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Morphological research in the context of artificial intelligence: analysis of key dilemmas of implementation in medicine Dilemmas of implementing artificial intelligence in medicine

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Abstract

This review article examines the merits, problems, and future prospects of AI in morphological research for medicine. The research outlines important issues that AI application in medicine faces, such as a lack of standardized and labeled data, algorithm interpretability, and ethical considerations. To resolve these quandaries and assure the ethical, transparent, and effective deployment of AI in morphological research, the essay underlines the need of collaboration between stakeholders and interdisciplinary teams. The paper concludes that while the successful implementation of AI in morphological research has enormous potential for improving patient outcomes, lowering healthcare costs, and enabling more personalized healthcare, it will necessitate ongoing research and development to ensure ethical guidelines and best practices are followed.

Keywords: Morphological Research; Artificial Intelligence; Medicine.

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1. Introduction

Morphological research is concerned with the structure, shape, and function of biological tissues and organs [1-2]. Medical morphological research is crucial because it provides crucial knowledge for illness detection, treatment, and prevention [3-5]. Morphological research is employed in a variety of medical professions, including pathology, radiology, cancer, cardiology, and neurology [6-8]. Researchers and doctors can find abnormalities, classify diseases, measure the severity and progression of illnesses, and assess the efficacy of medicines by examining the

morphology of tissues and organs [9]. Morphological studies are employed in a variety of medical procedures and diagnostics. In pathology, for example, tissue sample analysis is critical for identifying tumors and other disorders [10]. Imaging techniques including X-rays, CT scans, and MRI are used in radiology to visualize the morphology of inside organs and tissues [11-12]. In cardiology, the structure of the heart's chambers and blood vessels is examined to identify and classify cardiovascular illnesses [13]. The shape of brain tissue is researched in neurology to identify and treat diseases of the brain [14]. Despite its

significance, morphological research is fraught with difficulties and constraints. When evaluating tissue samples, various pathologists may reach different findings based on their perception of morphology. Current morphological analysis approaches are time-consuming, labor-intensive, and rely on human skill, limiting the speed and scalability of research [15-16]. Furthermore, the heterogeneity of sample preparation and staining techniques can induce biases and impair morphological analysis accuracy [17]. These difficulties highlight the importance of developing new technologies and methodologies to increase the accuracy, speed, and scalability of morphological research.

2. Artificial Intelligence and its potential in morphological

Artificial intelligence (AI) is a branch of computer science that focuses on the development of algorithms and systems capable of performing activities that normally require human intelligence, including as perception, reasoning, learning, and decision-making [15-18-19]. AI systems may be taught on massive volumes of data to spot patterns, make predictions, and provide insights. AI's fundamental ideas include machine learning, deep learning, natural language processing, and computer vision [20]. AI has the potential to revolutionize medical research and clinical practice by delivering new methods for illness diagnosis, treatment, and prevention [21-22-23]. AI can be used in morphological studies to evaluate photos and identify patterns and structures that are not obvious to the naked eye [24]. AI systems can be trained to detect small changes in tissue morphology that may suggest disease progression or treatment response. AI can also be used to predict patient outcomes and identify diseases based on morphological traits [25]. There are various potential benefits of AI in morphological study. AI has the potential to give faster and more accurate diagnoses, resulting in early interventions and better patient outcomes. AI can also assist discovering new researchers in biomarkers and pharmacological targets, resulting in the development of more precise and effective medicines [26-27]. AI can improve the reliability and repeatability of research findings by reducing the variability and subjectivity of morphological analysis [28]. AI can also provide insights into illness mechanisms and aid in the creation of new therapeutics [29]. AI techniques such as deep learning and computer vision are frequently applied in morphological studies. Deep learning is the process of training artificial neural networks on massive volumes of data in order to detect patterns and make predictions [30-31]. The creation of algorithms that can analyze images and identify objects, forms, and patterns is what computer vision is all about. These techniques have been applied successfully to a variety of medical imaging modalities, including histology, radiography, and microscopy⁵³. Researchers may evaluate enormous amounts of data fast and efficiently by merging AI approaches with morphological studies, resulting in new insights and breakthroughs in medicine [32]. Recent developments in AI have increased the likelihood that this technology may transform morphological research and enhance therapeutic outcomes. However, there are certain significant issues that must be resolved for successful deployment in clinical settings before AI in morphological research may be successfully implemented [33-34]. This paper evaluates Kovtun et al., 2023

these quandaries and discusses potential solutions, such as standardizing data collection and analysis, annotating large amounts of data, the interpretability of AI algorithms, and the ethical considerations of AI implementation in medicine. By resolving these conundrums, we can fully utilize AI in morphological research and open the door for more accurate, effective, and reasonably priced medical research and clinical treatment.

3. Key dilemmas of AI implementation in morphological research

A. Key Dilemma 1: Lack of standardized data

The lack of consistent data is one of the major challenges in implementing AI in morphological research. Morphological data can be acquired and kept in a variety of forms, protocols, and levels of precision, making it difficult to compare data between research and institutions. This variation in data quality and format can limit AI systems' accuracy and generalizability [35-37]. Standardization of data collection and storage can assist researchers and institutions address this difficulty, but it requires collaboration and coordination across researchers and institutions [38]. Efforts are being made to define worldwide standards for morphological data collection and storage in order to increase data quality and comparability.

B. Key Dilemma 2: Lack of annotated data

Another major issue with integrating AI in morphological research is the scarcity of labeled data. To be effective, AI algorithms require a significant amount of labeled data. However, annotating data takes time and requires specific knowledge, which can stymie the development of AI systems for morphological study [39-40]. Furthermore, morphological interpretation can be subjective, resulting in variations in data labeling [39]. This issue can be solved by providing collaborative platforms that allow academics to share and analyze data or by developing automated annotation technologies [41]. Furthermore, approaches to account for inter-observer heterogeneity in morphological interpretation are needed to increase the accuracy and reliability of data labelling.

C. Key Dilemma 3: Lack of interpretability of AI algorithms

The lack of interpretability of AI algorithms is a third major issue in implementing AI in morphological studies. Many AI algorithms employed in morphological research, such as deep learning, are regarded as "black boxes," which means that the algorithms' processes and judgments are neither transparent nor easily understood by humans [42]. This lack of interpretability may hinder AI algorithm adoption and trust in clinical practice. Efforts are being made to create AI algorithms that are more transparent and interpretable, such as explainable AI, which can provide insights into AI algorithms' decision-making processes [43]. Furthermore, the advancement of explainable AI can aid in the detection of potential biases and flaws in algorithmic decision-making.

D. Key Dilemma 4: Ethical considerations of AI implementation in medicine

The ethical implications of AI deployment in medicine are a fourth important dilemma of integrating AI in the morphological study. While artificial intelligence has the potential to enhance patient outcomes and save healthcare costs, it also raises ethical questions about privacy, data security, and patient autonomy [44]. There is a need to build ethical frameworks and rules for the use of AI in clinical practice, such as the usage of patient data, bias management, and the possible impact on healthcare personnel [45]. Balancing the benefits and hazards of AI application in medicine requires continual debate and collaboration among healthcare professionals, researchers, governments, and patients. Transparency in the creation and implementation of AI algorithms can also help to ensure that ethical concerns are addressed [46].

4. The morphology of skin oncopathology as an example for successful implementation of AI in morphological research

The morphology of skin oncopathology is a great example of AI being used successfully in morphological research. Skin cancer is a widespread disease that affects millions of people worldwide, and correctly identifying and classifying skin lesions is crucial for diagnosis and treatment. However, due to the significant degree of variety in the appearance of skin lesions, precisely diagnosing different types of skin lesions can be difficult, even for expert dermatologists [47, 54-56]. AI algorithms have recently been created to recognize and classify skin lesions based on their morphology, allowing for more accurate and efficient diagnosis and treatment of skin cancer. These algorithms are trained on big data sets of skin photos using deep learning techniques to find patterns and features in the images that correspond to various types of skin lesions [48-49]. Stanford University researchers noticed that instead of creating a new algorithm, the researchers utilized a preexisting one developed by Google that had already been trained to recognize 1.28 million images from 1,000 categories of objects. Although this algorithm was initially designed to distinguish between cats and dogs, the researchers modified it to be able to distinguish between a cancerous carcinoma and a non-cancerous seborrheic keratosis [50]. Overall, the successful application of AI in skin oncopathology morphology illustrates AI's potential to improve the accuracy and efficiency of morphological research in dermatology and other domains. AI algorithms have the potential to improve the accuracy and efficiency of skin cancer diagnosis and treatment, thereby saving lives and lowering healthcare costs.

5. The role of collaboration in addressing the key dilemmas of AI implementation

Collaboration is required to address the key issues of AI deployment in morphological research. The obstacles of applying AI in healthcare, such as a lack of standardized and labeled data, algorithm interpretability, and ethical interdisciplinary necessitate expertise issues, and coordination numerous stakeholders among [51]. Collaboration among clinicians, pathologists, computer scientists, and data analysts can aid in the resolution of the absence of standardized and annotated data. These experts Kovtun et al., 2023

can collaborate to develop and curate enormous datasets of morphological photos, ensuring that the data is of high quality and covers a broad spectrum of morphological variants. Collaboration among these parties can also help to create standardized and consistent rules for data collection, annotation, and dissemination, which ensures that the data is relevant and accessible to researchers and doctors [51].

Interdisciplinary collaboration can also help with AI algorithm interpretability. Researchers can design more transparent and explainable AI algorithms by bringing together professionals from several domains such as computer science, statistics, and medicine. This can aid in the development of confidence in AI systems by ensuring that professionals and patients understand how the algorithms arrived at their diagnosis or treatment suggestions [52-56]. Furthermore, ethical concerns about AI deployment in medicine necessitate collaboration among stakeholders such as clinicians, researchers, politicians, and patients. Collaboration can aid in the identification and resolution of potential ethical issues related to AI in morphological research, such as algorithm bias, patient privacy, and the potential for AI to replace human expertise. Stakeholders can work together to define ethical principles and best practices for AI application in medicine through collaborative talks and consensus-building.

6. Future directions for ai in morphological research

AI has immense potential in morphological research, and various areas show promise for future progress. Integration of multimodal data, such as morphological data, genetic data, and clinical data, is one topic. AI algorithms can aid in the integration and analysis of various disparate data sources, allowing for more accurate and individualized diagnoses and treatment suggestions [37]. Another area of research is the creation of AI algorithms that can be learned from limited datasets. Most AI algorithms now require huge datasets for training, which can be difficult for rare diseases or diseases that impact specific populations. Developing AI systems that can learn from tiny datasets can assist in addressing this issue and improving the accuracy of diagnoses and treatment recommendations for various diseases [19]. Furthermore, creating trust in AI algorithms requires the creation of AI systems that can explain their thinking and decision-making processes. Explainable AI research is ongoing, and future breakthroughs in this area can help ensure that AI systems are transparent and accountable. Finally, collaboration among stakeholders like physicians, researchers, and policymakers is essential for the successful deployment of AI in morphological research. Stakeholders can solve the fundamental issues of AI deployment by working together to guarantee that AI systems are ethical, transparent, and successful in improving patient outcomes.

7. Conclusions

1. Morphological research in medicine is crucial for illness diagnosis, prognosis, and treatment insights.

2. Artificial intelligence has the potential to revolutionize morphological research.

3. AI can provide more precise, efficient, and personalized diagnosis and treatment suggestions.

4. The implementation of AI in medicine faces significant challenges, including lack of standardized data, algorithm interpretability, and ethical issues.

5. Stakeholders from various fields, including doctors, pathologists, data analysts, policymakers, and patients, need to collaborate to address these challenges.

6. Ethical, transparent, and effective AI applications in morphological research must be ensured.

7. Interdisciplinary teams need to work together to build and curate large, high-quality datasets.

8. AI algorithms must be made more transparent and understandable.

9. Ethical concerns surrounding AI implementation must be recognized and addressed.

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References

- [1] HKK. Mostafa. (2022). Different cells of the human body: categories and morphological characters. Journal of Microscopy and Ultrastructure;10:40–6. https://doi.org/10.4103/jmau.jmau 74 20.
- [2] X. Du. (2023). Organoids revealed: morphological analysis of the profound next generation in-vitro model with artificial intelligence. Bio-Des Manuf:1–21. <u>https://doi.org/10.1007/s42242-022-</u>00226-y.
- [3] Z. Zhang. (2018). Morphology-based prediction of cancer cell migration using an artificial neural network and a random decision forest. Integr Biol (Camb);10:758–67. https://doi.org/10.1039/c8ib00106e.
- [4] W. Walter. (2023). Artificial intelligence in hematological diagnostics: Game changer or gadget? Blood Rev;58:101019. https://doi.org/10.1016/j.blre.2022.101019.
- [5] EP. Balogh, BT. Miller, & JR. Ball. (2015). Committee on Diagnostic Error in Health Care, Board on Health Care Services, Medicine I of, et al. The Diagnostic Process.
- [6] L.A.D. Cooper. (2012). Integrated morphologic analysis for the identification and characterization of disease subtypes. J Am Med Inform Assoc;19:317–23. <u>https://doi.org/10.1136/amiajnl-2011-000700</u>.
- [7] L. Fass. (2008). Imaging and cancer: a review. Mol Oncol;2:115–52.
 - https://doi.org/10.1016/j.molonc.2008.04.001.
- [8] S. Hussain. (2022). Modern diagnostic imaging technique applications and risk factors in the medical field: A review. Biomed Res Int:5164970. https://doi.org/10.1155/2022/5164970.
- [9] M. Gosak. (2022). Networks behind the morphology and structural design of living systems. Phys Life Rev; 41: 1–21. https://doi.org/10.1016/j.plrev.2022.03.001.

- J. Zhang. (2017). Nondestructive tissue analysis for ex vivo and in vivo cancer diagnosis using a handheld mass spectrometry system. Sci Transl Med; 9, 1-13. https://doi.org/10.1126/scitranslmed.aan3968.
- [11] Y. Tsekhmister, V. Stepanenko, T. Konovalova, & B. Tsekhmister. (2022). Analysis of physicochemical natures of modern artifacts in MRI. Int J Onl Eng; 18:89–100. <u>https://doi.org/10.3991/ijoe.v18i03.25859</u>.
- [12] L. Kreel. (1991). Medical imaging. Postgrad Med J;67:334–46.
 https://doi.org/10.1136/pgmj.67.786.334.

 $[12] \qquad \mathbf{M} = \mathbf{E}_{1} - \frac{1000}{1000} + \frac{1$

- [13] JM. Felner. (1990). An overview of the cardiovascular system. In: Walker HK, Hall WD, Hurst JW, editors. Clinical methods: the history, physical, and laboratory examinations. 3rd ed., Boston: Butterworths.
- [14] A Neurosurgeon's Overview the Brain's Anatomy n.d. https://www.aans.org/en/Patients/Neurosurgical-Conditions-and-Treatments/Anatomy-of-the-Brain (accessed April 25, 2023).
- Y. Xu. (2021). Artificial intelligence: A powerful paradigm for scientific research. Innovation (Camb); 2:100179. https://doi.org/10.1016/j.xinn.2021.100179.
- [16] M. Shen. (2021). Multi defect detection and analysis of electron microscopy images with deep learning. Comp Mater Sci;199:110576. <u>https://doi.org/10.1016/j.commatsci.2021.110576</u>.
- [17] M. Czubaszek, K. Andraszek, D. Banaszewska, R. Walczak-Jędrzejowska. (2019). The effect of the staining technique on morphological and morphometric parameters of boar sperm. PLoS ONE;14:e0214243. https://doi.org/10.1371/journal.pone.0214243.
- [18] IA. Joiner. (2018). Artificial Intelligence. Emerging Library Technologies, Elsevier; p. 1–22. <u>https://doi.org/10.1016/B978-0-08-102253-</u> 5.00002-2.
- [19] F. Jiang. (2017). Artificial intelligence in healthcare: past, present and future. Stroke Vasc Neurol;2:230–43. <u>https://doi.org/10.1136/svn-</u> 2017-000101.
- [20] IH. Sarker. (2022). AI-Based Modeling: Techniques, Applications and Research Issues Towards Automation, Intelligent and Smart Systems. SN COMPUT SCI; 3:158. https://doi.org/10.1007/s42979-022-01043-x.
- [21] T. Davenport, & R. Kalakota. (2019). The potential for artificial intelligence in healthcare. Future Healthc J; 6:94–8. https://doi.org/10.7861/futurehosp.6-2-94.
- J. Bajwa, U. Munir, A. Nori, & B. Williams.
 (2021). Artificial intelligence in healthcare: transforming the practice of medicine. Future Healthc J;8:e188–94. https://doi.org/10.7861/fhj.2021-0095.
- [23] Artificial Intelligence in Medicine | IBM n.d. https://www.ibm.com/topics/artificial-intelligencemedicine (accessed April 25, 2023).

- B. Stoel. (2020). Use of artificial intelligence in imaging in rheumatology - current status and future perspectives. RMD Open; 6. https://doi.org/10.1136/rmdopen-2019-001063.
- [25] Y. Kumar, A. Koul, R. Singla, & MF. Ijaz. (2022). Artificial intelligence in disease diagnosis: a systematic literature review, synthesizing framework and future research agenda. J Ambient Intell Humaniz Comput:1–28. https://doi.org/10.1007/s12652-021-03612-z.
- [26] Y. You. (2022). Artificial intelligence in cancer target identification and drug discovery. Signal Transduct Target Ther; 7: 156. <u>https://doi.org/10.1038/s41392-022-00994-0</u>.
- [27] L. Barisoni. (2020). Digital pathology and computational image analysis in nephropathology. Nat Rev Nephrol; 16:669–85. <u>https://doi.org/10.1038/s41581-020-0321-6</u>.
- [28] R. Finelli, K. Leisegang, S. Tumallapalli, R. Henkel, & A. Agarwal. (2021). The validity and reliability of computer-aided semen analyzers in performing semen analysis: a systematic review. Transl Androl Urol;10:3069–79. https://doi.org/10.21037/tau-21-276.
- [29] S. Dara. (2022). Machine learning in drug discovery: A review. Artif Intell Rev;55:1947–99. https://doi.org/10.1007/s10462-021-10058-4.
- [30] MM. Taye. (2023). Understanding of Machine Learning with Deep Learning: Architectures, Workflow, Applications and Future Directions. Computers;12:91.

https://doi.org/10.3390/computers12050091.

- [31] IH. Sarker. (2021). Deep learning: A comprehensive overview on techniques, taxonomy, applications and research directions. SN COMPUT SCI;2:420. <u>https://doi.org/10.1007/s42979-021-00815-1</u>.
- [32] Z. Ahmad, S. Rahim, M. Zubair, & J. Abdul-Ghafar. (2021). Artificial intelligence (AI) in medicine, current applications and future role with special emphasis on its potential and promise in pathology: present and future impact, obstacles including costs and acceptance among pathologists, practical and philosophical considerations. A comprehensive review. Diagn Pathol;16:24. https://doi.org/10.1186/s13000-021-01085-4.
- [33] A. Wang. (2022). Characteristics of Artificial Intelligence Clinical Trials in the Field of Healthcare: A Cross-Sectional Study on ClinicalTrials.gov. Int J Environ Res Public Health;19.

https://doi.org/10.3390/ijerph192013691.

[34] W.H. Yu. (2021). Machine Learning Based on Morphological Features Enables Classification of Primary Intestinal T-Cell Lymphomas. Cancers (Basel);13.

https://doi.org/10.3390/cancers13215463.

 [35] M. Wankhade, A.C.S. Rao, & C. Kulkarni. (2022). A survey on sentiment analysis methods, applications, and challenges. Artif Intell Rev;55:5731–80. <u>https://doi.org/10.1007/s10462-022-10144-1</u>.

- [36] M. Tayefi. (2021). Challenges and opportunities beyond structured data in analysis of electronic health records. WIREs Comp Stat. <u>https://doi.org/10.1002/wics.1549</u>.
- [37] AM. Sebastian, & D. Peter. (2022). Artificial intelligence in cancer research: trends, challenges and future directions. Life (Basel);12. https://doi.org/10.3390/life12121991.
- [38] M. Gal, & DL. Rubinfeld. (2018). Data Standardization. SSRN Journal. https://doi.org/10.2139/ssrn.3326377.
- [39] H. Zhang. (2022). PathNarratives: Data annotation for pathological human-AI collaborative diagnosis. Front Med (Lausanne);9:1070072. https://doi.org/10.3389/fmed.2022.1070072.
- [40] HR. Tizhoosh, & L. Pantanowitz. (2018). Artificial intelligence and digital pathology: challenges and opportunities. J Pathol Inform;9:38. <u>https://doi.org/10.4103/jpi.jpi_53_18</u>.
- [41] A. Ibrahim. (2020). Artificial intelligence in digital breast pathology: Techniques and applications. Breast;49:267–73. https://doi.org/10.1016/j.breast.2019.12.007.
- [42] J. Petch, S. Di, W. & Nelson. (2022). Opening the black box: the promise and limitations of explainable machine learning in cardiology. Can J Cardiol;38:204–13. https://doi.org/10.1016/j.cjca.2021.09.004.
- [43] M. Ennab, & H. Mcheick. (2022). Designing an Interpretability-Based Model to Explain the Artificial Intelligence Algorithms in Healthcare. Diagnostics (Basel);12. https://doi.org/10.3390/diagnostics12071557.
- [44] DD. Farhud, & S. Zokaei. (2021). Ethical issues of artificial intelligence in medicine and healthcare. Iran J Public Health;50:i–v. https://doi.org/10.18502/ijph.v50i11.7600.
- [45] N. Naik. (2022). Legal and ethical consideration in artificial intelligence in healthcare: who takes responsibility? Front Surg;9:862322. https://doi.org/10.3389/fsurg.2022.862322.
- [46] J. Zhang, & ZM. Zhang. (2023). Ethics and governance of trustworthy medical artificial intelligence. BMC Med Inform Decis Mak;23:7. https://doi.org/10.1186/s12911-023-02103-9.
- [47] N. Melarkode, K. Srinivasan, SM. Qaisar, & P. Plawiak. (2023). AI-Powered Diagnosis of Skin Cancer: A Contemporary Review, Open Challenges and Future Research Directions. Cancers (Basel);15. https://doi.org/10.3390/cancers15041183.
- [48] K. Das. (2021). Machine learning and its application in skin cancer. Int J Environ Res Public Health;18.

https://doi.org/10.3390/ijerph182413409.

- [49] S. Bechelli, & J. Delhommelle. (2022). Machine Learning and Deep Learning Algorithms for Skin Cancer Classification from Dermoscopic Images. Bioengineering (Basel);9. <u>https://doi.org/10.3390/bioengineering9030097</u>.
- [50] Deep-learning algorithm matches dermatologists' ability to identify skin cancer | News Center | Stanford Medicine n.d.

https://med.stanford.edu/news/all-

news/2017/02/algorithm-matches-dermatologistsability-to-identify-skin-cancer.html (accessed April 25, 2023).

- [51] K. Seibert. (2021). Application scenarios for artificial intelligence in nursing care: rapid review. J Med Internet Res; 23:e26522. <u>https://doi.org/10.2196/26522</u>.
- [52] J. Amann, A. Blasimme, & E. Vayena. (2020). Explainability for artificial intelligence in healthcare: a multidisciplinary perspective. BMC Med Inform Decis Mak; 20: 310. https://doi.org/10.1186/s12911-020-01332-6.
- [53] D. Maltsev, & S. Bokova. (2022). Innovative Development of the Health Care Sector of the Future in the Conditions of Modern Challenges of the Covid-19 Coronavirus Infection in Ukraine. FM [Internet]. 30;1(1):4-16. Available from: <u>https://futurity-</u>

medicine.com/index.php/fm/article/view/1

- [54] T. Rakhimov, & M. Mukhamediev. (2022). Implementation of digital technologies in the medicine of the future. FM [Internet]. 30; 1(2): 12-23. Available from: <u>https://futurity-</u> medicine.com/index.php/fm/article/view/7
- [55] A. Raza. (2022). Practical aspects of the electronic system functioning in the field of medicine of the future (Pakistan). FM [Internet]. 30; 1(1): 45-56. Available from: <u>https://futurity-medicine.com/index.php/fm/article/view/5</u>
- [56] A.A. Sofy. (2023). An overview of artificial intelligence use in diabetic retinopathy treatment: a narrative review. FM [Internet]. 30; 2(1): 4-13. Available from: https://futurity-medicine.com/index.php/fm/article/view/21