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Summary

Artificial intelligence and digital health in digestive diseases: From hype to implementation

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Endoscopy | Mechanisms & Personalised Medicine | Digestive Oncology

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The speaker reviews the evolution of AI in digestive diseases from single-task models to autonomous agents, arguing that implementation is already underway as patients and clinicians use large language models daily, with professional societies needing to provide guidance rather than resist adoption.

KEY POINTS

- AI applications in digestive diseases such as polyp detection and fibrosis quantification are FDA-approved and CE-marked, representing mature single-task systems already in clinical use.
- Foundation models now enable AI-based biomarkers by training on multimodal data from thousands of patients including radiology, pathology, and electronic medical records for tasks such as prognostication and clinical trial matching.
- The speaker's lab built and validated a tumor board agent that reads patient histories, analyzes imaging, retrieves guidelines and trial data, and performs at the level of human experts, though the speaker notes this work published in 2025 is already outdated.
- Large language models and AI agents are already widely used, with the speaker stating that 80 percent of physicians use AI professionally and that patients consult chatbots before clinical visits.
- Current AI models originate from the US west coast and Chinese cities, with Europe approximately one to two years behind; the speaker runs open-source models on hospital hardware to process patient data securely.
- Professional societies including EASL and UEG play a critical role in providing guidance on AI use, and hospitals should provide AI systems to all employees with data architecture, compute resources, and AI-friendly governance.

– The speaker emphasizes that medical education must include AI literacy while maintaining rigorous training in basic clinical skills such as history-taking and physical examination, which remain essential in the AI era.

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