



## Disease Prediction and Diagnostics by Using Artificial Intelligence with their Challenges

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**Abstract.** Clarify capability is amongst the most hotly disputed concerns in the field of artificial intelligence (AI) in medical. Despite the fact that AI-powered devices have already been found to surpass people under certain numerical methods, the shortage of understandability has problems that make. However, reliability is not really a solely technological problem; rather, it raises a slew of clinical, economic, moral, and cultural concerns that must be thoroughly investigated. This article gives a complete examination of a function of understandability in healthcare AI and conducts a moral examination of the what reliability implies for the introduction of AI-driven technologies into clinical care. Artificial intelligence (AI) is slowly transforming medical practice. AI technologies are extending into domains that were traditionally viewed to be only the domain of professional knowledge, because to current innovations in digitized data collecting, computer vision, and data centers. The goal of this study is to maintain abreast of daily contributions to science, comprehend the accessibility of technology, recognize the enormous power of AI in healthcare, and inspire scientists in similar areas.

**Keywords:** *AI, Supervised learning, Unsupervised learning, Reinforced learning*

### 1. Introduction

However, AI systems have had a significant influence on the healthcare profession, creating a vigorous argument about whether AI physicians may eventually replace human physicians. We think that machines will not replace doctors in the near decades, although AI may surely assist medical practitioners make better clinical decision making or even modify human judgements in some of these parts of care delivery (e.g., radiology) [1] [2]. The increasing availability of medical data and the significantly greater of big data approaches have enabled the most recent successful uses of technology in the medical industry. When prompted by scientific results searches, powerful AI technologies can disclose clinically significant hidden knowledge in massive volumes of data, which could

improve health choices. The advantages of AI have been extensively researched in the research journals. AI may employ specialized technology to 'understand' components from huge amounts of information and data, and then use the results to improve healthcare treatment. It may also be capable of understanding and self-correcting to reduce the noise basis of feedback. AI systems that give speed medical knowledge from articles, guides, and treatment protocols can assist physicians offer good quality outcomes. Moreover, an AI model can help to reduce counselling and testing errors, which are inevitable in treating cancer [3] [4]. In addition, an AI device captures useable data from a large subset of patients to help in the development of definitive conclusions for medical danger detection and forecasting. The following is the rest of this document. Section 2 contains an explanation of AI's relationship with hardware and software, while Section 3 concentrates on Major AI Problems. Section 4 went through illness diagnosis and prognosis. Lastly, Section 5 summarizes the conclusions.

## 2. AI Relation with hardware and software

AI is often implemented as a network consisting from both operating systems. AI is mainly concerned with methods from a technology standpoint. A research design for performing AI applications is an artificial neural network (ANN) [5]. It is a simulation of the neural network, consisting of a connected biological nervous system with graded channels of communication among cells [6]. Each cell can respond to various inputs from brain sections, and the network connection can modify its status in react to variations environmental inputs [7]. As a consequence, the neural network (NN) may create responses in reaction to external inputs in the same way as the human mind does. NNs are often multi-layered frameworks with a variety of topologies. Figure 1 depicts NNs developed.

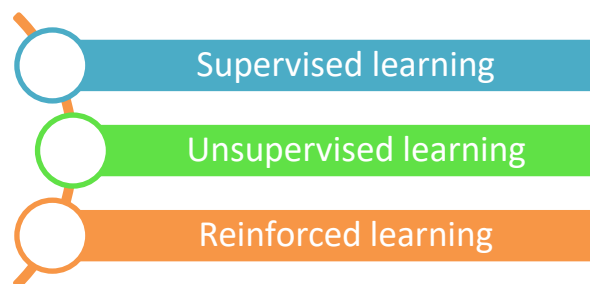


Fig.1. Types of Learning

- Supervised learning, in which the assignment is to deduce a direct mapping an insight to a variables based on instance combinations of outputs and inputs.
- Unsupervised learning, in which the challenge would be to understand from unlabeled, classed, or categorized exam data to obtain prevalent aspects of the data as well as, instead of reacting to current digital world, to respond defined by the presence or absence of recognized common characteristics in updated information.
- Reinforced learning, in which the assignment is to function inside the provided environment in order to enhance returns and minimize punishments, respectively per some form of optimization method.

AI is primarily essential with the management of NN methods on a computer substrate from a quality perspective. The much easier technique is to run the NN method on a multithreaded or multithread general-purpose central processing unit (CPU) [7]. Moreover, for sizable NNs, graphics processing units (GPUs), that excel at multilayer calculations, have indeed been proven to be superior to Processors [1]. Founder with Processor and

Memory has considered to be more efficient than Processor itself, particularly for spike NNs [8]. Furthermore, certain flexible or configurable acceleration machines, including such FPGAs and software electronic components can execute NNs in a much more economical manner. In particular, of processing capabilities, power management, and compactness [4]. When contrasted to GPU and CPU platform, these devices may be modified for an intended area, making them extremely energy economical and smaller.

AI has now been implemented in a variety of technological sectors due to rapid growth of AI technology and computer capabilities, including IoT [8], object recognition [9], automated driving, human communication analysis, and automation. More notably, medical scientists have been aggressively attempting to utilize AI to aid enhance research and outcome measures, hence enhancing the total efficiency of the health sector. Figure 1 depicts the frequency of literature sources from 1999 to 2021. The increase in popularity is clear, particularly in the past 5 years, and further development may be predicted. The improvements that AI may provide to medical were predicted some generations earlier. Indeed, evaluations on the significance of AI in bioengineering have been produced. Consequently, important advances in AI and its implications in biology have been developed.

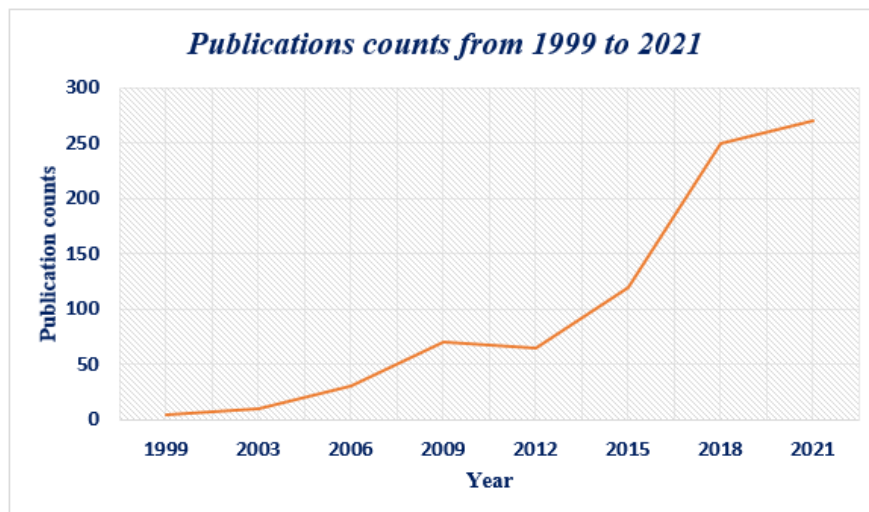


Fig.2. Publications counts from 1999 to 2021

This paper reviews recent breakthroughs in the application of AI in biomedicine, covering the main areas in biomedical engineering and healthcare. The goal for healthcare is to become more personal, predictive, preventative, and participatory, and AI can make major contributions in these directions. From an overview of the progress made, we estimate that AI will continue its momentum to develop and mature as a powerful tool for biomedicine.

### 3. Major Challenges with AI

#### 3.1 Technical challenges in AI developments

While AI has the potential to change medical treatment, numerous technological difficulties remain. Because device approaches rely substantially on the provision of vast volumes of rising learning algorithm, it is critical to collect the data that is typical of the target population of patients. Information from wide range of healthcare contexts, for instance, might include distinctive kinds of biases and contamination, causing a retrained model on

one school's information to failed to generalize to another. Whenever there is an unsatisfactory inter-expert consensus on the diagnosis problem, majority treatments have been proven to significantly increase the efficiency of machine-learning models were trained on the information. Appropriate data curating is required when dealing with data sets. Furthermore, attaining the national standard of clients' patient conditions necessitates doctors personally reviewing their case records, which would be extremely expensive on a population basis. A gold benchmark that used instinctual data mining algorithms and data displays to infer patients' real state was proposed. Complex algorithms that could handle the quirks and peculiarities of varied variables will improve the predictability of the systems, and therefore their suitability to be used in existence choices.

It was still difficult to set up a computer infrastructure for gathering, maintaining, and exchanging EHRs or other critical patient records. Technologies that improve security can enable highly secure exchange via cloud storage (such as third-party-hosted computing environments). Nevertheless, in order to extensively adopt such technology, interoperability apps that fulfil the requirement for healthcare information display are necessary. Meaningful and consistent data aggregation among health apps and geographies continues patchy and sluggish. Nevertheless, developing application-programming protocols for medical studies, such as the Substitutable Biomedical Programs and Disposable Innovations on the Quick Similarity Indices Tools architecture, are seeing widespread acceptance across several EHR manufacturers.

### **3.2 Social, economic and legal challenges**

As medical AI technologies develop, their medical use as well as implementation will inevitably rise, resulting in new societal, economical, and court proceedings. Geoff Schwartz, a founder in neural networks, and also many AI academics see dramatic improvements in hospital attention. AI is expected to augment treatment quality and decrease discrepancies and doctor tiredness caused by repetitive healthcare activities. Nevertheless, this might not automatically minimize clinician effort because current recommendations may recommend greater frequent checks for at-risk clients. If AI for ordinary healthcare activities is effectively implemented, it may allow more time to doctors, allowing them to focus on the more longer productive and "rising" contact with their clients. For example, AI might help assessment and intervention triage and evaluate fundus pictures, people spending more time in the operating theatre or reviewing alternative treatments with their customers. To be sure, Artificial intelligence has the potential to replace certain healthcare employees in mundane jobs, which might transform the healthcare workforce and change the present compensation paradigm.

However, there is little empirical evidence of this type of influence on the health sector at the moment. Modern artificial intelligence systems will not make progress until they are incorporated into healthcare operations. Nevertheless, study has found that using AI in medicine is not a simple task. Numerous negative impacts of clinical decision support systems are generally accepted, such as warning exhaustion, increased workload and time for healthcare professionals, interruption of personal attributes (which include general practitioner) interpersonal communication, and the creation of identified hazards which goes beyond mere of monitoring to identify. For instance, when a mammography CAD device produces a misleading impression, physicians are much more likely to lose the diagnostic as when the mammography pictures are interpreted without CAD. Even though many Modelling approaches may be changed to optimize the sensitivity and accuracy

required for each medical use scenario, identifying the ideal clinical procedure that enhances Enterprise detection accuracy is difficult. The perspective of healthcare professional and the patient demonstrates that proper formulation and simulation are required, but are lacked, when integrating information and communication technologies into healthcare setting. The most pressing need for AI in biomedicine is in illness diagnosis. A lot of intriguing advances have occurred in this field. AI enables health practitioners to provide earlier and more accurate diagnoses for a wide range of disorders [1]. In vitro diagnostics employing biosensors or biochips is one significant kind of diagnosis. For example, gene expression, which is a critical diagnostic tool, may be examined using ML, which uses AI to analyse microarray data to classify and discover anomalies [3]. One novel use is cancer microarray data classification for cancer detection [7].

Biosensors and associated point-of-care testing (POCT) devices with integrated AI can detect cardiovascular illnesses in their early stages [5]. AI can assist forecast the survival rates of cancer patients, such as colon cancer patients, in addition to diagnosis [6]. Researchers have also recognised several limits of ML in biological diagnostics and proposed solutions to mitigate these shortcomings [7]. As a result, there is still a lot of room for AI in diagnostics and prognostics. Another major type of disease diagnosis is based on the analysis of medical imaging (2-dimensional) and signal (1-dimensional) data. Such strategies have been used in disease diagnosis, management, and prediction. AI has been used to biomedical signal feature extraction for one-dimensional (1-dimensional) signal processing [8], such as electroencephalography (EEG) [9], electromyography (EMG) [], and electrocardiography (ECG) [1]. Epileptic seizure prediction is an important use of EEG. It is critical to forecast seizures in order to reduce their impact on patients [2].

AI has recently been regarded as one of the critical components of an accurate and trustworthy prediction system. Deep learning can now be used to forecast, and the prediction platform may be implemented in a mobile system. Based on biomedical image processing, AI can also play a crucial role in diagnostic. AI has been used to increase picture quality G. Rong et al. / Engineering xx (xxxx) 7 and analysis efficiency in image segmentation [88], multidimensional imaging, and thermal imaging. AI may also be used in portable ultrasonic devices, allowing untrained individuals to utilise ultrasound as a powerful tool to detect many types of ailments in developing countries. In addition to the uses listed above, AI can help standard decision support systems (DSSs) increase diagnosis accuracy and disease management to lessen the strain on staff. AI, for example, has been utilised in the integrated management of cancer, to aid in the diagnosis and management of tropical illnesses [9] and cardiovascular diseases, and to aid in diagnostic decision-making. These applications illustrate that AI may be a valuable tool for early and precise illness detection, treatment, and even prediction. Two case studies are shown below.

#### **4. Conclusion**

To guarantee that clinical AI delivers on its promise, researchers, medical practitioners, and lawmakers must be made aware of the constraints and limits of transparent methods in clinical AI, as well as stimulate number of co cooperation in the future. We discussed the reasons for employing AI in medical, showed the multiple healthcare data sets that AI has studied, and assessed the primary illness categories for which AI has been used. We examined the technological, societal, political, and legal problems in AI research.

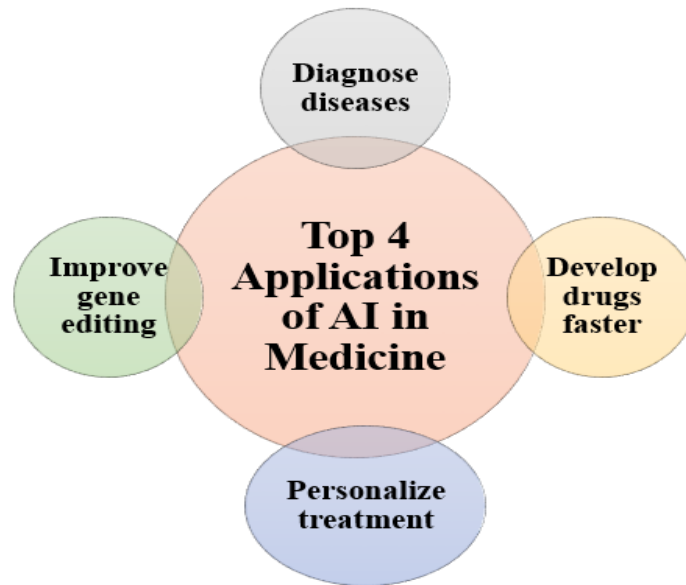


Fig.3. Applications of AI

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