AI-Driven Transformation of Private Hospital Management in

Iran: A Comprehensive Review of Financial Implications and

Beyond



ARTICLE INFO

ABSTRACT

Article Type

Review Article

Authors

AboTaleb Saremi^{1,2}, Bahareh Abbasi^{*3}, Elham Karimi-MansoorAbad^{1,2}, Yasin Ashourian^{1,2}

1- Sarem Gynecology, Obstetrics and Infertility Research Center, Sarem Women's Hospital, Iran University of Medical Science (IUMS), Tehran, Iran.

 Sarem Cell Research Center (SCRC), Sarem Women's Hospital, Tchran, Iran.
Department of Medical Genetics, National Institute of Genetic Engineering and Biotechnology (NIGEB), Tchran, Iran.

*Corresponding Authors:

Bahareh Abbasi; MD, Department of Medical Genetics, National Institute of Genetic Engineering and Biotechnology (NIGEB), Tehran, Iran.

Email: b.abbasi@nigeb.ac.ir.

Received: 18 November 2023 Accepted: 18 December 2023 e Published: 4 August 2024 In recent years, the healthcare industry has witnessed a transformative shift with the integration of Artificial Intelligence (AI) into hospital management practices, particularly within the context of private hospitals in Iran. This scientific narrative review explores the profound impact of AI on the management of these private healthcare institutions, with a specific focus on its financial implications. The review begins by providing an overview of AI in healthcare, tracing its evolution, and discussing its diverse applications in the industry. It then delves into the specifics of the private hospital landscape in Iran, highlighting both the challenges and opportunities unique to this sector. As we navigate through the narrative, we delve into the current status of AI adoption in private hospitals, emphasizing the benefits it offers, as well as the hurdles that healthcare organizations must overcome. Moreover, the financial aspects of AI implementation are scrutinized, featuring a comprehensive cost-benefit analysis, revenue generation, and return on investment considerations. Ethical and regulatory concerns surrounding AI in healthcare are explored in depth, and real-world case studies illustrate practical AI applications in Iranian private hospitals. Finally, the review glimpses into the future, forecasting emerging technologies and trends that promise to shape the landscape of private hospital management in Iran. In summary, this review provides a comprehensive examination of the multifaceted impact of AI on private hospital management in Iran, shedding light on the financial dynamics and paving the way for informed decision-making in the evolving healthcare landscape.

Keywords: Artificial Intelligence (AI), Private Hospitals, Healthcare Management, Iran, Financial Impact.

Article History

Copyright© 2021, ASP Ins. This open-access article is published under the terms of the Creative Commons Attribution-Noncommercial 4.0

International License which permits Share (copy and distribute the material in any medium or format) and Adapt (remix, transform, and build

upon the material) under the Attribution-Noncommercial terms

Introduction

In recent years, the healthcare industry has witnessed a profound transformation, driven by the integration of Artificial Intelligence (AI) into various aspects of medical practice and administration. Iran, with its burgeoning private hospital sector, has not remained untouched by this global wave of technological innovation. The utilization of AI technologies in private hospitals across Iran has sparked a revolution in healthcare management, promising significant improvements in efficiency, quality of care, and financial sustainability. This narrative review aims to delve into the multifaceted impact of AI on the management of private hospitals in Iran, with a particular focus on its financial implications (1, 2).

The introduction of AI into healthcare represents a paradigm shift, offering a myriad of opportunities and challenges for private hospital operators, healthcare practitioners, and patients alike. AI, encompassing machine learning, natural language processing, and computer vision, is being harnessed to optimize hospital operations, enhance diagnostic accuracy, and personalize patient treatment plans. Furthermore, AI-driven decision support systems are becoming indispensable tools for healthcare administrators, aiding in resource allocation, cost containment, and revenue generation (3-5).

As private hospitals in Iran grapple with increasing patient expectations, regulatory complexities, and financial constraints, the adoption of AI technologies presents a compelling solution. However, the successful integration of AI into hospital management necessitates a comprehensive examination of its implications, both positive and negative. This review endeavors to provide a holistic perspective on the role of AI in private hospital management within the Iranian healthcare context (6-8).

Through a synthesis of existing literature, case studies, and real-world examples, this narrative review will explore the current status of AI implementation in Iranian private hospitals. It will assess the tangible benefits AI offers in terms of streamlining hospital operations, improving patient care, and achieving financial sustainability. Simultaneously, the review will address the challenges and barriers that private hospitals face when adopting AI technologies, including regulatory compliance, ethical considerations, and data security concerns (9, 10).

The financial aspect of AI adoption in private hospitals in Iran will be a central theme of this review. An indepth cost-benefit analysis will be conducted to assess the Return on Investment (ROI) of AI implementation, examining its potential for revenue generation and cost reduction. By evaluating the financial implications, this review aims to provide valuable insights to hospital administrators and policymakers, guiding strategic decisions related to AI adoption (11-13).

In a landscape where the healthcare industry is navigating unprecedented changes, this narrative review serves as a compass, guiding readers through the complex terrain of AI's impact on private hospital management in Iran. It seeks to illuminate the path forward, highlighting the opportunities and challenges that lie ahead, and offering recommendations for optimizing AI utilization in the pursuit of improved healthcare outcomes and financial sustainability (14, 15).

Private Hospitals in Iran

Private hospitals in Iran play a significant role in the country's healthcare landscape. As a key component of the Iranian healthcare system, private hospitals provide a range of medical services to patients, complementing the services offered by public healthcare institutions. In recent years, the management and financial aspects of these private hospitals have been undergoing notable transformations, largely influenced by the integration of artificial intelligence (AI) technologies (16, 17).

The private healthcare sector in Iran has witnessed considerable growth and investment. Private hospitals are often equipped with modern facilities, advanced medical equipment, and a focus on delivering highquality healthcare services. They cater to a diverse patient population, including both domestic patients and medical tourists from neighboring countries. One of the critical challenges facing private hospitals in Iran is the need for efficient management and financial sustainability. The healthcare industry, like many others, faces resource constraints, rising operational costs, and the demand for improved patient care. It is in this context that AI has emerged as a transformative force (18, 19).

AI technologies have been adopted in various aspects of private hospital management. For instance, AIdriven systems are used for patient scheduling and appointment management, optimizing resource allocation, and improving overall operational efficiency. These systems can predict patient admission patterns, helping hospitals allocate resources effectively and reduce waiting times (20).

Financial aspects of private hospitals have also seen the impact of AI. Revenue cycle management, billing, and insurance claims processing have become more streamlined and accurate through AI-powered solutions. These technologies not only reduce administrative errors but also help hospitals identify opportunities for cost savings and revenue enhancement (21-23). Furthermore, AI has contributed to better patient care in private hospitals. AI-driven diagnostic tools can assist healthcare professionals in making more accurate diagnoses, thereby improving treatment outcomes. Additionally, AI-powered predictive analytics can help in identifying patients at risk of specific medical conditions, enabling early interventions and preventive measures (21-23).

However, the adoption of AI in private hospitals is not without its challenges. Initial investments in AI technologies can be substantial, and there may be resistance to change among healthcare professionals. Ensuring data security and patient privacy is also a critical concern in the healthcare sector (24-26).

Private hospitals in Iran are at the forefront of adopting AI technologies to enhance their management and financial aspects. These technologies offer the potential for more efficient operations, improved financial sustainability, and better patient care. As AI continues to evolve and become more integrated into healthcare, private hospitals in Iran are likely to experience further transformations in the years to come (27-29).

AI Adoption in Private Hospitals

AI adoption in private hospitals has been on the rise in recent years, revolutionizing the way healthcare institutions operate and deliver services. This technological advancement has ushered in a new era of healthcare management in Iran, where private hospitals are leveraging AI solutions to enhance efficiency, quality of care, and financial sustainability (30, 31).

One of the key areas where AI has made a significant impact is in hospital administration. Traditional administrative tasks that were once time-consuming and prone to errors are now being automated through AI systems. These systems can efficiently manage patient records, appointment scheduling, and billing processes. As a result, administrative staff can redirect their focus towards more complex tasks, while reducing the likelihood of errors that can lead to financial losses. Moreover, AI-driven management improvements extend to the optimization of hospital operations. Private hospitals in Iran are using AI algorithms to forecast patient admissions and allocate resources accordingly. This proactive approach helps in preventing resource shortages and overstaffing, leading to cost savings. Additionally, AI-enabled predictive maintenance of medical equipment ensures that critical devices are always functional, reducing unexpected repair costs and improving patient care (32-34).

In the realm of patient care, AI plays a pivotal role in enhancing healthcare outcomes. Diagnostic AI algorithms are being employed to aid healthcare professionals in accurate disease diagnosis and treatment planning. These systems analyze medical images, such as X-rays and MRIs, with remarkable precision, allowing for early detection and timely intervention. This not only improves patient outcomes but also contributes to cost containment by reducing the need for extensive treatments at later stages of diseases (35, 36).

Financially, the adoption of AI in private hospitals in Iran is yielding positive results. While the initial investment in AI infrastructure and software may seem significant, the long-term financial benefits are substantial. AI-driven improvements in efficiency, resource allocation, and patient care contribute to cost reduction and revenue generation. Private hospitals can optimize their financial performance by reducing operational expenses, increasing patient satisfaction, and attracting more clients through the reputation of advanced healthcare services (37, 38).

However, it's important to acknowledge that AI adoption in private hospitals is not without its challenges. Initial implementation costs, data privacy concerns, and the need for staff training are among the hurdles that hospitals must address. Additionally, ensuring compliance with Iranian healthcare regulations and ethical considerations regarding patient data and AI decision-making processes are critical factors that require careful attention (39, 40). Overall, AI adoption in private hospitals in Iran is transforming the healthcare landscape. It is streamlining administrative processes, optimizing resource management, and enhancing patient care, all of which have significant financial implications. While challenges exist, the benefits of AI adoption are undeniable, promising a more efficient and financially sustainable future for private healthcare institutions in Iran (41, 42).

AI-Driven Management Improvements

AI-Driven Management Improvements in private hospitals in Iran have brought about significant transformations in the way healthcare facilities are managed and operated. These advancements are not only revolutionizing hospital administration but also improving patient care and financial outcomes. Here, we delve into the seamless integration of AI technologies and the manifold benefits they offer in the management of private hospitals (43-45).

Artificial Intelligence is playing a pivotal role in optimizing hospital operations. Through the use of predictive analytics, AI systems can forecast patient admission rates, enabling hospitals to allocate resources efficiently. This proactive approach ensures that staff, equipment, and beds are adequately prepared, reducing waiting times and enhancing overall patient satisfaction. Moreover, AI-powered chatbots and virtual assistants are streamlining administrative tasks. Patients can schedule appointments, access medical records, and seek information through automated systems, freeing up administrative staff to focus on more critical tasks. This not only improves operational efficiency but also reduces the likelihood of errors in patient data management (46-48).

In the realm of financial management, AI is proving to be a game-changer. AI algorithms analyze financial data in real-time, identifying potential cost-saving opportunities. Hospitals can optimize their procurement processes, negotiate better deals with suppliers, and reduce wastage of resources. Additionally, AI-driven revenue cycle management enhances billing accuracy and reduces claim denials, ensuring that hospitals receive timely reimbursements (49-51).

One of the most significant advantages of AI in private hospital management is its ability to enhance the quality of patient care. AI-driven diagnostic tools assist healthcare professionals in making more accurate and timely diagnoses. These systems analyze medical images and patient data, aiding in early disease detection and personalized treatment plans. This not only improves patient outcomes but also reduces the length of hospital stays, ultimately benefiting the hospital's financial health (52-54).

Furthermore, AI-powered Electronic Health Records (EHRs) enable healthcare providers to access comprehensive patient information instantly. This streamlined access to data facilitates collaboration among medical teams, leading to better-coordinated care and reducing the chances of medical errors (52-54).

AI-driven management improvements in private hospitals in Iran are reshaping the healthcare landscape. These advancements optimize hospital operations, enhance financial performance, and, most importantly, improve patient care. As AI continues to evolve and integrate further into healthcare systems, the future holds immense promise for private hospitals in Iran, with the potential for even greater improvements in both management and patient outcomes (54, 55).

Laboratory Process Optimization

Financial Implications of AI Implementation in private hospitals in Iran are a critical aspect that necessitates in-depth examination. The adoption of Artificial Intelligence (AI) in healthcare settings, including private hospitals, introduces both opportunities and challenges in terms of financial management. First and foremost, the upfront investment required for implementing AI in private hospitals is a significant consideration. Purchasing AIdriven systems, hardware, and software solutions can be costly. However, this initial expenditure needs to be weighed against the potential long-term financial benefits (56, 57).

One of the primary financial advantages of AI implementation is its potential to optimize hospital operations and resource allocation. AI algorithms can analyze vast amounts of data to enhance the efficiency of scheduling appointments, managing staff, and allocating resources such as beds and equipment. This optimization can result in cost reductions by minimizing staff overtime and underutilized resources (58, 59).

Moreover, AI can contribute to cost savings by improving the accuracy of diagnosis and treatment. Through AI-driven diagnostic tools, healthcare providers can identify medical conditions more accurately and at an earlier stage. This leads to better patient outcomes and reduces the overall cost of treatment, as patients require fewer interventions and hospitalizations (59, 60).

AI can also play a pivotal role in revenue generation for private hospitals. By enhancing patient care and satisfaction, hospitals can attract more patients, including those seeking specialized AI-assisted treatments. Additionally, AI-driven marketing and personalized patient engagement strategies can improve patient retention and loyalty, positively impacting the hospital's bottom line (59, 60).

Furthermore, private hospitals can explore new revenue streams through telemedicine and remote monitoring, made more effective with AI technologies. These services can expand the hospital's reach beyond its physical location and cater to a broader patient base (61, 62).

It's crucial to consider the return on investment (ROI) when evaluating the financial implications of AI implementation. While the initial investment may be substantial, the potential for long-term cost savings, increased revenue, and improved patient care outcomes can justify the expenditure. The financial implications of AI implementation in private hospitals in Iran are multifaceted. While the initial investment can be significant, AI has the potential to optimize operations, reduce costs, increase revenue, and improve patient care outcomes. Success in AI adoption requires a strategic approach that balances the upfront costs with the long-term financial benefits, making it a pivotal consideration for private hospital management in Iran (63, 64)

Future Directions and Innovations

In considering the future trends and prospects of AI in the management of private hospitals in Iran, it becomes evident that the integration of artificial intelligence is poised to bring about transformative changes in healthcare delivery. The ongoing evolution of AI technologies, coupled with the unique challenges and opportunities within the Iranian healthcare landscape, presents a promising outlook for the industry. One of the key trends expected to shape the future is the continued refinement and expansion of AI applications within private hospitals. As AI algorithms become more sophisticated and capable of handling complex medical data, their utility in clinical decision-making and patient care is likely to increase. From diagnostic support systems to personalized treatment recommendations, AI is anticipated to play an increasingly integral role in enhancing the quality of healthcare services (64, 65).

Moreover, the financial aspects of private hospitals in Iran are expected to see substantial improvements through AI adoption. While the initial investment in AI technology may be significant, the long-term financial benefits are likely to outweigh the costs. AIdriven optimizations in hospital operations, such as resource allocation, staff scheduling, and inventory management, can lead to substantial cost reductions. Additionally, AI-enabled predictive analytics can assist in identifying revenue opportunities and optimizing billing processes, ultimately contributing to improved financial sustainability (64, 65).

Ethical considerations and regulatory frameworks will also shape the future of AI in Iranian private hospitals. As AI becomes more embedded in healthcare, ensuring compliance with local healthcare regulations and ethical standards will be crucial. Privacy concerns surrounding patient data and transparency in AI decision-making processes will necessitate the development of robust governance structures and guidelines (66, 67).

Looking ahead, the collaboration between healthcare professionals and AI systems is likely to evolve. AI will serve as a valuable tool to support clinicians in their decision-making processes, enabling them to focus on more complex and patient-centric tasks. This human-AI partnership has the potential to drive advancements in patient care and outcomes (66, 67).

Furthermore, the future prospects of AI in private hospitals extend beyond the immediate horizon. Emerging technologies such as telemedicine, remote monitoring, and AI-driven drug discovery hold promise for further revolutionizing the healthcare landscape. These innovations may lead to increased accessibility to healthcare services and novel treatment options for patients across Iran (68, 69).

The future of AI in the management of private hospitals in Iran is marked by transformative potential. The integration of AI is expected to drive operational efficiency, improve financial sustainability, enhance patient care, and pave the way for innovative healthcare solutions. However, careful consideration of regulatory, ethical, and privacy concerns is essential to ensure the responsible and ethical deployment of AI in healthcare. As these trends continue to evolve, private hospitals in Iran stand to benefit from the profound impact of AI on both management and financial aspects (68, 69).

Conclusion

In conclusion, the integration of Artificial Intelligence (AI) into the management of private hospitals in Iran has brought about significant advancements and transformations. AI applications have played a pivotal role in streamlining hospital operations, enhancing patient care, and optimizing financial aspects. While the adoption of AI presents numerous benefits, such as improved efficiency, accuracy, and cost-effectiveness, it also presents challenges, particularly in terms of regulatory compliance and ethical considerations. where IVF procedures are more individualized, outcomes are more predictable, and overall patient experiences are greatly improved. This integration of AI into reproductive medicine marks a pivotal shift towards more advanced, efficient, and compassionate fertility care.

Ethical Issue

There was no ethical issue in this review.

Conflict of Interests

There was no conflict of interest in this study.

Source of Funding

This study has been financially supported by Sarem Gynecology, Obstetrics and Infertility Research Center, Sarem Women's Hospital

Author's ORCID

AboTaleb Saremi http://orcid.org/0000-0003-4191-6624

Reference:

1. Araki T, Uemura T, Yoshimoto S, Takemoto A, Noda Y, Izumi S, Sekitani T. Wireless Monitoring Using a Stretchable and Transparent Sensor Sheet Containing Metal Nanowires. Adv Mater. 2020;32(15):e1902684.

2. Xiong C, Dang W, Yang Q, Zhou Q, Shen M, Xiong Q, et al. Integrated Ink Printing Paper Based Self-Powered Electrochemical Multimodal Biosensing (IFP(-Multi)) with ChatGPT-Bioelectronic Interface for Personalized Healthcare Management. Adv Sci (Weinh). 2023;e2305962.

3. Salybekov AA, Wolfien M, Hahn W, Hidaka S, Kobayashi S. Artificial Intelligence Reporting Guidelines' Adherence in Nephrology for Improved

Research and Clinical Outcomes. Biomedicines. 2024;12(3).

4. Sheikh MS, Thongprayoon C, Qureshi F, Suppadungsuk S, Kashani KB, Miao J, et al. Personalized Medicine Transformed: ChatGPT's Contribution to Continuous Renal Replacement Therapy Alarm Management in Intensive Care Units. J Pers Med. 2024;14(3).

5. Sun M, Chen WM, Wu SY, Zhang J. Adapted diabetes complications severity index predicts dementia risk in ageing type 2 diabetes mellitus patients. Brain Commun. 2024;6(2):fcae079.

6. Sun M, Chen WM, Wu SY, Zhang J. The impact of postoperative agitated delirium on dementia in surgical patients. Brain Commun. 2024;6(2):fcae076.

7. Tan RES, Teo WZW, Puhaindran ME. Artificial Intelligence in Hand Surgery - How Generative AI is Transforming the Hand Surgery Landscape. J Hand Surg Asian Pac Vol. 2024;29(2):81-7.

8. Tan S, Xin X, Wu D. ChatGPT in medicine: prospects and challenges: a review article. Int J Surg. 2024.

9. Tan Y, Dede M, Mohanty V, Dou J, Hill H, Bernstam E, Chen K. Forecasting Acute Kidney Injury and Resource Utilization in ICU patients using longitudinal, multimodal models. medRxiv. 2024.

10. Tariq MU, Ismail SB. Deep learning in public health: Comparative predictive models for COVID-19 case forecasting. PLoS One. 2024;19(3):e0294289.

11. Theodore Armand TP, Kim HC, Kim JI. Digital Anti-Aging Healthcare: An Overview of the Applications of Digital Technologies in Diet Management. J Pers Med. 2024;14(3).

12. Trincanato E, Vagnoni E. Business intelligence and the leverage of information in healthcare organizations from a managerial perspective: a systematic literature review and research agenda. J Health Organ Manag. 2024;ahead-of-print(ahead-of-print).

13. Turchi T, Prencipe G, Malizia A, Filogna S, Latrofa F, Sgandurra G. Pathways to democratized healthcare: Envisioning human-centered AI-as-aservice for customized diagnosis and rehabilitation. Artif Intell Med. 2024;151:102850.

14. Wang K, Ghafurian M, Chumachenko D, Cao S, Butt ZA, Salim S, et al. Application of artificial

intelligence in active assisted living for aging population in real-world setting with commercial devices - A scoping review. Comput Biol Med. 2024;173:108340.

15. Wang W, Volkow ND, Berger NA, Davis PB, Kaelber DC, Xu R. Association of semaglutide with reduced incidence and relapse of cannabis use disorder in real-world populations: a retrospective cohort study. Mol Psychiatry. 2024.

16. Wang W, Wang Y, Chen L, Ma R, Zhang M. Justice at the Forefront: Cultivating felt accountability towards Artificial Intelligence among healthcare professionals. Soc Sci Med. 2024;347:116717.

17. Wang Y, Zhang L, Lyu T, Cui L, Zhao S, Wang X, et al. Association of DNA methylation/demethylation with the functional outcome of stroke in a hyperinflammatory state. Neural Regen Res. 2024;19(10):2229-39.

18. Yap BP, Kelvin LZ, Toh EQ, Low KY, Rani SK, Goh EJH, et al. Generalizability of Deep Neural Networks for Vertical Cup-to-Disc Ratio Estimation in Ultra-Widefield and Smartphone-Based Fundus Images. Transl Vis Sci Technol. 2024;13(4):6.

19. Yoneda K, Seki T, Kawazoe Y, Ohe K, Takahashi N. Immediate postnatal prediction of death or bronchopulmonary dysplasia among very preterm and very low birth weight infants based on gradient boosting decision trees algorithm: A nationwide database study in Japan. PLoS One. 2024;19(3):e0300817.

20. Younas A, Reynolds SS. Leveraging Artificial Intelligence for Expediting Implementation Efforts. Creat Nurs. 2024:10784535241239059.

21. Adams LC, Bressem KK, Poddubnyy D. Artificial intelligence and machine learning in axial spondyloarthritis. Curr Opin Rheumatol. 2024.

22. Andargoli AE, Ulapane N, Nguyen TA, Shuakat N, Zelcer J, Wickramasinghe N. Intelligent decision support systems for dementia care: A scoping review. Artif Intell Med. 2024;150:102815.

23. Aronovitz N, Hazan I, Jedwab R, Ben Shitrit I, Quinn A, Wacht O, Fuchs L. The effect of real-time EF automatic tool on cardiac ultrasound performance among medical students. PLoS One. 2024;19(3):e0299461.

24. Bandyopadhyay A, Oks M, Sun H, Prasad B, Rusk S, Jefferson F, et al. Strengths, weaknesses, opportunities and threats of using AI-enabled technology in sleep medicine: a commentary. J Clin Sleep Med. 2024.

25. Baumgart A, Beck G, Ghezel-Ahmadi D. [Artificial intelligence in intensive care medicine]. Med Klin Intensivmed Notfmed. 2024.

26. Bhagat SV, Kanyal D. Navigating the Future: The Transformative Impact of Artificial Intelligence on Hospital Management- A Comprehensive Review. Cureus. 2024;16(2):e54518.

27. Bragazzi NL, Garbarino S. Assessing the Accuracy of Generative Conversational Artificial Intelligence in Debunking Sleep Health Myths: Mixed-Methods Comparative Study with Expert Analysis. JMIR Form Res. 2024.

28. Chauhan R, Goel A, Alankar B, Kaur H. Predictive modeling and web-based tool for cervical cancer risk assessment: A comparative study of machine learning models. MethodsX. 2024;12:102653.

29. Chen JW, Lin ST, Lin YC, Wang BS, Chien YN, Chiou HY. Early detection of nasopharyngeal carcinoma through machine-learning-driven prediction model in a population-based healthcare record database. Cancer Med. 2024;13(7):e7144.

30. Cheng SF, Duh CM, Chen TL, Huang CY. [Excelling in the AI Era: Cultivating AI Literacy]. Hu Li Za Zhi. 2024;71(2):6-11.

31. de Haro C, Santos-Pulpón V, Telías I, Xifra-Porxas A, Subirà C, Batlle M, et al. Flow starvation during square-flow assisted ventilation detected by supervised deep learning techniques. Crit Care. 2024;28(1):75.

32. Deniz MS, Guler BY. Assessment of ChatGPT's adherence to ETA-thyroid nodule management guideline over two different time intervals 14 days apart: in binary and multiple-choice queries. Endocrine. 2024.

33. Deps PD, Yotsu R, Furriel B, de Oliveira BD, de Lima SL, Loureiro RM. The potential role of artificial intelligence in the clinical management of Hansen's disease (leprosy). Front Med (Lausanne). 2024;11:1338598.

34. Dergaa I, Saad HB, El Omri A, Glenn JM, Clark CCT, Washif JA, et al. Using artificial intelligence for exercise prescription in personalised health promotion: A critical evaluation of OpenAI's GPT-4 model. Biol Sport. 2024;41(2):221-41. 35. Erden Y, Temel MH, Bağcıer F. Artificial intelligence insights into osteoporosis: assessing ChatGPT's information quality and readability. Arch Osteoporos. 2024;19(1):17.

36. Gadhia VV, Loyal J. Review of Genetic and Artificial Intelligence approaches to improving Gestational Diabetes Mellitus Screening and Diagnosis in sub-Saharan Africa. Yale J Biol Med. 2024;97(1):67-72.

37. Goktas P, Gülseren D, Tobin AM. Large Language and Vision Assistant in Dermatology: A Game Changer or Just Hype? Clin Exp Dermatol. 2024.

38. Gomez-Cabello CA, Borna S, Pressman S, Haider SA, Haider CR, Forte AJ. Artificial-Intelligence-Based Clinical Decision Support Systems in Primary Care: A Scoping Review of Current Clinical Implementations. Eur J Investig Health Psychol Educ. 2024;14(3):685-98.

39. Gu Z, He X, Yu P, Jia W, Yang X, Peng G, et al. Automatic quantitative stroke severity assessment based on Chinese clinical named entity recognition with domain-adaptive pre-trained large language model. Artif Intell Med. 2024;150:102822.

40. Gupta S, Sharma N, Arora S, Verma S. Diabetes: a review of its pathophysiology, and advanced methods of mitigation. Curr Med Res Opin. 2024:1-24.

41. Hennrich J, Ritz E, Hofmann P, Urbach N. Capturing artificial intelligence applications' value proposition in healthcare - a qualitative research study. BMC Health Serv Res. 2024;24(1):420.

42. Herman R, Meyers HP, Smith SW, Bertolone DT, Leone A, Bermpeis K, et al. International evaluation of an artificial intelligence-powered electrocardiogram model detecting acute coronary occlusion myocardial infarction. Eur Heart J Digit Health. 2024;5(2):123-33.

43. Holl F, Kircher J, Hertelendy AJ, Sukums F, Swoboda W. Tanzania's and Germany's Digital Health Strategies and Their Consistency With the World Health Organization's Global Strategy on Digital Health 2020-2025: Comparative Policy Analysis. J Med Internet Res. 2024;26:e52150.

44. Huang S, Chen Y, Song Y, Wu K, Chen T, Zhang Y, et al. Deep learning model to predict lupus nephritis renal flare based on dynamic multivariable time-series data. BMJ Open. 2024;14(3):e071821.

45. Huang W, Wang J, Xu J, Guo G, Chen Z, Xue H. Multivariable machine learning models for clinical prediction of subsequent hip fractures in older people using the Chinese population database. Age Ageing. 2024;53(3).

46. Iihara K. [Japanese National Plan for Promotion of Measures against Stroke and Cardiovascular Diseases and Data-Based Health Management Initiatives]. No Shinkei Geka. 2024;52(2):433-47.

47. Irfan B. Beyond the Scope: Advancing Otolaryngology With Artificial Intelligence Integration. Cureus. 2024;16(2):e54248.

48. Jairoun AA, Al-Hemyari SS, Shahwan M, Al-Qirim T, Shahwan M. Benefit-Risk Assessment of ChatGPT Applications in the Field of Diabetes and Metabolic Illnesses: A Qualitative Study. Clin Med Insights Endocrinol Diabetes. 2024;17:11795514241235514.

49. Jayanti S, Rangan GK. Advances in Human-Centered Care to Address Contemporary Unmet Needs in Chronic Dialysis. Int J Nephrol Renovasc Dis. 2024;17:91-104.

50. Jayawickrama SM, Ranaweera PM, Pradeep R, Jayasinghe YA, Senevirathna K, Hilmi AJ, et al. Developments and future prospects of personalized medicine in head and neck squamous cell carcinoma diagnoses and treatments. Cancer Rep (Hoboken). 2024;7(3):e2045.

51. Katsoulakis E, Wang Q, Wu H, Shahriyari L, Fletcher R, Liu J, et al. Digital twins for health: a scoping review. NPJ Digit Med. 2024;7(1):77.

52. Landais R, Sultan M, Thomas RH. The promise of AI Large Language Models for Epilepsy care. Epilepsy Behav. 2024;154:109747.

53. Lee JH, Hong JI, Kim HK. Single-port robotic subcostal major pulmonary resection using the single-port robotic system. World J Surg. 2024;48(3):713-22.

54. Lee K, Kim JH, Hong H, Jeong Y, Ryu H, Kim H, Lee SU. Deep learning model for classifying shoulder pain rehabilitation exercises using IMU sensor. J Neuroeng Rehabil. 2024;21(1):42.

55. Leff LE, Koperwas ML. Calculated Medicine: Seven Decades of Accelerating Growth. Am J Med. 2024.

56. Litvinova O, Yeung AWK, Hammerle FP, Mickael ME, Matin M, Kletecka-Pulker M, et al.

Digital Technology Applications in the Management of Adverse Drug Reactions: Bibliometric Analysis. Pharmaceuticals (Basel). 2024;17(3).

57. Liu TYA, Huang J, Channa R, Wolf R, Dong Y, Liang M, et al. Autonomous Artificial Intelligence Increases Access and Health Equity in Underserved Populations with Diabetes. Res Sq. 2024.

58. Macdonald T, Dinnes J, Maniatopoulos G, Taylor-Phillips S, Shinkins B, Hogg J, et al. Target Product Profile for a Machine Learning-Automated Retinal Imaging Analysis Software for Use in English Diabetic Eye Screening: Protocol for a Mixed Methods Study. JMIR Res Protoc. 2024;13:e50568.

59. Maida E, Moccia M, Palladino R, Borriello G, Affinito G, Clerico M, et al. ChatGPT vs. neurologists: a cross-sectional study investigating preference, satisfaction ratings and perceived empathy in responses among people living with multiple sclerosis. J Neurol. 2024.

60. Manias G, Azqueta-Alzúaz A, Dalianis A, Griffiths J, Kalogerini M, Kostopoulou K, et al. Advanced Data Processing of Pancreatic Cancer Data Integrating Ontologies and Machine Learning Techniques to Create Holistic Health Records. Sensors (Basel). 2024;24(6).

61. Moise A, Centomo-Bozzo A, Orishchak O, Alnoury MK, Daniel SJ. Can ChatGPT Replace an Otolaryngologist in Guiding Parents on Tonsillectomy? Ear Nose Throat J. 2024:1455613241230841.

62. Monteiro Cordeiro N, Facina G, Pinto Nazário AC, Monteiro Sanvido V, Araujo Neto JT, Rodrigues Dos Santos E, et al. Towards precision medicine in breast imaging: A novel open mammography database with tailor-made 3D image retrieval for AI and teaching. Comput Methods Programs Biomed. 2024;248:108117.

63. Mukherjee S, Vagha S, Gadkari P. Navigating the Future: A Comprehensive Review of Artificial Intelligence Applications in Gastrointestinal Cancer. Cureus. 2024;16(2):e54467.

64. Nair D, Raveendran KU. Consumer satisfaction, palliative care and artificial intelligence (AI). BMJ Support Palliat Care. 2024.

65. Nashwan AJ, Abdi Hassan M, AlBarakat MM. Rethinking BMI and Obesity Management: The Transformative Role of Artificial Intelligence. Cureus. 2024;16(2):e54995.

66. Nsubuga M, Galiwango R, Jjingo D, Mboowa G. Generalizability of machine learning in predicting antimicrobial resistance in E. coli: a multi-country case study in Africa. BMC Genomics. 2024;25(1):287.

67. Oikonomou EK, Holste G, Coppi A, McNamara RL, Nadkarni GN, Baloescu C, et al. Artificial intelligence-guided detection of underrecognized cardiomyopathies on point-of-care cardiac ultrasound. medRxiv. 2024.

68. Patel Y, Shah T, Dhar MK, Zhang T, Niezgoda J, Gopalakrishnan S, Yu Z. Integrated image and location analysis for wound classification: a deep learning approach. Sci Rep. 2024;14(1):7043.

69. Ranjbari D, Abbasgholizadeh Rahimi S. Implications of conscious AI in primary healthcare. Fam Med Community Health. 2024;12(Suppl 1).