

Clinical Reasoning and Artificial Intelligence: A Transformative Synergy

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1. Abstract

Clinical reasoning is fundamental in medical practice but faces significant challenges due to the increasing complexity and volume of medical information. Artificial intelligence (AI) emerges as an innovative solution, providing advanced tools for data analysis and decision-making. This article explores the current state of clinical reasoning, its deficiencies, and how AI can enhance its effectiveness. Key research, including the work of Dr. Jaime Claudio Villarroel Salinas, is analyzed, and directions for future research are proposed.

2. Introduction

Clinical reasoning is a complex cognitive process that involves the collection, analysis, and interpretation of clinical data to formulate diagnoses and treatment plans. The growing amount of medical information, coupled with variability in clinical experience and cognitive biases, presents significant challenges. AI, with its ability to manage and analyze large volumes of data, offers a unique opportunity to improve this critical process in medical practice.

3. Literature Review

3.1. Deficiencies in Clinical Reasoning In the article “Clinical Reasoning:

Its Current Deficit and the Importance of Learning a Method During the Formation of Clinical Competence of the Future Doctor,” several deficiencies in current clinical reasoning are identified, highlighting that physicians are often overwhelmed by the amount of information needed for an accurate diagnosis. The rapid evolution of medical knowledge and information overload can lead to diagnostic errors and suboptimal decisions (Villarroel Salinas 2023). Additional studies have corroborated these findings, noting that cognitive biases and lack of continuous updates are critical factors negatively affecting clinical reasoning (Norman 2005; Eva 2004). Complementary research has shown that physicians often rely on heuristics and pattern recognition, which can be inadequate in complex or atypical cases (Croskerry 2003). This deficit is particularly problematic in high-pressure situations or when dealing with rare diseases where accuracy and speed in diagnosis are crucial (Graber et al. 2005).

3.2. Applications of AI in Clinical Reasoning

AI has demonstrated great potential in improving clinical reasoning through the use of machine learning techniques and deep neural networks to analyze complex medical data and detect patterns not evident to humans. Tools like IBM Watson and Google DeepMind have been implemented in clinical settings to support diagnostics and treatments (Topol 2019; Esteve et al. 2017). Research shows that AI can improve diagnostic accuracy and reduce medical errors. For example, AI has been used to identify anomalies in medical images with accuracy comparable to, and sometimes superior to, that of human radiologists (Gulshan et al. 2016). Additionally, AI systems can be continuously updated with new information, overcoming one of the most significant limitations of human clinical reasoning (Miller 2019). Recent studies have shown that AI can be successfully integrated into clinical workflows, improving efficiency and reducing the time required to reach an accurate diagnosis (Rajkomar et al. 2019). Moreover, AI can assist in managing patient information, providing personalized treatment recommendations based on large databases and predictive analysis (Jiang et al. 2017).

3.3. Potential of AI in Clinical Reasoning The integration of AI into clinical reasoning offers numerous benefits:

- More accurate diagnoses: AI can analyze large volumes of clinical data to identify subtle correlations and emerging patterns.
- Reduction of errors: AI can help mitigate cognitive biases and variability in clinical experience, reducing diagnostic errors.
- Continuous updating: AI systems can rapidly incorporate the latest medical information, ensuring that healthcare professionals have

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access to up-to-date, evidence-based knowledge.

Additionally, AI can enhance physicians' ability to predict and prevent complications through the analysis of trends and historical patient data (Obermeyer & Emanuel 2016). This predictive approach can be crucial in managing chronic diseases and identifying patients at risk of developing severe conditions (Goldstein et al. 2017). AI can also facilitate medical education and training by providing simulations and interactive clinical cases that allow physicians to hone their diagnostic skills in a controlled environment (Sutton et al. 2020). Such tools can be particularly useful for training new doctors and for continuous medical education.

3.4. Future Research Topics

To maximize the benefits of AI in clinical reasoning, it is crucial to address several research areas:

- Development of explainable AI models: Create AI systems that not only provide diagnoses but also explain their reasoning in a manner understandable to physicians (Gunning & Aha 2019).
- Integration of AI with electronic health systems: Investigate how to effectively integrate AI systems with electronic health records for a more efficient workflow (Jiang et al. 2017).
- Ethics and safety in AI use: Examine the ethical and safety implications of using AI in medical practice (Fiske et al. 2019).

Additionally, it is necessary to explore the creation of robust ethical frameworks to ensure transparency, fairness, and accountability in the use of AI in medicine (Vayena et al. 2018). The acceptance and adoption of AI by healthcare professionals will largely depend on the trust in these systems and their ability to enhance medical practice without compromising professional autonomy (Reddy et al. 2019).

4. Conclusion

Artificial intelligence has the potential to transform clinical reasoning by providing advanced tools to improve the accuracy and efficiency of medical decision-making. Although there are still challenges and areas of research to explore, the collaboration between AI and medicine promises a future where diagnostic errors are reduced, and patient care quality significantly improves. To achieve these goals, it is essential that AI developments are carried out in close collaboration with healthcare professionals, ensuring that technological solutions are aligned with clinical needs and seamlessly integrated into medical work environments.

Reference

1. Villarroel Salinas JC Clinical Reasoning and Its Current Deficit. *Revista Médica de Chile*. 2023
2. Norman G. Research in clinical reasoning: past history and current trends. *Medical Education*. 2005; 39(4): 418-427.
3. Eva KW. What every teacher needs to know about clinical reasoning. *Medical Education*. 2004; 38(1): 98-106.
4. Topol EJ. High-performance medicine: the convergence of human and artificial intelligence. *Nature Medicine*. 2019; 25(1): 44-56.
5. Esteva A, Kuprel B, Novoa RA, Ko J, Swetter SM, Blau HM & Thrun S. Dermatologist-level classification of skin cancer with deep neural networks. *Nature*. 2017; 542(7639): 115-118.
6. Gulshan V, Peng L, CoramM, Stumpe MC, Wu D, Narayanaswamy A, et al. Development and validation of a deep learning algorithm for detection of diabetic retinopathy in retinal fundus photographs. *JAMA*. 2016; 316(22): 2402-2410.
7. Miller DD. Explainable AI: The key to improving healthcare outcomes. *Journal of the American Medical Informatics Association*. 2019; 26(7): 810-812.
8. Gunning D & Aha D. DARPA's explainable artificial intelligence (XAI) program. *AI Magazine*. 2019; 40(2): 44-58.
9. Jiang F, Jiang Y, Zhi H, Dong Y, Li H, Ma S, et al. Artificial intelligence in healthcare: past, present, and future. *Stroke and Vascular Neurology*. 2017; 2(4): 230-243.
10. Fiske A, Henningsen P & Buyx A. Your robot therapist will see you now: Ethical implications of embodied artificial intelligence in psychiatry, psychology, and psychotherapy. *Journal of Medical Internet Research*. 2019; 21(5): e13216.
11. Shortliffe EH & Sepúlveda MJ. Clinical decision support in the era of artificial intelligence. *JAMA*. 2018; 320(21): 2199-2200.
12. Obermeyer Z & Emanuel EJ. Predicting the future—big data, machine learning, and clinical medicine. *The New England Journal of Medicine*. 2016; 375(13): 1216-1219.
13. Goldstein BA, Navar AM, Pencina MJ & Ioannidis JP. Opportunities and challenges in developing risk prediction models with electronic health records data: a systematic review. *Journal of the American Medical Informatics Association*. 2017; 24(1): 198-208.
14. Sutton RT, Pincock D, Baumgart DC, Sadowski DC, Fedorak RN & Kroeker KI. An overview of clinical decision support systems: benefits, risks, and strategies for success. *npj Digital Medicine*. 2020; 3(1): 1-10.
15. Reddy S, Fox J & Purohit MP. Artificial intelligence-enabled healthcare delivery. *Journal of the Royal Society of Medicine*. 2019; 112(1): 22-28.
16. Vayena E, Blasimme A & Cohen IG. Machine learning in medicine: Addressing ethical challenges. *PLoS Medicine*. 2018; 15(11): e1002689.