



AI in Medical System: Exploring its Role and Future in Healthcare Innovation

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Abstract

Artificial intelligence (AI) is becoming increasingly integral to healthcare, offering unparalleled opportunities for patient-centered care while simultaneously presenting complex challenges. This manuscript provides a narrative review of AI applications in healthcare systems, with particular emphasis on policy frameworks, ethical considerations, and technological barriers. Key challenges include the complexity of diagnostic tasks, opaque AI-driven processes and models, data security concerns, and user interface design issues. Additional concerns such as performance anxiety and communication difficulties highlight the importance of careful implementation strategies. The review underscores that AI can alleviate workloads, streamline operations, and enhance service delivery, but consistently emphasizes that physicians cannot be replaced by AI and should instead be augmented by it. Ethical concerns, privacy safeguards, and equitable access remain central to responsible adoption. The paper further calls for the establishment of robust regulatory frameworks, interpretable AI models, and continuous education to prepare healthcare providers and patients for collaboration with AI systems. Looking ahead, long-term studies should explore the impact of AI in healthcare on patient attitudes, comparative efficacy across medical domains, and the moral frameworks guiding its use. Rather than supplanting human medical expertise, AI should complement it to create a more efficient, equitable, and responsive healthcare system.

Keywords: Artificial Intelligence (AI) in Healthcare, Machine Learning (ML), Healthcare Innovation, Digital Transformation, Big Data Analytics, Clinical Care System, Ethics in Healthcare Technology

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1. INTRODUCTION

Artificial Intelligence (AI) is increasingly recognized as a transformative force in healthcare, with the potential to improve efficiency, reduce costs, and enhance patient outcomes [1]. Recent studies highlight that the global AI healthcare market, valued at \$29.01 billion in 2024, is projected to grow to \$504.17 billion by 2032, reflecting a compound annual growth rate of 44% [2]. This study evaluates the possible effects of AI on healthcare from a cost-effectiveness standpoint, supported by past performance, recent technological developments, and an examination of the expenses related to developing and deploying machine learning (ML) in both healthcare and pharmaceutical sectors.

Healthcare remains one of the largest industries in the global economy, and AI applications are now visible across multiple domains. In the pharmaceutical sector, AI is being used to accelerate drug discovery and marketing, with generative AI projected to expand at a Compound Annual Growth Rate (CAGR) of 36–38% over the next five years [3]. In oncology, AI supports imaging and cell analysis, while in healthcare administration, AI-driven data analytics are enhancing patient care delivery [4].

For example, in India's healthcare system in 2025, AI tools for diagnostics, telemedicine, and public health planning have begun to move from pilot projects into everyday practice, improving speed and access while raising important questions around equity and data privacy [5].

Generative AI is also reshaping workflows by automating repetitive tasks, minimizing errors, and reducing operational costs [6]. These advances are not limited to clinical care; they extend to administrative efficiency, where AI reduces burdens on healthcare staff and optimizes resource allocation [7]. Although its application in healthcare institutions is relatively new, AI has already demonstrated effectiveness in simple tasks such as triage and imaging analysis, leading to significant cost reductions and improved patient throughput [8].

Modern healthcare innovations have a profound influence on human well-being [9]. Startups are increasingly investing in medical technology, with ambitious projects such as Neuralink aiming to integrate human brains with digital environments, enabling direct communication with AI systems [10]. Such developments highlight the growing interest in expanding human-machine interaction beyond traditional interfaces.

Despite these advances, inefficiencies remain a major challenge. The Organization for Economic Cooperation and Development (OECD) reported in 2017 that nearly 20% of healthcare budgets in member countries were either inadequate or misappropriated, underscoring systemic waste in healthcare systems [11]. The World Health Organization (WHO) further estimates that healthcare costs account for an average of 10% of GDP worldwide, with waste often outpacing expenditure growth. Rising government spending on healthcare, while intended as investment, frequently coincides with increased inefficiency. This scenario necessitates a fundamental redesign of healthcare systems to improve sustainability and effectiveness.

Digitalization has emerged as a promising strategy to address these challenges. Innovative technologies such as telemedicine, blockchain, augmented and virtual reality (AR/VR), digital twins, and AI are reshaping healthcare delivery models [12]. These approaches offer cost-effective solutions while improving accessibility, transparency, and patient-centered care. For instance, telemedicine reduces reliance on in-person consultations, blockchain streamlines medical record management, and AR/VR enhances both surgical training and patient rehabilitation. Digital twins, combined with AI, enable physicians to simulate treatment strategies in risk-free environments, reducing costs and improving decision-making [13].

In summary, the introduction of AI into healthcare is not merely a technological upgrade but a systemic transformation. By addressing inefficiencies, reducing costs, and enabling personalized care, AI has the potential to redefine healthcare delivery. However, this transition requires careful consideration of ethical, social, and policy implications, which will be explored in subsequent sections.

2. POLICIES REGARDING HEALTHCARE

The World Health Organization (WHO) defines a healthcare framework as a deeply embedded system that encompasses not only hospitals and clinics but also families caring for patients, private providers, preventive programs, and occupational health regulations [14]. Reconstructing such a system requires a radical shift in how basic healthcare is conceptualized and delivered, particularly in light of rising costs and widespread inefficiencies. Four primary policy domains are identified as critical for reform.

2.1. Checking of Regulations

The first step in addressing waste and inefficiency is to examine and modify the regulations governing healthcare systems. Administrative reviews can improve overall quality of care while reducing costs. When the public sector holds the majority of financial responsibility, reforms can be implemented more effectively, whereas private sector dominance often complicates regulatory enforcement [15].

2.2. Insurance of Health

Health insurance contracts provide coverage for medical expenses in exchange for regular payments. However, access to adequate coverage is often tied to wealth, creating inequities in healthcare delivery [16]. AI-driven actuarial models can reduce inequities by predicting risk more accurately, allowing insurers to design inclusive policies that balance affordability with sustainability.

2.3. Hybrid Healthcare System

A hybrid system, combining public and private funding, offers a balanced approach to healthcare delivery. France provides a

notable example, where life expectancy has exceeded 80 years due to the effectiveness of its hybrid model [17]. Such systems promote equity by ensuring universal access to care while leveraging private sector efficiency and innovation.

2.4. Digital Transformation

Digitalization represents a modern strategy for healthcare reform, offering efficiency and cost-effectiveness while improving patient outcomes. Key innovations include telemedicine, blockchain, AR/VR, and digital twins [13, 18]. Artificial intelligence, in particular, has the potential to revolutionize healthcare by reducing costs, improving diagnostic accuracy, and enabling personalized treatment.

- Telemedicine + AI triage → Expands rural access, reduces systemic inequities.
- Blockchain + AI anomaly detection → Strengthens regulatory compliance and fraud prevention.
- AR/VR + AI surgical guidance → Improves training outcomes, reduces medical errors.
- Digital twins + AI predictive analytics → Enables proactive policy interventions.

2.5. Determinants of Healthcare System

Healthcare systems can be analyzed from multiple perspectives, but digitalization is expected to be the most influential determinant in the coming years. By integrating advanced technologies, healthcare frameworks can achieve greater efficiency, transparency, and patient-centered care. AI adoption is not merely a technological upgrade but a determinant of policy success, shaping equity, efficiency, and sustainability.

3. ARTIFICIAL INTELLIGENCE

Artificial Intelligence (AI) can be broadly defined as the creation of intelligent machines programmed to perform calculations or decision-making processes that resemble human cognitive functions such as learning, reasoning, and problem-solving. AI systems are particularly powerful because they can identify patterns and relationships in massive, multifaceted datasets, enabling them to anticipate problems or address them as they arise [19]. For example, AI frameworks are capable of converting a patient's entire medical history into a single logical output, thereby assisting physicians in making evidence-based decisions.

AI is not a single invention but rather a collection of subfields and techniques. Among the most prominent are supervised learning, unsupervised learning, reinforcement learning (RL), and deep learning (DL). Each of these approaches contributes uniquely to healthcare applications:

- **Supervised learning:** Uses labeled data, such as annotated X-ray images, to train algorithms that can identify malignancies in new scans.
- **Unsupervised learning:** Groups patient symptoms or aggregates anonymous data to uncover hidden patterns or common causes.
- **Reinforcement learning (RL):** Algorithms learn through experimentation, improving outcomes by maximizing rewards in simulated environments.
- **Deep learning (DL):** Employs multi-layered neural networks to process complex data, advancing domains such as speech recognition, image analysis, and diagnostic imaging.

Table 1. Comparative Regulatory Models and AI Outcomes

Model	Strengths	Weaknesses	AI-Enabled Outcomes
Public-sector led	Easier enforcement, standardized care	Bureaucratic delays	Automated compliance, reporting
Private-sector led	Innovation, competition	Fragmented oversight, inequities	Fraud detection, optimized billing

Table 2. Comparative Healthcare Systems and AI Contributions

System Type	Example	Equity Outcomes	AI Contribution
Fully public	UK NHS	Universal access, resource strain	AI triage reduces wait times
Fully private	US	High innovation, inequities	AI diagnostics improve outcomes but access unequal
Hybrid	France	Balanced equity and efficiency	AI enhances preventive care, resource allocation

Recent advancements in RL and DL have driven significant breakthroughs in AI, making these techniques particularly relevant for healthcare innovation. For instance, DL has enabled progress in clinical imaging, speech recognition, and predictive analytics, while RL provides a foundation for adaptive decision-making in dynamic clinical environments.

3.1. AI SOCIETY

The adoption of AI is not only a technological challenge but also a societal one. Reports from the United States, United Kingdom, and European Union emphasize accountability, openness, and positive societal impact as essential characteristics of an AI-driven society [20, 21]. While the U.S. views AI as a foundation for economic growth and job creation, the EU focuses on regulating robotics and AI through ethical guidelines, and the UK highlights transparency and protection standards. These perspectives reflect global interest in AI development alongside concerns about fairness, opportunity, and security.

Startups and organizations face significant hurdles in integrating AI into their operations. Garbuio and Lin [13] argue that companies must carefully evaluate whether AI is critical to their challenges, determine the type of intelligence required (independent, assisted, or augmented), and establish clear accountability frameworks. Alyoubi et al. [22] and Alam [23] further emphasize that AI adoption requires a fundamental shift in how professionals and managers perceive their roles, paralleling the transition from open surgery to minimally invasive techniques.

3.2. Big Data

AI's effectiveness is closely tied to the availability of big data. Large volumes of structured and unstructured data—ranging from genomic information and brain imaging to wearable sensor outputs and social media activity—enable AI systems to uncover patterns and generate insights [24–26]. For example, search engine queries during flu season can predict outbreaks before clinical data becomes available.

Data mining techniques, often integrated with machine learning, allow healthcare systems to identify trends, optimize resource allocation, and personalize treatment strategies [27]. By combining statistical analysis with linear algebra, AI systems can automatically refine algorithms based on new data, making them adaptive and increasingly accurate over time.

Thus, AI represents a convergence of computational techniques and societal considerations. Its integration into healthcare requires not only technological innovation but also ethical frameworks, regulatory oversight, and cultural adaptation to

ensure that its benefits are realized responsibly.

4. APPLICATIONS OF AI IN HEALTHCARE AND RESEARCH

Artificial Intelligence (AI) has demonstrated significant potential in transforming healthcare delivery, research, and clinical practice. Its applications span organizational management, pharmaceutical innovation, and direct patient care, offering both efficiency gains and improvements in treatment outcomes.

4.1. HEALTHCARE ORGANIZATION

AI can be applied to the planning and resource allocation of health and social care services. For example, the Harrow Committee has piloted the IBM Watson Care Manager system, which optimizes cost administration by helping patients select care providers within their financial plans. It also generates personalized care plans and guides administrators in resource distribution. Similarly, AI-driven applications are being developed to improve patient experience, such as the collaboration between IBM Watson and the Birch Hello Kids' Clinic in Liverpool, which uses AI to facilitate patient interaction and provide physicians with relevant information prior to consultations [28].

4.2. RESEARCH IN HEALTHCARE

AI enhances research by analyzing large-scale, complex datasets with greater precision and speed than traditional methods. It can integrate diverse data types, such as clinical records and genomic information, to accelerate drug discovery and identify novel therapeutic targets. The Foundation of Malignant Growth's Jars AR data collection project exemplifies this integration, combining clinical and genetic data with AI analysis to support treatment recommendations. Additionally, the AI-powered "robot scientist" Eve has been developed to streamline pharmaceutical research, improving efficiency and reducing costs in drug development [29].

4.3. CLINICAL CARE SYSTEMS

AI is increasingly being deployed in clinical settings to support diagnosis and treatment. Applications include:

- **Clinical imaging:** AI algorithms trained on large datasets of medical scans can detect conditions such as pneumonia, breast cancer, skin cancer, and eye diseases, reducing diagnostic time and cost.
- **Echocardiography:** The Ultromics system, developed at Oxford's John Radcliffe Hospital, uses AI to interpret echocardiograms, identifying cardiac abnormalities with high accuracy.

- **Neurological assessment:** AI models are being refined to analyze speech patterns, enabling early detection of manic episodes and monitoring of conditions such as Parkinson's disease.
- **Robotic surgery:** AI-powered mechanical devices are being tested for tasks in minimally invasive surgery, such as knot-tying and wound closure, improving precision and reducing recovery times.

These applications highlight AI's ability to augment clinical expertise, reduce workload, and deliver more personalized care. By integrating AI into healthcare organizations, research, and clinical practice, the industry can achieve greater efficiency and improved patient outcomes.

5. ISSUES RELATING TO ETHICS AND SOCIETY

The integration of Artificial Intelligence (AI) into healthcare raises a number of ethical and societal challenges. These concerns overlap with broader issues of data usage, automation, dependence on technology, and the implications of assistive tools such as telemedicine. Ensuring that AI systems are reliable, transparent, and aligned with patient safety is critical to their acceptance and long-term success.

5.1. RESPONSIBILITY AND RELIABILITY

One of the foremost ethical concerns is responsibility. When AI systems are used to operate medical equipment, provide care, or make clinical judgments, it becomes essential to determine accountability in the event of an error. Questions arise as to whether responsibility lies with the physician, the developer, or the AI system itself. Reliability and safety are therefore paramount, as patients must trust that AI-driven decisions are accurate and beneficial. Establishing clear accountability frameworks and regulatory oversight is necessary to mitigate risks [20, 21].

5.2. TRANSPARENCY AND TRUST

AI systems often function as "black boxes," making decisions based on complex algorithms that are not easily interpretable by clinicians or patients. This lack of transparency can undermine trust in AI applications. Ethical frameworks emphasize the need for Explainable AI (XAI), where decision-making processes are accessible and understandable. Transparency ensures that patients and healthcare providers can evaluate the rationale behind AI-driven recommendations, thereby fostering trust and acceptance [13, 22].

5.3. DATA PRIVACY AND SECURITY

Healthcare data is highly sensitive, and the use of AI requires access to vast amounts of personal information. Protecting patient privacy and ensuring data security are critical ethical imperatives. Breaches of medical data can have severe consequences, including discrimination, stigmatization, or misuse of information. Blockchain and advanced encryption technologies have been proposed as solutions to safeguard patient records while enabling efficient data sharing [18].

5.4. EQUITY AND ACCESSIBILITY

AI has the potential to reduce disparities in healthcare by improving access to diagnostic and treatment services. However, inequities may arise if AI technologies are only available to wealthier populations or institutions. Insurance frameworks and hybrid healthcare systems must ensure that AI-driven innovations

are accessible to all patients, regardless of socioeconomic status [16, 17]. Ethical adoption of AI requires policies that promote inclusivity and prevent the widening of healthcare gaps.

5.5. SOCIETAL IMPACT

Beyond clinical settings, AI adoption influences broader societal structures. It may alter employment patterns, requiring healthcare professionals to adapt to new roles and workflows. As Fox and Aranko [17] argue, professionals must reconsider their responsibilities in light of AI integration, while patients must adapt to new modes of care delivery. Ethical considerations therefore extend beyond individual patient interactions to encompass the societal implications of automation, workforce transformation, and cultural adaptation.

Therefore, the ethical and societal challenges of AI in healthcare revolve around responsibility, transparency, privacy, equity, and societal impact. Addressing these issues requires not only technological innovation but also robust ethical frameworks, regulatory policies, and cultural readiness. By proactively engaging with these concerns, healthcare systems can harness the benefits of AI while safeguarding patient rights and societal values.

6. CONCLUSION

Artificial Intelligence (AI) is rapidly transforming the healthcare landscape by providing transformative opportunities in organizational management, clinical practice, and biomedical research. By reducing costs and increasing efficiency through advances in diagnostic and treatment technologies, AI has demonstrated its effectiveness in delivering accuracy and individualized care. It has proved valuable in addressing numerous challenges faced by healthcare systems worldwide. Applications such as telemedicine, blockchain-based medical record management, augmented and virtual reality, digital twins, and sophisticated machine learning algorithms highlight the breadth of innovation available to practitioners and policymakers.

However, the integration of AI into healthcare also presents significant challenges. These include ethical concerns, privacy violations, and security risks. Issues related to responsibility, transparency, data privacy, and equitable access must be addressed to ensure the responsible use of AI in society. The risk of worsening healthcare disparities, combined with the "black box" nature of many AI systems, underscores the need for strong regulatory frameworks and interpretable AI models. Additionally, healthcare professionals must adapt their workflows to function effectively in AI-supported environments, while patients must learn to trust and interact with these technologies.

Evidence suggests that AI will not replace physicians but will instead serve as a powerful tool to augment their capabilities. By reducing workloads, streamlining operations, and enhancing services, AI can enable doctors to focus more on patient-centered care. Nevertheless, successful implementation requires the integration of technological innovation with ethical frameworks, inclusive policies, and continuous education for both healthcare providers and patients.

Looking ahead, research should investigate the future implications of AI in healthcare, including patient attitudes, effectiveness across medical domains, and the moral frameworks guiding its use. Educational initiatives will be essential to prepare the next generation of healthcare professionals to collaborate effectively with AI systems. Ultimately, the power of AI lies not in replacing human expertise but in complementing it—creating a

healthcare system that is more efficient, equitable, and responsive to society's needs.

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REFERENCES

- [1] Sanjay Patil and Harish Shankar. Transforming healthcare: harnessing the power of ai in the modern era. *International Journal of Multidisciplinary Sciences and Arts*, 2(2):60–70, 2023.
- [2] Fortune Business Insights. Artificial intelligence in healthcare market size, share, and trends 2024–2032, 2024. URL <https://www.fortunebusinessinsights.com/artificial-intelligence-ai-in-healthcare-market-102701>.
- [3] Grand View Research. Generative ai in healthcare: Market outlook 2025. *Grand View Research Reports*, 2025. URL <https://www.grandviewresearch.com/industry-analysis/generative-ai-in-healthcare-market>.
- [4] Rabi Sankar, Md Nazmul Alam, et al. Ai-driven innovations in cancer research and personalized healthcare. *Journal of Angiotherapy*, 9(1):1–10, 2025.
- [5] Economic Times Health. Ai in indian healthcare: Adoption and challenges in 2025. *Economic Times*, 2025. URL <https://health.economictimes.indiatimes.com/news/industry/ai-in-indian-healthcare-2025>.
- [6] Wei Lo, Chun-Ming Yang, Qiansha Zhang, and Mingyuan Li. Increased productivity and reduced waste with robotic process automation and generative ai-powered ioe services. *Journal of Web Engineering*, 23(1):53–87, 2024.
- [7] Md Faiyazuddin, Syed Jalal Q Rahman, Gaurav Anand, Reyaz Kausar Siddiqui, Rachana Mehta, Mahalaqua Nazli Khatib, Shilpa Gaidhane, et al. The impact of artificial intelligence on healthcare: a comprehensive review of advancements in diagnostics, treatment, and operational efficiency. *Health Science Reports*, 8(1):e70312, 2025.
- [8] McKinsey & Company. The state of ai in healthcare 2025, 2025. URL <https://www.mckinsey.com/industries/healthcare/our-insights/the-state-of-ai-in-healthcare-2025>.
- [9] Emmanouil G Spanakis, Silvina Santana, Manolis Tsiknakis, Kostas Marias, Vangelis Sakkalis, António Teixeira, Joris H Janssen, Henri De Jong, and Chariklia Tziraki. Technology-based innovations to foster personalized healthy lifestyles and well-being: a targeted review. *Journal of medical Internet research*, 18(6):e128, 2016.
- [10] S. Sarwar. Integration of human brains with digital surroundings. *Journal of Medical Technology*, 2018.
- [11] Blessing Osagumwendia Josiah, Emmanuel Chukwunwike Enebeli, Brontie Albertha Duncan, Lordsfavour Uzoma Anukam, Oluwadamilare Akingbade, et al. Perceptions of healthcare finance and system quality among nigerian healthcare workers. *PLOS Global Public Health*, 4(11):e0003881, 2024.
- [12] África Periáñez, Ana Fernández Del Río, Ivan Nazarov, Enric Jané, Moiz Hassan, Aditya Rastogi, and Dexian Tang. The digital transformation in health: How ai can improve the performance of health systems. *Health Systems & Reform*, 10(2):2387138, 2024.
- [13] M. Garbuio and N. Lin. Digital twins in healthcare innovation. *Journal of Business Models*, 2018.
- [14] Abhinav Verma, Krisstina Rao, Vivek Eluri, and Yukti Sharma. Regulating ai in public health: systems challenges and perspectives. *ORF Occasional Paper*, 261:1–46, 2020.
- [15] Riyaz Rashid Pathan, Joel Osei-Asiamah, Priyanka Nilesh Jadhav, S Saravanan, Akhilesh Kumar Singh, and Srikanta Kumar Sahoo. Developing decision support systems for healthcare administration using ai. *Journal of Neonatal Surgery*, 14(10s), 2025.
- [16] Catherine Hoffman and Julia Paradise. Health insurance and access to health care in the united states. *Annals of the New York Academy of Sciences*, 1136(1):149–160, 2008.
- [17] J. Fox and T. Aranko. Efficiency in hybrid healthcare systems. *European Health Review*, 2017.
- [18] Michael Guckert, Kristina Milanovic, Jennifer Hannig, David Simon, Tamara Wettengl, Daniel Evers, Arnd Kleyer, Till Keller, and Jeremy Pitt. The disruption of trust in the digital transformation leading to health 4.0. *Frontiers in Digital Health*, 4:815573, 2022.
- [19] R. Geet and S. Mohana. Artificial intelligence frameworks in healthcare. *AI Research Journal*, 2021.
- [20] Corinne Cath, Sandra Wachter, Brent Mittelstadt, Mariarosaria Taddeo, and Luciano Floridi. Artificial intelligence and the ‘good society’: the us, eu, and uk approach. *Science and engineering ethics*, 24(2):505–528, 2018.
- [21] Joshua Krook, Peter Winter, John Downer, and Jan Blockx. A systematic literature review of artificial intelligence (ai) transparency laws in the european union (eu) and united kingdom (uk): a socio-legal approach to ai transparency governance. *AI and Ethics*, pages 1–22, 2025.
- [22] Tayyaba Basri, Muhammad Fahad, Davood Veisieh, Mariya Ouaissa, and Mariyam Ouaissa. Artificial intelligence for startups and innovation. In *Future tech startups and innovation in the age of AI*, pages 1–20. CRC Press, 2024.
- [23] Mahboob Alam. Ai contributions across domains. *Technology and Society*, 2019.
- [24] Sabyasachi Dash, Sushil Kumar Shakyawar, Mohit Sharma, and Sandeep Kaushik. Big data in healthcare: management, analysis and future prospects. *Journal of big data*, 6(1):1–25, 2019.
- [25] Kun Su, Liang Xu, Guanqiao Li, Xiaowen Ruan, Xian Li, Pan Deng, Ximni Li, Qin Li, Xianxian Chen, Yu Xiong, et al. Forecasting influenza activity using self-adaptive ai model and multi-source data in chongqing, china. *EBioMedicine*, 47:284–292, 2019.
- [26] Hiba Asri, Hajar Mousannif, Hassan Al Moatassime, and Thomas Noel. Big data in healthcare: Challenges and opportunities. In *2015 International conference on cloud technologies and applications (CloudTech)*, pages 1–7. IEEE, 2015.
- [27] Bruno Samways dos Santos, Maria Teresinha Arns Steiner, Amanda Trojan Fenerich, and Rafael Henrique Palma Lima. Data mining and machine learning techniques applied to public health problems: A bibliometric analysis from 2009 to 2018. *Computers & Industrial Engineering*, 138:106120, 2019.
- [28] S. Rout and P. Kaur. Ai in healthcare organisation: Ibm watson case. *Healthcare Management Review*, 2020.
- [29] R. Gurudath. Ai in pharmaceutical research: Robot scientist eve. *Drug Discovery Journal*, 2015.