

Review Article

Artificial Intelligence Applications in Cancer Diagnostic Devices: A Focused Review

Muna Haider Mohammed ^{1,a*}, Aya Abd Alwahab Ahmed ^{2,b}

¹ College of Pharmacy, Al-Nahrain University, Baghdad, Iraq.

² College of Engineering Technology, University of Mashreq, Baghdad, Iraq.

E-mail: munahaider977@gmail.com ^{a,*}, bdalwhabayh21@gmail.com ^b

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Abstract

The field of cancer diagnostics is undergoing a rapid transformation due to the advent of artificial intelligence (AI), which has the potential to enhance diagnostic accuracy, efficiency, and the ability to customize care to individual patients. This scoping review explores the landscape of AI technologies, with a particular focus on deep learning, machine learning, and generative models, as well as their integration into medical imaging, digital pathology, and genomic profiling. These technologies offer a multitude of benefits, including higher diagnostic precision, early-stage cancer detection, and personalized treatment strategies. However, the integration of AI into clinical practice is not without its challenges. Concerns regarding data security, the lack of model interpretability, and fragmented regulatory environments persist as significant barriers. This review concludes by emphasizing the pivotal role of artificial intelligence (AI) in the evolution of precision oncology and calls for interdisciplinary collaboration, regulatory clarity, and infrastructure development to support the responsible integration of AI into cancer diagnostics.

Keywords: Artificial Intelligence (AI), Cancer Diagnostics, Machine Learning, Medical Imaging, Precision Oncology.

* Correspondence Author

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Introduction

Cancer continues to be a major cause of morbidity and mortality on a global scale. Timely and accurate diagnosis is critical, as early detection significantly improves survival rates, especially for cancers like breast, colorectal, and cervical cancer (Shastri & Sanjay, 2022). However, conventional diagnostic techniques, including histopathological examination and radiological imaging, are frequently marred by subjectivity and human error. This results in inconsistent interpretations and diagnostic delays (Iqbal et al., 2021). These limitations are further exacerbated by workforce shortages and diagnostic bottlenecks in low-resource settings.

The field of Artificial Intelligence (AI), which includes subfields such as machine learning (ML) and deep learning (DL), is poised to bring about a transformative approach to cancer diagnostics. By automating image interpretation, pattern recognition, and decision-making processes, artificial intelligence (AI) enhances diagnostic accuracy and consistency (Marsden et al., 2024). In contrast to conventional methods, AI systems possess the capacity to learn from extensive datasets and to perpetually enhance their performance over time. Furthermore, AI plays a pivotal role in the field of personalized medicine by facilitating the integration of heterogeneous patient data, encompassing medical imaging and genomic profiles, to generate customized diagnostic and treatment recommendations (Haick & Tang, 2021).

AI Technologies in Cancer Diagnosis

The deployment of artificial intelligence (AI) technologies in the domain of cancer diagnostics encompasses a diverse array of architectures and functionalities, each meticulously designed to address specific clinical challenges. Among the most impactful are Convolutional Neural Networks (CNNs), a type of deep learning model particularly suited for processing and classifying visual data such as radiological or histopathological images (Potnis et al., 2022). Convolutional neural networks (CNNs) have been successfully applied in mammography for breast cancer detection, outperforming traditional computer-aided detection systems (Miller & Brown, 2018).

Recent advancements have given rise to transformer-based architectures, including Vision Transformers (ViTs), which have demonstrated superior performance in various image classification tasks by modeling global image dependencies. Hybrid models, such as ViT-YOLO, which integrates ViTs with object detection systems, have been shown to enhance lesion localization in radiological scans (S. Alshuhri et al., 2024). In contrast to CNNs, which emphasize local features within constrained receptive

fields, ViTs facilitate the modeling of long-range dependencies across the entire image. This global context awareness has been demonstrated to facilitate the detection of irregularly shaped or subtle lesions, particularly in complex anatomical structures. The ViT-YOLO model augments this capability by integrating the interpretive prowess of ViT with the rapid and precise localization capabilities of YOLO, thereby enhancing the model's efficacy in lesion detection. Concurrently, Generative Adversarial Networks (GANs) and Variational Autoencoders (VAEs) are being utilized to generate synthetic data, thereby addressing the challenges associated with limited and imbalanced datasets, particularly in the context of rare cancer types (S. Alshuhri et al., 2024).

Conventional machine learning (ML) algorithms such as support vector machines (SVMs), decision trees, XGBoost, and long short-term memory (LSTM) networks play a pivotal role in the analysis of structured data, including patient demographics, blood biomarkers, and longitudinal records (Potnis et al., 2022). These tools are especially valuable in the domains of risk prediction, recurrence forecasting, and survival analysis.

A growing emphasis is placed on Explainable AI (XAI) frameworks, which aim to provide transparency in decision-making and foster clinician trust (Chen et al., 2021). Techniques such as Grad-CAM (Gradient-weighted Class Activation Mapping) have been developed to address the opaque, "black-box" nature of AI systems by providing a visual representation of the areas of an image that influenced the model's prediction (Coccia, 2020). Other approaches, including LIME (Local Interpretable Model-Agnostic Explanations) and SHAP (SHapley Additive exPlanations), offer case-level reasoning by underscoring the input features that exert the most substantial influence on a prediction. This enhances transparency and fosters greater clinician trust.

Clinical Applications

The field of artificial intelligence (AI) is undergoing a paradigm shift, with significant implications for diagnostic workflows across a wide range of cancer types and diagnostic modalities. In the context of breast cancer, artificial intelligence (AI)-enabled computer-aided detection (CAD) tools have exhibited a high degree of accuracy in large-scale clinical trials. For instance, the NHS breast screening trial employs artificial intelligence (AI) to assist radiologists in identifying malignancies that might otherwise be overlooked (Shastri & Sanjay, 2022). In the context of lung and brain cancers, artificial intelligence (AI) algorithms have been employed to analyze CT and MRI scans. These algorithms are designed to detect minute changes in tissue structure,

thereby enabling earlier diagnosis than would be possible with manual inspection alone. As demonstrated in the research by Ali and Alhumaidi (2023), Kaur and Garg (2023), and Pesapane et al. (2018), tools such as DeepSurv and 3D-CNNs have exhibited considerable efficacy in these domains.

In the context of prostate cancer, artificial intelligence (AI) models such as DenseNet169 and heatmap-based classifiers have been shown to enhance the precision of prostate biopsy interpretations, particularly in cases of ambiguity (Mintz & Brodie, 2019). In the domain of digital pathology, artificial intelligence (AI) algorithms have been employed to standardize the analysis of slides. These algorithms automate the recognition of features and have been shown to reduce variability among observers. As Miller and Brown (2018) have demonstrated, these systems have the capacity to detect subtle cellular changes that may signal early neoplasia.

In the domain of molecular diagnostics, artificial intelligence (AI) has been demonstrated to enhance the precision and efficiency of genomic profiling by facilitating the interpretation of high-dimensional data derived from next-generation sequencing (NGS) technologies (Sloane & J. Silva, 2020). Liquid biopsy techniques, which analyze cell-free DNA in the blood, are also being refined through artificial intelligence (AI) to enable non-invasive cancer screening. Companies such as Novelna are at the forefront of developing AI-powered multi-cancer detection tests based on protein expression signatures (Jobson et al., 2022). Furthermore, artificial intelligence (AI)-based predictive modeling facilitates the tailoring of treatment regimens, taking into account tumor genomics and treatment response profiles (Bi et al., 2019).

The integration of artificial intelligence (AI) into wearable devices and monitoring systems facilitates continuous data collection and real-time disease monitoring, thereby enabling patients and clinicians to intervene earlier. In the field of precision oncology, artificial intelligence (AI) systems have proven to be of immense value in the integration and interpretation of multi-omics data, encompassing genomics, transcriptomics, and proteomics. This integration facilitates the refinement of cancer classification and the optimization of therapeutic targeting (Chen et al., 2021).

AI-Powered Diagnostic Devices

The integration of artificial intelligence (AI) into medical devices has gained significant traction, with regulatory bodies recognizing their potential benefits. As of 2023, the U.S. Food and Drug Administration (FDA) had approved 59 AI-based diagnostic tools, reflecting growing institutional confidence (Coccia, 2020). Significant examples include Paige Prostate

Detect and Paige Lymph Node, which have been granted Breakthrough Device Designation due to their substantial improvement over existing diagnostic options (Weerarathna et al., 2023).

The Ibex Prostate Detect system demonstrates the clinical utility of artificial intelligence (AI) in pathology, achieving near-perfect positive predictive values in multicenter trials and identifying malignancies that were previously overlooked (Mintz & Brodie, 2019). PathAI, Aidoc, and Butterfly iQ+ are expanding the reach of artificial intelligence (AI) in diagnostics by enabling image interpretation across various anatomical regions and modalities (Marsden et al., 2024).

Beyond the realm of imaging, artificial intelligence (AI) is playing a pivotal role in the field of companion diagnostics, which employ molecular markers to guide therapeutic decisions. For instance, AI algorithms have been shown to exhibit greater sensitivity and specificity in mutation detection when compared to manual methods (Sloane & J. Silva, 2020). The Novelna platform, which employs artificial intelligence to evaluate protein-based biomarkers, has emerged as a paradigm-shifting instrument in multi-cancer screening (Jobson et al., 2022).

Benefits of AI Integration

The clinical advantages of integrating artificial intelligence (AI) in cancer diagnosis are numerous. AI has been demonstrated to enhance diagnostic accuracy and consistency, thereby reducing inter-reader variability in imaging and histopathology (Shastry & Sanjay, 2022). This technology has been shown to enhance the accuracy of cancer grading and the detection of micro-lesions that may be overlooked during manual assessments (Iqbal et al., 2021). Furthermore, the utilization of AI has been demonstrated to markedly accelerate diagnostic procedures, reducing turnaround times from days to minutes (Iqbal et al., 2021).

The integration of artificial intelligence (AI) with imaging findings, radiomics, genomics, and patient history facilitates the development of personalized treatment plans, thereby ensuring tailored interventions (Weerarathna et al., 2023). In regions lacking adequate healthcare resources, artificial intelligence (AI)-driven solutions such as telepathology and remote screening facilitate access to specialized diagnostics without the necessity of on-site specialists (Weerarathna et al., 2023). For instance, in Rwanda, the implementation of cloud-based artificial intelligence (AI) diagnostic tools has enhanced cervical cancer screening, enabling community health workers to facilitate early detection in rural areas with constrained access to pathologists.

The utilization of artificial intelligence (AI) for early detection has been demonstrated to enhance

clinical outcomes while concurrently reducing treatment intensity and the associated financial burden (Shastri & Sanjay, 2022). These advantages extend to healthcare systems by optimizing resource allocation and minimizing hospital burden. Consequently, AI plays a pivotal role in promoting both clinical excellence and health equity.

Challenges and Barriers

Notwithstanding its transformative potential, the implementation of artificial intelligence (AI) in cancer diagnostics is encumbered by numerous challenges. Chief among these challenges is the issue of data privacy. The utilization of medical AI systems necessitates access to sensitive patient information, thereby giving rise to concerns regarding confidentiality and compliance with legal frameworks such as the General Data Protection Regulation (GDPR) (Haick & Tang, 2021; Kaur & Garg, 2023). Furthermore, the efficacy of AI is contingent upon the quality of the data; biased or incomplete datasets can perpetuate existing healthcare disparities.

Another salient issue pertains to interpretability. A considerable number of artificial intelligence (AI) models function as "black boxes," which complicates the comprehension and confidence of clinicians in the models' decision-making processes (Kaur & Garg, 2023). This dearth of transparency has the effect of impeding clinical adoption and acceptance.

Robust validation across diverse populations remains limited. A significant number of AI systems are trained on homogeneous datasets, a practice that restricts their generalizability (Marcu et al., 2019). Moreover, regulatory frameworks frequently exhibit a marked delay in keeping pace with technological advancements. Inconsistent or unclear regulatory guidelines have been shown to impede the translation of AI tools from research to practice (Kaur & Garg, 2023).

Ethical concerns, including but not limited to algorithmic bias, explainability, and equitable access, necessitate the implementation of governance mechanisms to ensure responsible innovation (Kaur & Garg, 2023). Moreover, the successful integration of AI into healthcare systems necessitates substantial investments in infrastructure, the training of staff, and modifications to workflow protocols (Ahn et al., 2023; Elemento et al., 2021).

Future Trends

The future of artificial intelligence (AI) in cancer diagnosis is moving toward multimodal integration, where imaging, clinical notes, genomics, and lifestyle data are fused into unified diagnostic platforms (Haick & Tang, 2021). The advent of hybrid models and self-supervised learning architectures has led to significant advancements in the realm of adaptability to real-world

variability and incomplete datasets (S. Alshuhri et al., 2024). Self-supervised learning holds particular value in the domain of medical imaging, as it enables models to discern features from unlabeled data, thereby reducing the necessity for costly and time-consuming expert annotations.

The refinement of treatment strategies will be facilitated by the use of predictive analytics, which employ data analysis to forecast patient responses, recurrence risks, and disease trajectories (Bi et al., 2019). AI will also underpin personalized cancer vaccines and 3D-printed organoids, enabling novel therapeutic pathways (Jobson et al., 2022; Sloane & J. Silva, 2020). While these innovations hold great promise, they are still in the nascent stages of clinical research or preclinical testing. For instance, AI-guided cancer vaccines are currently undergoing early-phase trials, while 3D-printed organoids are predominantly utilized in translational laboratories to model tumor environments.

Furthermore, artificial intelligence (AI) is poised to assume a pivotal role in the realm of drug discovery, with the potential to optimize molecular screening and trial design. Additionally, AI has the capacity to enhance robot-assisted surgery through the utilization of real-time imaging and precision targeting (Akingbola et al., 2024). As these technologies continue to evolve, they are poised to transform the landscape of oncology care, redefining the paradigm for patient management and treatment across the entire oncology care continuum.

Conclusion

The advent of artificial intelligence (AI) signifies a paradigm shift in the realm of cancer diagnosis, characterized by enhanced precision, curtailed delays, and augmented accessibility to expert-level diagnostics. AI is embedded in all stages of diagnostic and therapeutic planning, ranging from deep learning image analysis to wearable-enabled monitoring. The success of this initiative, however, is contingent upon three fundamental principles: transparency, interdisciplinary collaboration, and ethical stewardship. It is evident that, with sustained innovation and rigorous validation, artificial intelligence (AI) has the potential to transform cancer diagnostics and facilitate the dissemination of precision oncology on a global scale. To achieve this potential, the formation of interdisciplinary consortia and the acquisition of international, high-quality datasets will be pivotal. These collective efforts can ensure that AI systems are robustly validated, ethically designed, and globally applicable.

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