conditions, offering a dynamic and personalized approach to psychiatric care. Additionally, they may contribute to therapeutic interventions by simulating empathetic interactions and providing timely support. The potential applications of intelligent agents in psychiatry align with their diverse roles across various domains, suggesting a transformative impact on mental health care practices.

Moreover, psychiatrists must creatively adapt their

communication styles and therapeutic interventions to connect with patients from diverse cultural backgrounds and varying levels of insight. This cultural competence and adaptability in therapeutic approaches are essential components of creativity in psychiatric practice [33,34].

In the realm of practical mental health applications, AI is revolutionizing psychiatry through online platforms. Chatbots equipped with natural language processing offer real-time support, delivering empathetic responses and evidence-based coping strategies. Mobile apps employ AI algorithms to track mood patterns, providing users with personalized insights and suggesting interventions for improved emotional well-being. These innovations signify a promising shift towards accessible and user-friendly mental health tools [37].

Pediatrics

Because this specialized discipline focuses on providing children with complete care and it necessitates a deep comprehension of their emotional and social requirements, effective diagnosis and treatment are built on this human connection, especially with young patients who may find it difficult to express their concerns [37-40]. Making holistic decisions and deciphering non-verbal signs are crucial abilities in this situation.

Tracking developmental milestones encompasses evaluating physical, cognitive, emotional, and social growth. This demands a nuanced comprehension of child development that surpasses the current capabilities of AI systems [37-40]. Effective communication with both the child and their family stands as a cornerstone of pediatric practice, requiring adeptness in addressing parental concerns and offering guidance on parenting and child health.

Pediatricians are frequently confronted with unique and typical cases that do not neatly correspond with traditional diagnostic criteria. Their capacity to apply knowledge to specific situations is crucial. Pediatricians advocate for children's health beyond only treating them, educating parents on preventative care, and promoting healthy lifestyles. This responsibility calls for a degree of community involvement and education outside the purview of AI [37-40].

In the domain of pediatric care, AI applications are reshaping the landscape through user-friendly online platforms. Interactive chatbots, employing natural language processing, engage with young patients, providing immediate support and age-appropriate guidance [37-40]. Mobile applications equipped with AI algorithms enable parents to monitor developmental milestones, offering personalized insights and timely interventions. These innovative tools signify a promising frontier in pediatric healthcare, enhancing accessibility and responsiveness to the unique needs of children [37-40].

Emergency medicine

Emergency physicians must make quick and critical decisions based on limited information. This requires the ability to rapidly prioritize and respond to patients' needs, considering the severity of their conditions. While AI can assist with data analysis and decision support, it may struggle to match the speed and adaptability of human clinicians. Patients presenting to the emergency department can have a wide range of medical conditions, from minor injuries to life-threatening emergencies. Diagnosing and managing these diverse cases often requires a broad knowledge base and the ability to adapt to unexpected situations, which is challenging to automate comprehensively [41-43]. Effective communication and collaboration with healthcare teams are paramount in emergency medicine. Physicians must convey critical information clearly and work seamlessly with nurses, paramedics, and other specialists. The human element in teamwork and communication is challenging to replace with AI [41-43]. The emergency department is a dynamic and unpredictable environment where priorities can shift rapidly. Human clinicians excel in adapting to changing circumstances and making split-second decisions, qualities that are difficult for AI systems to replicate fully.

Although AI can provide valuable support in data analysis and decision aids, the human expertise and agility required in emergency medicine make it a specialty unlikely to be fully automated in the foreseeable future. Intelligent systems can augment the capabilities of emergency physicians but are not a substitute for their clinical judgment and experience [41-43].

Emergency medicine physicians require unique creativity skills due to their field's dynamic and high-stress nature. One crucial creativity skill is thinking rapidly and adapting to unpredictable situations. In the chaotic environment of the emergency department, physicians must creatively prioritize patient care, often making critical decisions in real-time. Problem-solving skills are also paramount [41]. Emergency medicine physicians must creatively diagnose a wide range of conditions based on limited information, considering a broad differential diagnosis to ensure that life-threatening conditions are not overlooked. Effective communication is another essential creativity skill in this field. Physicians must convey complex medical information to patients and their families under stressful circumstances, demonstrating empathy and maintaining clear and reassuring communication [43].

Additionally, emergency medicine physicians often face ethical dilemmas, such as deciding on appropriate levels of care or addressing issues of consent and confidentiality. Creative, ethical reasoning is essential to ethically sound decisions in rapidly evolving situations [41-43].

Lastly, working collaboratively and creatively within a multidisciplinary team is crucial in the emergency department, as physicians must coordinate care with nurses, paramedics, and other specialists to ensure the

best possible patient outcomes. In summary, emergency medicine physicians rely on creativity skills such as rapid thinking, problem-solving, effective communication, ethical reasoning, and teamwork to provide high-quality care in the challenging and dynamic environment of the emergency department [41].

In the fast-paced realm of emergency medicine, AI applications are becoming indispensable through intuitive online platforms. Advanced triage systems employing AI algorithms swiftly analyze patient data, aiding in prioritizing cases based on severity. Mobile apps equipped with AI-driven diagnostic tools assist emergency medical personnel in rapid decision-making, enhancing accuracy in critical situations. These innovations exemplify a transformative shift in emergency care, optimizing response times and improving patient outcomes through the integration of cutting-edge technology [41-43].

Critical care medicine

This field demands a high level of expertise, clinical judgment, and adaptability. Intensive care physicians make critical decisions on life support, medication administration, and treatment adjustments based on complex and dynamic patient data [44]. The dynamic and rapidly changing nature of patients' conditions, the need for real-time response to alarms and emergencies, and the requirement for interdisciplinary collaboration with nurses, respiratory therapists, and other specialists all highlight the human-centric aspects of intensive care medicine [44].

Furthermore, end-of-life discussions and decision-making's emotional and ethical dimensions add complexity. While AI systems can assist in data analysis and trend recognition, they cannot fully replicate the nuanced and holistic approach of experienced intensive care clinicians [44]. The human touch in communication with patients and their families and the capacity to consider patient values and preferences in care remain a critical aspect of this specialty. In summary, while AI can enhance certain aspects of intensive care medicine, urgent care's multifaceted, high-stakes, and highly dynamic nature makes it a field where human expertise, clinical judgment, and interpersonal skills are irreplaceable [44].

Within the critical care domain, AI applications are proving essential through accessible online platforms. AI algorithms, embedded in clinical decision support systems, rapidly process vast patient datasets to aid in the early detection of deterioration, facilitating timely interventions. Mobile applications with AI-driven predictive analytics enhance critical care practitioners' ability to foresee complications and optimize treatment strategies. These technological advancements underscore a pivotal evolution in critical care, bolstering healthcare professionals' capabilities and ultimately improving patient outcomes [44, 45].

Ethical and data privacy considerations

AI implementation in healthcare raises substantial ethical and data privacy concerns that must be addressed with care. Firstly, patient confidentiality and data security are critical [46-48]. Robust encryption protocols and access controls should be in place to safeguard sensitive medical information [46-48]. Transparency in AI algorithms and decision-making processes is also critical. To develop trust, clinicians, and patients should have clear visibility into how AI systems arrive at their judgments. Furthermore, dealing with bias and fairness is crucial. AI models should be carefully assessed for biases based on race, gender, or socioeconomic variables, and appropriate measures should be taken to reduce these biases. Regular audits and constant monitoring can aid in the preservation of fairness throughout time. Another critical factor is informed consent. Patients should be educated on the use of AI in healthcare and allowed to opt out if they so desire. Finally, it is critical to establish regulatory frameworks and standards for AI in healthcare. Regulatory agencies should collaborate closely with technologists and healthcare practitioners to create guidelines that respect ethical norms while leveraging AI's potential to improve patient outcomes [46-48].

Future perspectives of Artificial Intelligence applications in medical specialties

While current applications showcase their potential, the future whispers of even more complex transformations, weaving AI seamlessly into the tapestry of diverse medical specialties, and these fusion promises not just improved efficiency, but a fundamental shift in how we diagnose, treat, and prevent disease [49-51].

Pediatric care presents unique challenges. Children's rapidly evolving bodies and immature immune systems necessitate meticulous assessments and nuanced diagnoses. For this reason, AI applications, trained on vast pediatric datasets, will assist pediatricians in deciphering complex illnesses like metabolic disorders or rare genetic syndromes. Algorithms generated by AI, analyzing medical images and genetic profiles, could pinpoint subtle abnormalities invisible to the human eye, leading to earlier diagnoses and targeted interventions. Furthermore, AI-powered chatbots could engage young patients, alleviating anxiety and fostering trust, while simultaneously gathering valuable clinical data in real-time [49-51].

Internal medicine deals with an intricate web of interconnected systems, making accurate diagnoses often like navigating a labyrinth. In the future, AI could stand as a potent ally, analyzing vast medical databases and patient records with lightning speed. These AI consultants could sift through complex lab results, identify subtle patterns pointing to emerging pathologies, and even predict future health risks based on individual genetic predispositions. This could empower internists to personalize preventive

measures, intervene early, and prevent the progression of chronic diseases [49-51].

Intensive care units demand constant vigilance and rapid decision-making. Here, AI could analyze a considerable quantity of real-time patient data gathered from sensors and medical devices. Applications made with AI will continuously monitor vital signs, bloodwork, and even brain activity, predicting critical events like sepsis or cardiac arrest before they occur. Such foresight could guide life-saving interventions, adjust medication dosages in real-time, and alert medical staff to potential complications [49-51]. Moreover, AI could analyze individual patient responses to treatments, tailoring care plans to maximize efficacy and minimize side effects. This could improve patient outcomes in intensive care units, reducing mortality rates and accelerating recovery times [49-51].

While diagnostics will see significant transformations, AI's influence will extend far beyond. Imagine AI-powered therapy robots engaging children with autism, providing personalized cognitive and social interventions [49-51]. Envision AI language models analyzing patient narratives, identifying early signs of depression or anxiety, and guiding mental health professionals. Furthermore, AI could personalize treatment plans, suggesting optimal medication combinations and even predicting individual responses to therapies. This could revolutionize chronic disease management, enabling proactive interventions and improved quality of life for patients [49-51].

This AI-driven future, while exhilarating, demands a harmonious relationship between innovation and ethical responsibility. Data privacy remains paramount, requiring robust frameworks to ensure patient confidentiality and control over their information. Algorithmic bias, a persistent challenge, necessitates diverse datasets and rigorous testing to prevent discriminatory outcomes [50]. Furthermore, human oversight and collaboration are crucial, ensuring AI remains a tool to augment, not replace, human expertise and empathy. By thoughtfully addressing these concerns, we can unlock the immense potential of AI to usher in a future of personalized, preventive, and equitable healthcare for all [50].

By utilizing its capabilities in data analysis, pattern identification, and predictive modeling, AI has notably improved patient care across a range of medical fields. AI is particularly good at jobs like computer-aided diagnosis in the field of medical imaging [52]. Deep learning algorithms can identify possible abnormalities in medical scans, such as X-rays or mammograms, with remarkable accuracy [53,54]. These algorithms are inspired by the structure and function of the human brain. Giving worrisome cases priority, not only enhances the early diagnosis of illnesses like cancer but also lessens the workload for radiologists [55].

Moreover, AI plays a major role in personalized medicine. AI systems can forecast individual reactions to therapy and possible adverse effects by evaluating enormous databases of patient information, including medical history, genetic information, and lifestyle variables [56]. This may result in increased treatment efficacy and decreased unfavorable effects by allowing doctors to customize treatment programs to each patient's particular requirements and susceptibilities [57,58]. AI-powered chatbots and virtual assistants may also respond to simple medical inquiries and offer round-the-clock patient assistance, increasing patient engagement and encouraging self-care management [59].

Deep learning methods have heralded significant advancements in medical diagnosis, yet their application is not devoid of limitations and drawbacks [4]. While these techniques excel in processing vast amounts of data and identifying complex patterns, they encounter challenges in addressing issues intrinsic to medical diagnostics. One notable limitation lies in the interpretability of deep learning models [50]. The black-box nature of these algorithms makes it challenging to elucidate the rationale behind their decisions, raising concerns regarding their clinical applicability and trustworthiness. In medical practice, interpretability is crucial for clinicians to comprehend the underlying biological mechanisms driving disease progression and treatment response.

Deep learning models often require extensive computational resources and large datasets for training, which may not be readily available in certain medical domains. This limitation hampers the feasibility of deploying these models in resource-constrained settings or for rare diseases where data scarcity prevails. Additionally, deep learning models are susceptible to overfitting, wherein they perform well on training data but generalize poorly to unseen samples. This phenomenon can compromise the reliability of diagnostic predictions, especially when dealing with heterogeneous patient populations or data from diverse sources [4].

The reliance of deep learning methods on labeled data for training poses challenges in scenarios where obtaining annotated datasets is labor-intensive or impractical. Annotated medical data often require expert annotation, which is time-consuming and subject to inter-observer variability. Consequently, the quality and consistency of labels may vary, impacting the performance of deep learning models. Moreover, the ethical implications of data privacy and patient confidentiality loom large in medical diagnostics [4,13]. Deep learning models trained on sensitive patient data raise concerns regarding data security and the potential for inadvertent disclosure of personal health information [13]. Safeguarding patient privacy while ensuring the utility of medical data for research and clinical applications remains a complex challenge [4]. Furthermore, the generalizability of deep learning models

across diverse populations and healthcare settings remains a pertinent issue.

Biases inherent in training data, such as demographic disparities or institutional variations, can lead to inequities in diagnostic accuracy and treatment recommendations. Addressing these biases requires concerted efforts to enhance data representativeness and mitigate algorithmic biases through rigorous validation and calibration techniques [50]. Additionally, the dynamic nature of medical knowledge necessitates continuous updating and refinement of deep learning models to accommodate evolving diagnostic criteria and therapeutic guidelines. Failure to adapt to changes in clinical practice may render these models obsolete or suboptimal in real-world settings. Despite these limitations, the integration of deep learning methods holds immense promise for revolutionizing medical diagnostics, paving the way for personalized and precision medicine approaches. Mitigating the drawbacks requires interdisciplinary collaboration among clinicians, data scientists, and policymakers to develop robust frameworks for model validation, interpretability, and ethical governance [13]. By harnessing the synergistic potential of deep learning and medical expertise, we can overcome existing challenges and harness the full potential of artificial intelligence in improving patient outcomes and advancing healthcare delivery.

Conclusions

In conclusion, this review underscores the dynamic evolution of AI within medical domains while maintaining a cautious optimism. Acknowledging the progressive dismantling of existing barriers, it is essential to emphasize that the intricate complexity of human activities in medicine may resist complete emulation by AI. The evolving role of AI in medical subdomains is best conceptualized as a synergistic partnership, where technological advancements enhance rather than supplant the critical expertise of human specialists. As AI continues to refine its capabilities, fostering a symbiotic relationship with medical practitioners, it is imperative to view these technologies as valuable tools augmenting the multifaceted landscape of healthcare, with the human specialist remaining indispensable in navigating the nuanced intricacies of medical decision-making and patient care.

References

1. Beam AL, Drazen JM, Kohane IS, Leong TY, Manrai AK, Rubin EJ. Artificial Intelligence in Medicine. *N Engl J Med.* 2023;388:1220-1221.
2. Khera R, Butte AJ, Berkwitz M, Hswen Y, Flanagan A, Park H, et al. AI in Medicine-JAMA's Focus on Clinical Outcomes, Patient-Centered Care, Quality, and Equity. *JAMA.* 2023;330:818-820.
3. Levy J, Madrigal E, Vaickus L. Editorial: Artificial

- intelligence: applications in clinical medicine. *Front Med Technol.* 2023;5:1206969.
4. Pujari S, Reis A, Zhao Y, Alsalamah S, Serhan F, Reeder JC, et al. Artificial intelligence for global health: cautious optimism with safeguards. *Bull World Health Organ.* 2023;101:364-364A.
 5. Cacciamani GE, Siemens DR, Gill I. Generative Artificial Intelligence in Health Care. *J Urol.* 2023;210:723-725.
 6. Nabi G. Machine learning, artificial intelligence, and digitalisation of healthcare: Convergence of science and technology. *Scott Med J.* 2023;68:37-38.
 7. Tang A, Ho R, Yu R, Huynh T, Luong S, Tam W, et al. Editorial: Can artificial intelligence help us overcome challenges in geriatrics? *Geriatr Nurs.* 2023;52:A1-A2.
 8. Jankowska A, Ngai J. I, Robot: Healthcare Decisions Made With Artificial Intelligence. *J Cardiothorac Vasc Anesth.* 2023;37:1852-1854.
 9. Cupples A. Artificial Intelligence in Medicine. *Ulster Med J.* 2024;92:167-169.
 10. Trivedi H, Gichoya J. Breathing Life Into Artificial Intelligence. *Crit Care Med.* 2024;52:345-348.
 11. Paulson RJ. Artificial intelligence in medicine: it is neither new, nor frightening. *F S Rep.* 2023;4:239-240.
 12. Topol EJ. As artificial intelligence goes multimodal, medical applications multiply. *Science.* 2023;381:adk6139.
 13. Sterling E, Siira E, Nilsen P, Svedberg P, Nygren J. Implementing AI in healthcare-the relevance of trust: a scoping review. *Front Health Serv.* 2023;3:1211150.
 14. He Z, Zhang R, Diallo G, Huang Z, Glicksberg BS. Editorial: Explainable artificial intelligence for critical healthcare applications. *Front Artif Intell.* 2023;6:1282800.
 15. Wang HHX, Li YT, Huang J, Huang W, Wong MCS. Advances and opportunities in the new digital era of telemedicine, e-health, artificial intelligence, and beyond. *Hong Kong Med J.* 2023;29:380-382.
 16. Holder AL, Kamaleswaran R. Facilitating the Next Paradigm Shift in Critical Care Through Artificial Intelligence. *Crit Care Clin.* 2023;39:xiii-xiv.
 17. Eglinton T, Tranter-Entwistle I, Connor S. Artificial intelligence in medicine: Promethean moment or Pandora's box? *N Z Med J.* 2023;136:11-13.
 18. Wang Z, Fournier-Viger P, Wang YP, Fu Y. Editorial: Crosstalk between computational medicine and neuroscience in healthcare. *Front Neurosci.* 2023;17:1333227.
 19. Meucci MC, Delgado V. Artificial Intelligence to Speed Up Training in Echocardiography: The Next Frontier. *Circ Cardiovasc Imaging.* 2023;16:e016148.
 20. Sarfaraz S, Khurshid Z, Zafar MS. Use of artificial intelligence in medical education: A strength or an infirmity. *J Taibah Univ Med Sci.* 2023;18:1553-1554.
 21. Nicolas J, Pitaro NL, Vogel B, Mehran R. Artificial Intelligence - Advisory or Adversary? *Interv Cardiol.* 2023;18:e17.
 22. Ellertsson S. [How can Artificial Intelligence be of use in the Healthcare System?]. *Laeknabladid.* 2023;109:327. Icelandic.
 23. Pujol Farriols R, Guanyabens Calvet J. Medicine in times of artificial intelligence. *Med Clin (Barc).* 2023;161:530-532.
 24. Cortial L, Montero V, Tourlet S, Del Bano J, Blin O. Artificial intelligence in drug repurposing for rare diseases: a mini-review. *Front Med (Lausanne).* 2024;11:1404338.
 25. Azer SA, Guerrero APS. The challenges imposed by artificial intelligence: are we ready in medical education? *BMC Med Educ.* 2023;23:680.
 26. Rathore FA, Rathore MA. The Emerging Role of Artificial Intelligence in Healthcare. *J Pak Med Assoc.* 2023;73:1368-1369.
 27. Watanabe A, Wiseman SM. A New Era in Surgical Research: The Evolving Role of Artificial Intelligence. *Am J Surg.* 2023;226:923-925.
 28. Ventura J, Gold-von Simson G, Sukhov R. Dancing with uncertainties in the era of artificial intelligence. *J Pediatr Rehabil Med.* 2023;16:431-432.
 29. Wang Z, Fournier-Viger P, Wang YP, Fu Y. Editorial: Crosstalk between computational medicine and neuroscience in healthcare. *Front Neurosci.* 2023;17:1333227.
 30. Zheng P, Zeng X, Wang X, Ding P. Editorial: Artificial intelligence and machine learning for drug discovery, design and repurposing: methods and applications. *Front Pharmacol.* 2023;14:1333747.
 31. Bold B, Lkhagvajav Z, Dorjsuren B. Role of Artificial Intelligence in Achieving Universal Health Coverage: A Mongolian Perspective. *Korean J Radiol.* 2023;24:821-824.
 32. Espejo G, Reiner W, Wenzinger M. Exploring the Role of Artificial Intelligence in Mental Healthcare: Progress, Pitfalls, and Promises. *Cureus.* 2023;15:e44748.
 33. Pham KT, Nabizadeh A, Selek S. Artificial Intelligence and Chatbots in Psychiatry. *Psychiatr Q.* 2022;93:249-253.
 34. Thornton J, D'Souza R, Tandon R. Artificial intelligence and psychiatry research and practice. *Asian J Psychiatr.* 2023;81:103509.
 35. Fakhoury M. Artificial Intelligence in Psychiatry. *Adv Exp Med Biol.* 2019;1192:119-125.
 36. Graham S, Depp C, Lee EE, Nebeker C, Tu X, Kim HC, et al. Artificial Intelligence for Mental Health and Mental Illnesses: an Overview. *Curr Psychiatry Rep.* 2019;21:116.
 37. Reid JE, Eaton E. Artificial intelligence for pediatric ophthalmology. *Curr Opin Ophthalmol.* 2019;30:337-346.
 38. Balla Y, Tirunagari S, Windridge D. Pediatrics in Artificial Intelligence Era: A Systematic Review on Challenges, Opportunities, and Explainability. *Indian Pediatr.* 2023;60:561-569.
 39. Shu LQ, Sun YK, Tan LH, Shu Q, Chang AC. Application of artificial intelligence in pediatrics: past, present and future. *World J Pediatr.* 2019;15:105-108.
 40. Scott Wang HH, Vasdev R, Nelson CP. Artificial Intelligence in Pediatric Urology. *Urol Clin North Am.* 2024;51:91-103.
 41. Vearrier L, Derse AR, Basford JB, Larkin GL, Moskop JC. Artificial Intelligence in Emergency Medicine: Benefits, Risks, and Recommendations. *J Emerg Med.* 2022;62:492-499.
 42. Cheng R, Aggarwal A, Chakraborty A, Harish V, McGowan

- M, Roy A, et al. Implementation considerations for the adoption of artificial intelligence in the emergency department. *Am J Emerg Med.* 2024;82:75-81.
43. Gellert GA, Kabat-Karabon A, Gellert GL, Rasławska-Socha J, Gorski S, Price T, et al. The potential of virtual triage AI to improve early detection, care acuity alignment, and emergent care referral of life-threatening conditions. *Front Public Health.* 2024 May 13;12:1362246.
 44. Gutierrez G. Artificial Intelligence in the Intensive Care Unit. *Crit Care.* 2020;24:101.
 45. Yoon JH, Pinsky MR, Clermont G. Artificial Intelligence in Critical Care Medicine. *Crit Care.* 2022;26:75.
 46. Keskinbora KH. Medical ethics considerations on artificial intelligence. *J Clin Neurosci.* 2019;64:277-282.
 47. Abdullah YI, Schuman JS, Shabsigh R, Caplan A, Al-Aswad LA. Ethics of Artificial Intelligence in Medicine and Ophthalmology. *Asia Pac J Ophthalmol (Phila).* 2021;10:289-298.
 48. Murphy K, Di Ruggiero E, Upshur R, Willison DJ, Malhotra N, Cai JC, et al. Artificial intelligence for good health: a scoping review of the ethics literature. *BMC Med Ethics.* 2021;22:14.
 49. Noorbakhsh-Sabet N, Zand R, Zhang Y, Abedi V. Artificial Intelligence Transforms the Future of Health Care. *Am J Med.* 2019;132:795-801.
 50. Aung YYM, Wong DCS, Ting DSW. The promise of artificial intelligence: a review of the opportunities and challenges of artificial intelligence in healthcare. *Br Med Bull.* 2021;139:4-15.
 51. Johnson KB, Wei WQ, Weeraratne D, Frisse ME, Misulis K, Rhee K, et al. Precision Medicine, AI, and the Future of Personalized Health Care. *Clin Transl Sci.* 2021;14:86-93.
 52. S Alshuhri M, Al-Musawi SG, Al-Alwany AA, Uinarni H, Rasulova I, Rodrigues P, et al. Artificial intelligence in cancer diagnosis: Opportunities and challenges. *Pathol Res Pract.* 2024;253:154996.
 53. van Leeuwen KG, de Rooij M, Schalekamp S, van Ginneken B, Rutten MJCM. Clinical use of artificial intelligence products for radiology in the Netherlands between 2020 and 2022. *Eur Radiol.* 2024;34:348-354.
 54. Kinkar KK, Fields BKK, Yamashita MW, Varghese BA. Empowering breast cancer diagnosis and radiology practice: advances in artificial intelligence for contrast-enhanced mammography. *Front Radiol.* 2024;3:1326831.
 55. Hassankhani A, Amoukhteh M, Valizadeh P, Jannatdoust P, Sabeghi P, Gholamrezanezhad A. Radiology as a Specialty in the Era of Artificial Intelligence: A Systematic Review and Meta-analysis on Medical Students, Radiology Trainees, and Radiologists. *Acad Radiol.* 2024;31:306-321.
 56. Prelaj A, Miskovic V, Zanitti M, Trovo F, Genova C, Viscardi G, et al. Artificial intelligence for predictive biomarker discovery in immuno-oncology: a systematic review. *Ann Oncol.* 2024;35:29-65.
 57. Giamarellos-Bourboulis EJ, Aschenbrenner AC, Bauer M, Bock C, Calandra T, Gat-Viks I, et al. The pathophysiology of sepsis and precision-medicine-based immunotherapy. *Nat Immunol.* 2024;25:19-28.
 58. Bonkhoff AK, Grefkes C. Precision medicine in stroke: towards personalized outcome predictions using artificial intelligence. *Brain.* 2022;145:457-475.
 59. Ayers JW, Poliak A, Dredze M, Leas EC, Zhu Z, Kelley JB, et al. Comparing Physician and Artificial Intelligence Chatbot Responses to Patient Questions Posted to a Public Social Media Forum. *JAMA Intern Med.* 2023;183:589-596.