

# Short CV Karl Stroetmann

- **MBA (Diplom-Kaufmann) Free University Berlin – 1968**
- **PhD (International Finance, Business Administration, Economics) U. of British Columbia, Vancouver, BC, Canada – 1974**
- **Senior Research Fellow, empirica Communication and Technology, Bonn, Germany - since 1992**
- **Lifetime Fellow, Royal Society of Medicine (RSM), London, UK – since 2005**
- **Trustee, Integrata Foundation for the Human Usage of Information Technology, Tübingen, Germany – since 2012**
- **Adjunct Ass. Professor, School of Health Information Science, U. of Victoria, BC, Canada – since 2013**
- **empirica: Private institute specialising in applied socio-technical, policy and economic studies & research in ICT-related domains**
- **Digital Health, Health Systems, Social Care & Older People**



# Epigraph

**“We must shape technologies in accordance with *human values and needs*, instead of allowing technologies to shape humans. Our task is not only to rein in the downsides of information and communication technologies, but to *encourage human-centered innovation*”**

Vienna Manifesto On Digital Humanism, Vienna, May 2019



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- **Artificial Intelligence (AI) – How is it defined?**
- **History**
- **Technology: Status-quo and trend**
- **Applications in Health**
- **Challenges**
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# Artificial Intelligence (AI) – How is it defined?



# Intelligence

- **High mental capacity**
  - ✓ capacity for learning, reasoning, understanding,
  - ✓ aptitude in grasping truths, relationships, facts, meanings
- **Ability to solve a problem within a certain time limit** (*Marcus Gabriel, 2018*)

## Antonyms

- **Ignorance, stupidity, ineptness**

<https://www.dictionary.com/browse/intelligence>



# Biological intelligence

- **Living organisms**
  - “Bacterial Cybernetics Group - cybernetic sophistication by bacteria”
  - **Plants/trees**
  - **Animals (ants, bees, birds, monkeys, apes...)**
  - **Homo sapiens**
- **Intelligent materials?**



# AI and *General* Intelligence

**General Intelligence:** “A robust theory of general intelligence, human-like or otherwise, remains elusive“

Original ambitious **goal of the AI field:**

“The creation ... of **software or hardware systems with *general intelligence*** comparable to, and ultimately perhaps greater than, that of human beings”

Searle, J. (1980). Minds, brains, and programs. Behavioral and Brain Sciences, 3(3), 417-424

Ben Goertzel. Artificial General Intelligence: Concept, State of the Art, and Future Prospects. Journal of Artificial General Intelligence 5(1) 1-46, 2014



# Artificial

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- ✓ **Manufactured (man-made), unnatural/non-biological**
- ✓ **Antonyms: natural, biological, real**

<https://www.thesaurus.com/browse/artificial>



# Definitions/Types of AI

## Weak (or cautious) AI

“Systems that carry out specific 'intelligent' behaviors in specific contexts” = **task or problem-specific** capability

## Artificial General Intelligence (AGI)

Fuzzy concept: “AGI may be thought of as aimed at bridging the gap between current AI programs, which are narrow in scope, and the types of AGI systems commonly seen in fiction”

## Strong AI:

“No program by itself is sufficient for thinking” – and/or for “intentionality”

Searle, J. (1980); Ben Goertzel (2014)



# Functional capabilities of AI applications:

## ❖ Perception

- ... to find out what the world around “looks” like

## ❖ Machine Learning (Deep Learning)

- ... to automatically build/adapt models of reality

## ❖ Knowledge Representation

- ... to represent, process, and communicate models of the environment

## ❖ Reasoning

- ... to infer and generalize new models based on existing knowledge

## ❖ Planning

- ... to plan and simulate in the virtual world, exploring possible options, evaluating their performance, and making decisions

## ❖ Acting

- ... to manipulate and move around in the real/virtual world



Source: Philipp Slusallek “Artificial Intelligence & Digital Reality”



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# Short History of Artificial Intelligence



# Short History of AI

- **1315** – “Ars Magna”- Reasoning may be artificially implemented in a machine (Ramon Llull)
- **1600** – Francis Bacon [1561—1626] „Attempting to fetter discovery by artificial rules“ (David Brewster, 1831)
- **1805** – Least square method for regression (Basis for many of today’s machine-learning models; Adrien-Marie Legendre)
- **1940/1943** - Basic AI concepts (Alan Turing, Warren McCulloch/ Walter Pitts)
- **1948** – “Cybernetics: Or Control and Communication in the Animal and the Machine” (Norbert Wiener)
- **1950** – “Turing Test” (Alan Turing)
- **1958** – First self-learning algorithm (Frank Rosenblatt)
- **1965** – Birth of deep learning (Alexey Grigorevich)



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# Underlying Technology and Trends



# Underlying technology (I)

## Algorithms

- **“Algorithm”**: A self-contained sequence of mathematical instructions or rules that will give us a result for a specific problem. For example, standardised clinical guidelines used for patients assessment and decision support“
- **Statistical methods**
- **Deep learning, machine learning: pattern recognition using deep neural networks (DNNs)**
- **Natural language processing**
- **Complex analytics for knowledge discovery**
- **Simulation (Virtual Physiological Human – VPH)**



# Underlying technology (II)

Huge advances in

- ✓ **Computing power/hardware/chips**
- ✓ **Theory, algorithms, models and software**
- ✓ **Storage capacity and access speed**
- ✓ **Big Data sources (shared, annotated medical data & images)**
- ✓ **Interoperability / data integration**
- ✓ **Cloud services (storage, computing power, software, sharing)**
- ✓ **Networking / Internet of Things (IoT)**

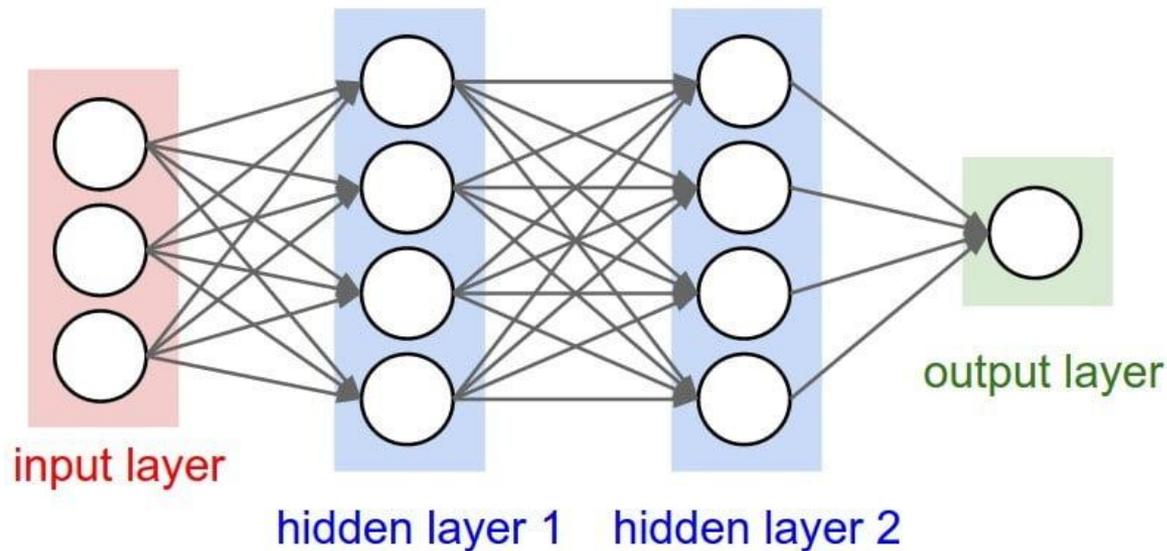
***Merging of such techniques: AI***



# Deep Learning / Deep Neural Networks (DNN)

**Deep learning: sub-discipline of machine learning**

- **Input layer**
- **Hidden layers of artificial neural networks ranging from 5 to 1,000, each responding to different features of e.g., an image (like shape or edges)**
- **output layer**
- ✓ **Exponential increase in the amount of data required to train**

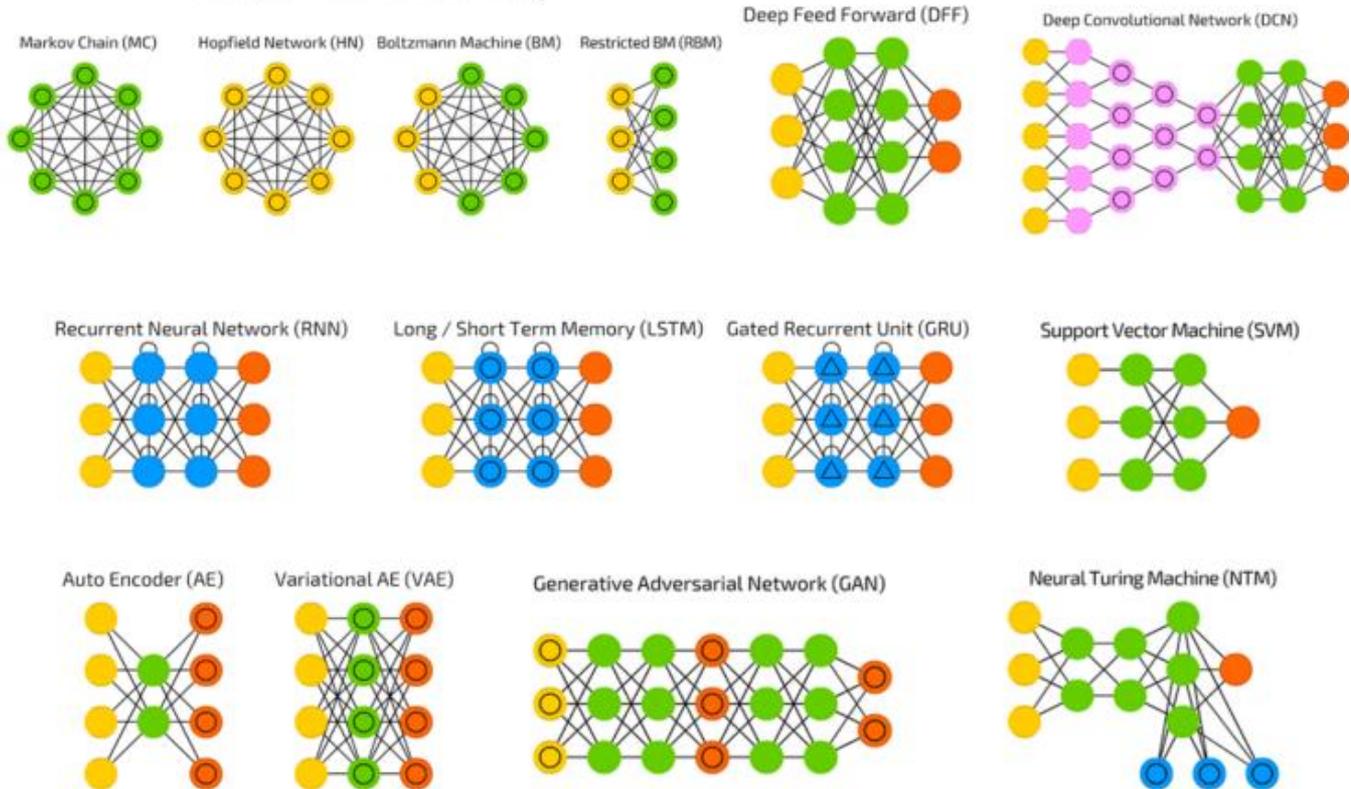


# Types of Neural Networks

## A mostly complete chart of Neural Networks

©2016 Fjodor van Veen - asimovinstitute.org

-  Backfed Input Cell
-  Input Cell
-  Noisy Input Cell
-  Hidden Cell
-  Probablistic Hidden Cell
-  Spiking Hidden Cell
-  Output Cell
-  Match Input Output Cell
-  Recurrent Cell
-  Memory Cell
-  Different Memory Cell
-  Kernel
-  Convolution or Pool



<https://towardsdatascience.com/graph-theory-and-deep-learning-know-hows-6556b0e9891b>



# Towards a Global Operating System: Digital World 5.0

- **We experience the metamorphosis from the stand-alone computer to the global operating system of our world: The Digital World 5.0 (networking Industry 4.0; Health 4.0; ...) will digitize everything and automate work and thinking**
- **This Digital World 5.0 OS links, integrates, and permeates everything: work, leisure, politics, the personal, the professional, and the private**

Adapted from Vienna Workshop on Digital Humanism, 2019



# Quantum 2.0 – The Future?

- **Quantum technology transitions some of the properties of quantum mechanics, especially quantum entanglement, quantum superposition and quantum tunnelling, into practical applications**
- **Main applications:**
  - ✓ (Cloud) Computing
  - ✓ (5G) Communications; Internet of things (IoT)
  - ✓ Sensing/measuring
  - ✓ Cryptography
- **Quantum computers may be “rolled out” by 2025 (broad commercialization from 2030?), but only for tackling very specific problems**
- **Quantum technologies will indeed become “disruptive” and will “open up new markets”**



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# Applications in Health



# Applications for medical professionals: Prediction, prevention, diagnosis, treatment (I)

## Radiology

- **More than 2 billion chest X-ray images worldwide p.a.**
- **Accuracy (121-layer convolutional neural network) in detecting pneumonia in 112,000 images was AUC of 0.76**
- **Outperformed four radiologists**
- **Interpretation of scans 150 x faster by AI**
- **Accuracy: sometimes better, sometimes worse; big help for less experienced MDs**
- **IBM Watson – Cancer decision support**



# Applications for medical professionals (II)

## Pathology

- **Inconsistency among pathologists' interpretations of slides**
- **Deep learning of digitized pathology slides can improve accuracy and speed of interpretation (few retrospective studies)**
- **Results affected by the length of time the pathologists had to review slides**

## Cardiology

- **Electrocardiograms (ECG) and echocardiograms (EVD)**
- **In a small retrospective dataset of 549 ECGs, a sensitivity of 93% and specificity of 90% were reported**
- **Accuracy comparable with cardiologists**



• Adapted from Eric J. Topol, 2019



# Applications for medical professionals (III)

- ✓ **Dermatology**
- ✓ **Gastroenterology**
- ✓ **Genetics**
- ✓ **Predicting suicide**
- ✓ **Predicting bouts of psychosis in schizophrenics**
- ✓ **Many other clinical settings, like diagnosis of stroke, autism, stroke or heart attack *by paramedics* etc.**
- ✓ **Robotics**



## Other application fields in medicine

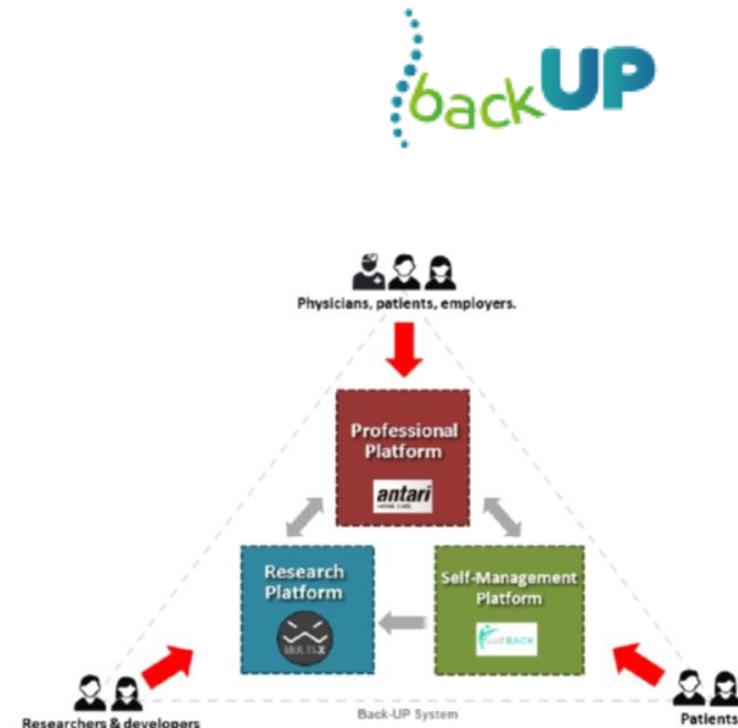
- **Health systems:** Improve workflow and potential for reducing medical errors
- **Patients:** process their own data to promote health
- **Management of workforce:** select, direct, control, promote, fire



# Exemplar: Back-UP Patient DSS “SELFBACK”

- Project “Personalised prognostic model to support efficient management of neck and low back pain” – 2018 to 2020
- AI-based decision support system
- Complex integrated AI system consisting of
  - Research Platform
  - Clinical Professionals Platform
  - Patient Self-Management Platform
- Models: Machine Learning using neural network techniques, statistical models

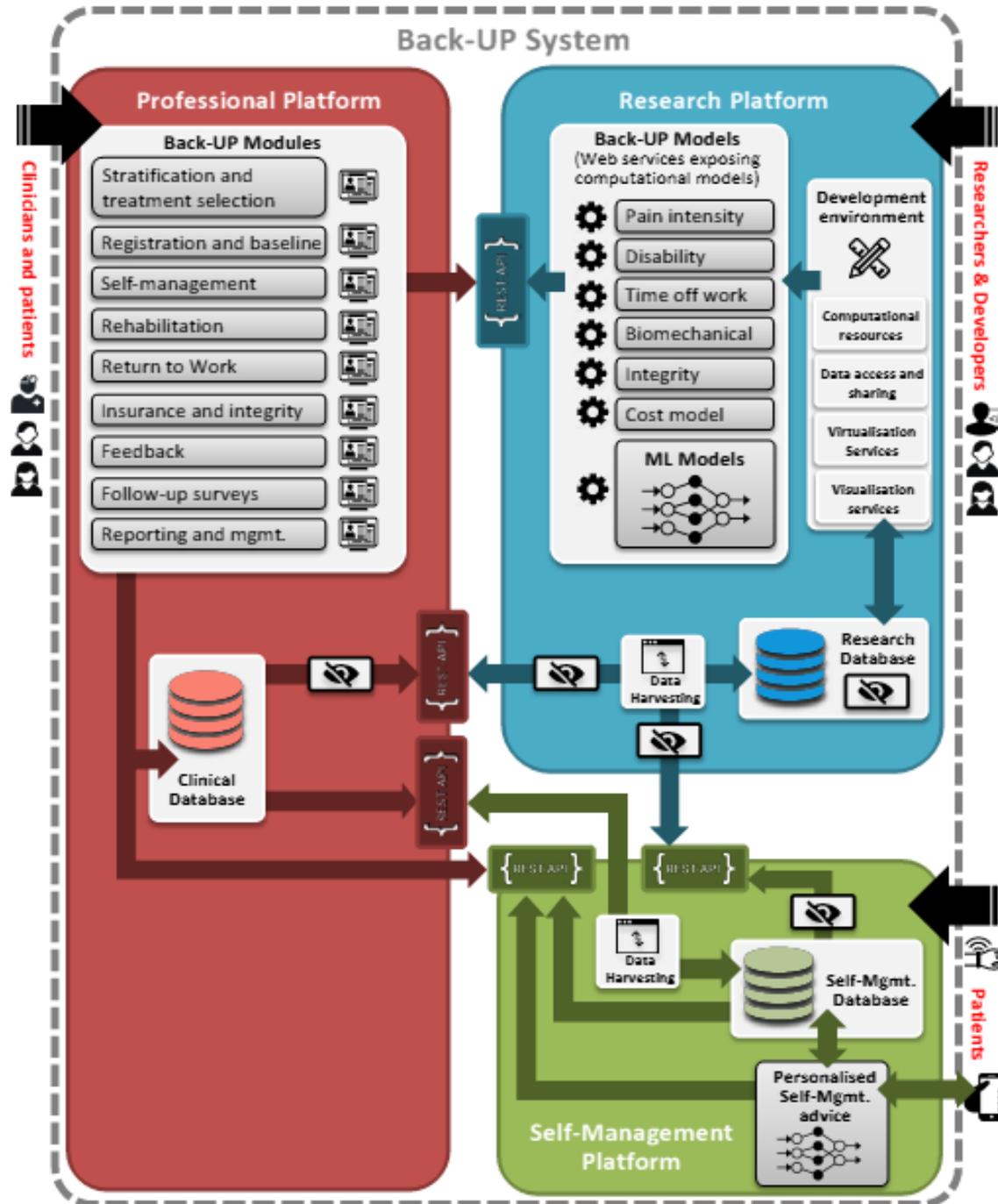
Source: Back-UP project



# Conceptual diagram of

- Platforms
- Modules
- Models
- Databases
- App/Patient service

Source: Back-UP project



# Challenges

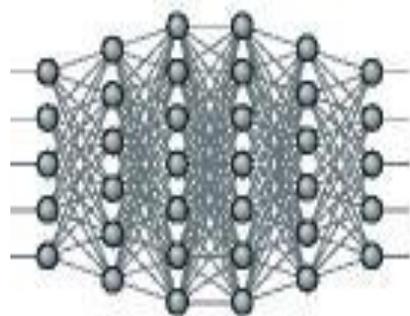


# AI Chasms in Health

- **Validation of the performance of an algorithm is not equivalent to demonstrating clinical efficacy**
- **Needs proof to indeed improve clinical outcomes**
- **Prediction of risk for adverse outcomes, but no therapy available?**



# From AI algorithm to changing medical practice



**Validate a DNN  
in silico**



**Clinical validation  
in real-world medicine**



**Implementation in  
healthcare**

Debbie Maizels/Springer Nature

# The Ethical Dilemma

- *Health AI applications must be driven by human values and needs*
- **Ethics: “The discipline dealing with what is good and bad and with moral duty and obligation”**
- **Values are culturally determined, by tradition, by religious believes**
- **Ethical medical rules may differ by country, ethnicity, etc.**
- **AI systems may contain such rules, but on which basis (machines with ethically-significant behaviours)?**
- **Who decides / controls witch values are reflected by the algorithms?**



# Missing Business Models

- **Business Model for investment in tools and applications: Who will ensure continuous update of**
  - ✓ **Input data & images**
  - ✓ **Data quality**
  - ✓ **New regulations**
  - ✓ **New medical drugs and devices**
  - ✓ **New medical knowledge and medical interventions**
  - ✓ **Continuous tuning of “algorithms”**



# Input Data

## ➤ Bias of input data

- ✓ Behavioural and cultural differences across health systems, countries, people
- ✓ White versus coloured people
- ✓ Social class related recognition of pictures
- ✓ Medical expert opinions on best treatment
- ✓ ...



# Further Challenges

- **Quality, reliability and safety of components of AI systems (interplay of input devices, algorithms, output devices)**
- **“Virtual Crash-Test“ – Boeing 737 Max accidents**
- **Regulation & control of AI systems and applications**
- **Data protection of patient data**
- **Cybersecurity of connected systems**
- **Legal issues**
- **Growing complexity and dependencies: AI systems inform or even direct other AI systems**



# Summary & Outlook

- ❖ **Great potential towards**
  - Safer, **better** and more efficient **healthcare**
  - Extension of evidence-based medicine into **explanation-based** medicine
  - A “**learning**” health system with continuous feedback based on input from process and outcome data generating knowledge
- ❖ **Collaborative effort to accelerate the development and uptake of Health AI for the benefit of all**
- ❖ **Explore the policies, challenges, consequences of AI for Health**
- ❖ **Create a European „AI for Health“ collaborative programme and platform to compete globally**



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