

Medical Artificial Intelligence: Futuristic Prospects and Ethical Responsibilities

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International
Neuroethics
Society

Background



- ❖ Artificial intelligence (AI) is highly sensitive to small pattern changes [1]
 - **Diagnostic accuracy:** sensitivity, specificity, positive predictive values, and negative predictive values upwards of 70% [2]
- ❖ Lack of breaks → **greater diagnostic efficiency** [3]
- ❖ When utilized in combination with clinicians, AI systems improved behavioral-health patient outcomes by more than 30% [4]

Objective

Propose a theoretical multifaceted approach for the equitable implementation of medical AI systems in healthcare facilities

- ❖ Feasibility
 - Data collection
 - Manufacturing and maintenance
- ❖ Patentability
 - Applications
 - Legal responsibilities



Visualization of how a futuristic medical AI system may be used by a clinician to aid in the diagnosis of a patient.

Source: [Medical News Life Sciences](#)

Feasibility and Equitable Accessibility

- ❖ Extensive validation and access to large volumes of well-selected data [5]
- ❖ Automated data collection methods
- ❖ Self-dependence for data
- ❖ Eliminates human resources
- ❖ Quickly adapt to change

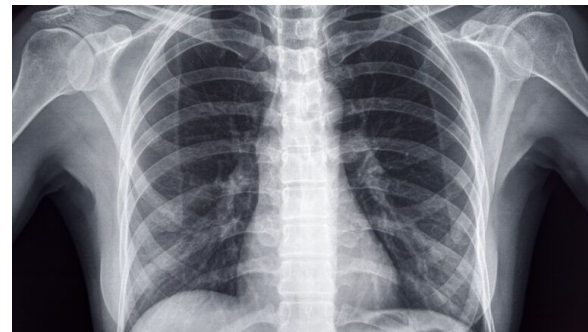


Figure 1. Medical X-ray image in an AI dataset.

Source: [STAT News](#) - Health Tech

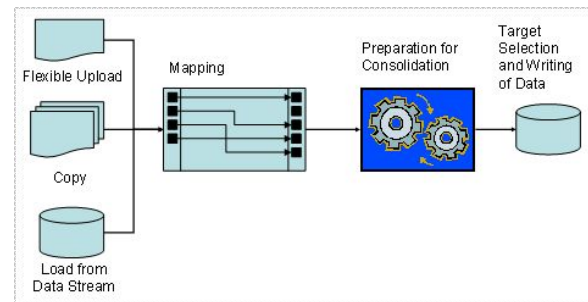


Figure 2. General principle behind the methods for automated data collection.

Source: [SAP](#)

Feasibility and Equitable Accessibility (Cont.)



- ❖ Reduce manufacturing and maintenance costs for lower selling prices [5]
 - Complexity
 - Upgradations
- ❖ Monetary assistance from governments



Figure 3. As part of the Coronavirus Aid, Relief and Economic Security (CARES) Act, the U.S. Department of Health and Human Services has provided over \$175 billion USD to healthcare providers via the Provider Relief Fund. Similar policies could also be enacted for hospitals and facilities seeking to implement medical AI systems. Source: [American Dental Association](#)

Patentability



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❖ Subject matter eligibility [6]

➤ Step 2A ✓

➤ Step 2B ✗

❖ Differentiate AI products from conventional clinical diagnosis methods in patent applications

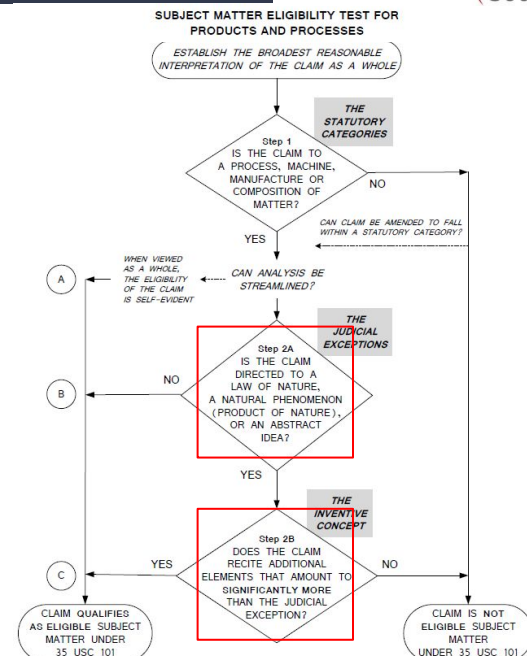


Figure 4. Flowchart of subject matter eligibility test. Steps 2A and 2B assess whether the product targets a patent-ineligible concept and is an inventive concept, respectively (see red boxes).

Source: [United States Patent and Trademark Office](#)

Patentability (Cont.)

- ❖ Long-term viability
 - Medical supervision
- ❖ AI developers and manufacturers are liable for unintentional harm to patients due to malfunctions
 - Ease financial burden on healthcare providers, who have lost an average of \$50.7 billion USD monthly due to COVID-19 [7]



University of Maryland surgeon supervising the Smart Tissue Autonomous Robot (STAR).
Source: [University of Maryland](https://www.umaryland.edu/news/2018/05/22/robotic-surgery/)

Conclusion



- ❖ Medical AI could greatly assist healthcare providers in terms of accuracy and efficiency
- ❖ Governments, AI manufacturers, and healthcare providers should consider the following proposed methodologies to address the ethical responsibilities involved in medical AI's implementation
 - **Feasibility:** automated data collection systems, reduced manufacturing costs, government financial support
 - **Patentability:** drafting patent applications, medical supervision, financial liabilities

Future Work



- ❖ Analyze patent law in additional countries
- ❖ Improve the theoretical design of proposed methods by surveying healthcare providers, AI manufacturers, legislators, and patients
- ❖ Conduct a small-scale pilot study to assess the empirical effectiveness of proposed methods
- ❖ Expand testing to multiple case studies to affirm reliability
- ❖ Dependent on the success of further experimentation, work with AI manufacturers and legislators to draft and implement policies in accordance with proposed methods

Acknowledgments and References



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- [1] Bruffaerts, Rose. "Machine learning in neurology: what neurologists can learn from machines and vice versa." *Journal of Neurology*, vol. 265, no. 11, 2018, p. 2745+. *Academic OneFile*.
- [2] Zhang, Chenzi, et al. "Tu1217 The Use of Convolutional Neural Artificial Intelligence Network to Aid the Diagnosis and Classification of Early Esophageal Neoplasia. A Feasibility Study." *Gastrointestinal Endoscopy*, vol. 85, no. 5, 2017, pp. AB581-AB582. *Academic OneFile*.
- [3] Siuly, Siuly, et al. "Guest editorial: special issue on 'Artificial Intelligence in Health and Medicine'." *Health Information Science and Systems*, vol. 6, no. 1, 2018. *Academic OneFile*, <http://link.galegroup.com/apps/doc/A546393221/AONE?u=fol36665&sid=AONE&xid=1d74f8b3>.
- [4] Conn, Joseph. "Computing better healthcare; Artificial intelligence seen as aiding decision support." *Modern Healthcare*, 18 Feb. 2013, p. 0014. *Academic OneFile*, <http://link.galegroup.com/apps/doc/A319765622/GPS?u=fol36665&sid=GPS&xid=2009a08e>.
- [5] Reddy, Krishna. "Advantages and Disadvantages of Artificial Intelligence." WiseStep, WiseStep.
- [6] Tull, Susan Y. "PATENTING THE FUTURE OF MEDICINE: The Intersection of Patent Law and Artificial Intelligence in Medicine." *Landslide*, Jan.-Feb. 2018. *Academic OneFile*.
- [7] "Hospitals and Health Systems Face Unprecedented Financial Pressures Due to COVID-19: AHA." *American Hospital Association*, American Hospital Association, May 2020, www.aha.org/guidesreports/2020-05-05-hospitals-and-health-systems-face-unprecedented-financial-pressures-due.