

# Critical Applications of AI in Industry, Healthcare and Other Sectors

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## Challenges for AI applications in intensive care medicine

# AI Methods in Medical Applications

- ▶ Natural language processing of medical reports
- ▶ Image processing



- ▶ Speech enabled automation
- ▶ Utilization of high-resolution data-streams in intensive care medicine

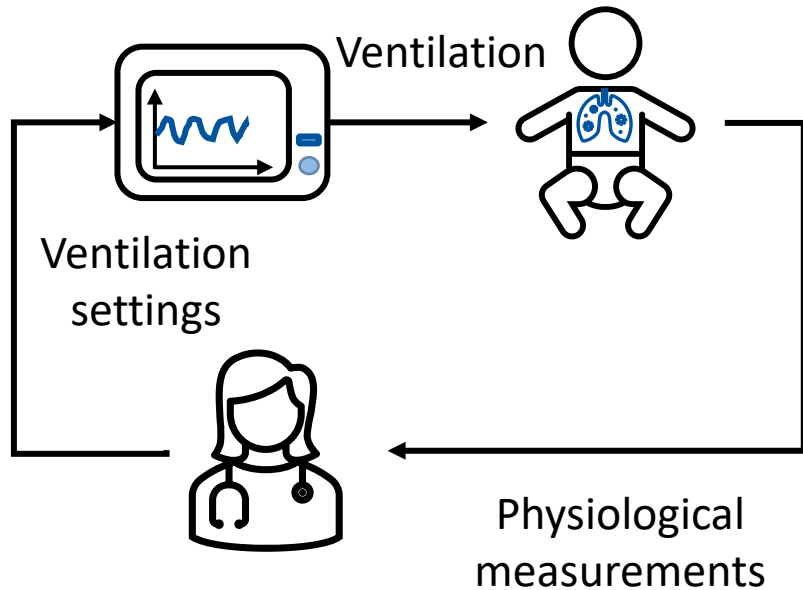
# Use-Cases: Mechanical ventilation

- ▶ Why do patients need mechanical ventilation?
  - Lung injuries
  - Immaturity (neonates)
  - Surgical procedures (anaesthesia)
  
- ▶ Goal
  - Supply organs / body with oxygen
  - Eliminate carbon dioxide (CO<sub>2</sub>)
  - Allow lungs to recover / develop
  - Wean from need for mechanical ventilation

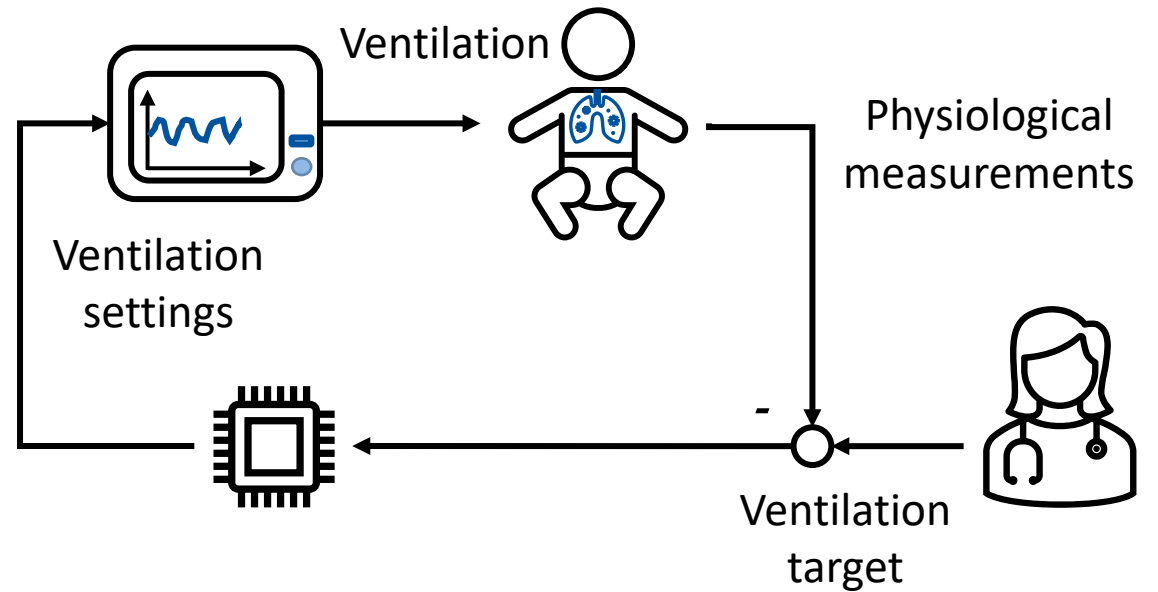
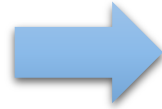


# Closed-Loop Ventilation

- ▶ Main goal: keeping  $O_2$  and  $CO_2$  in physiological range

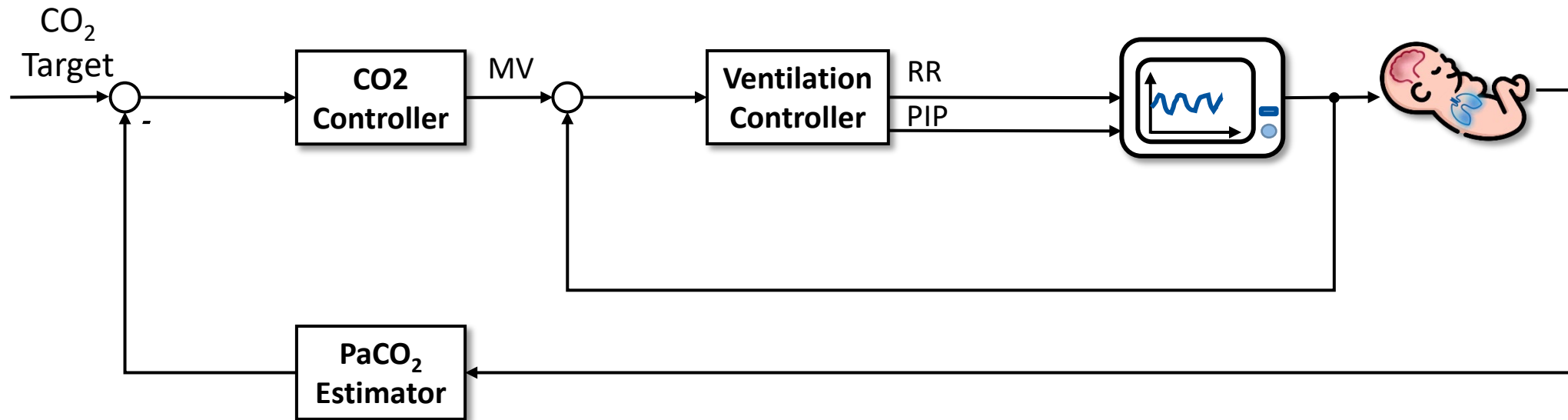


**Clinician-in-the-Loop**



**Physiological Closed-Loop Control**

# Next generation of machine ventilation control

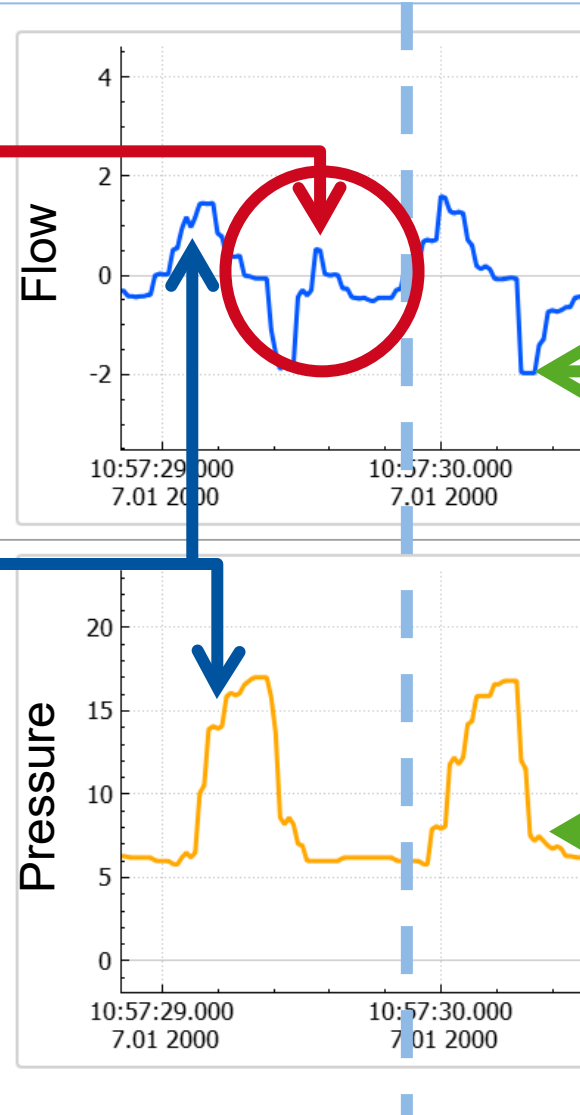


# Classification of breath-types

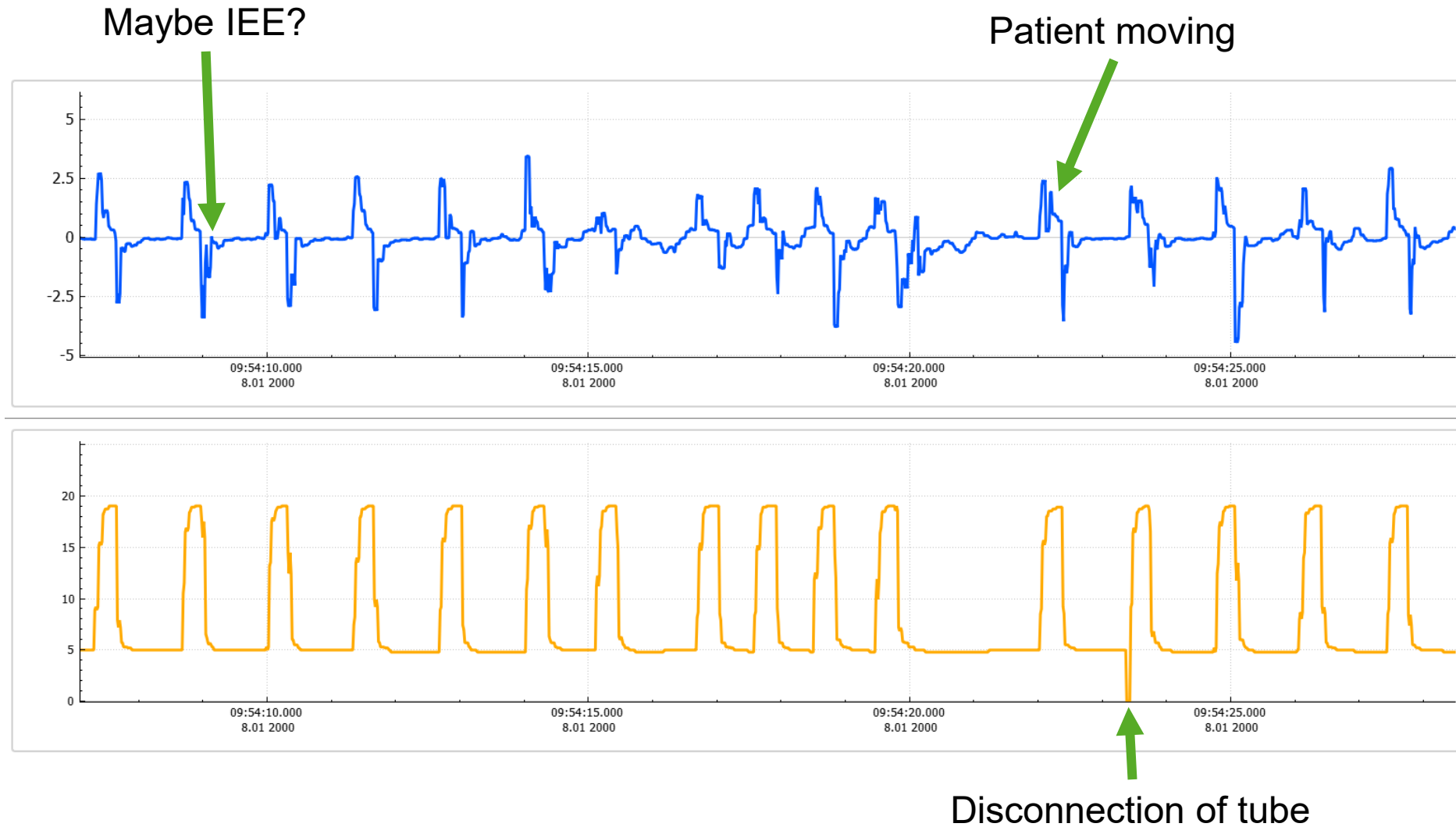
Ineffective effort during expiration (IEE)

Inspiration

Expiration



# Patient-Ventilator Asynchrony



# Challenges

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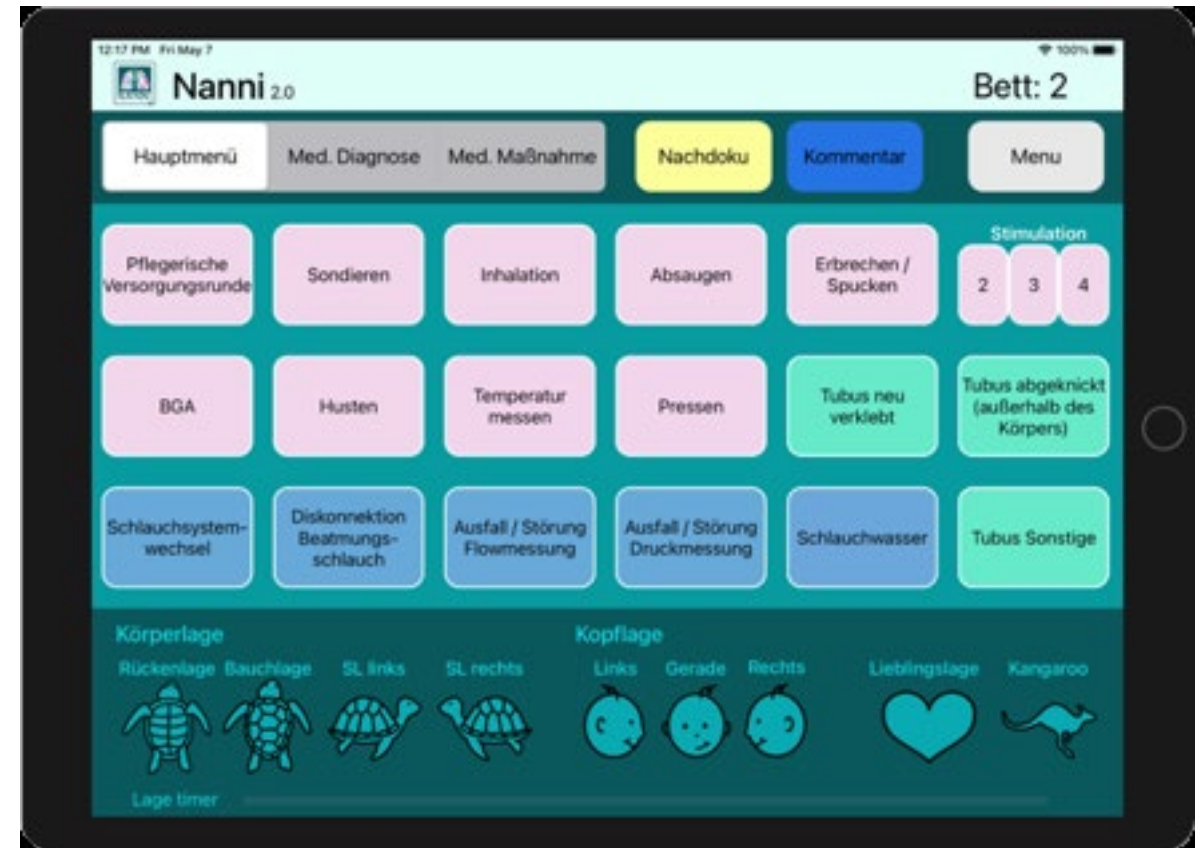
- ▶ Data protection regulations
- ▶ Annotations
- ▶ Data quality
- ▶ Data quantity
- ▶ Debugging / back-box characteristics of methods
- ▶ Approval as medical product
- ▶ EU AI Act



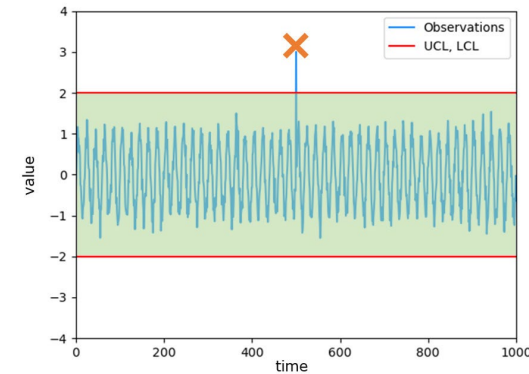
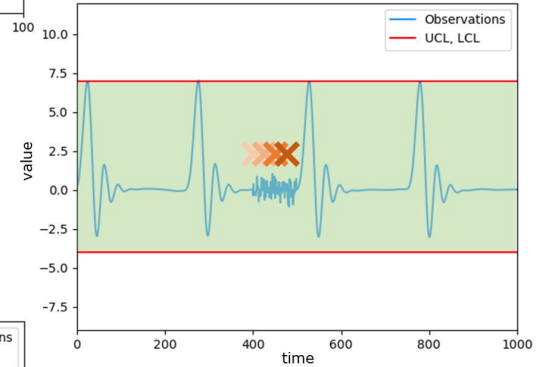
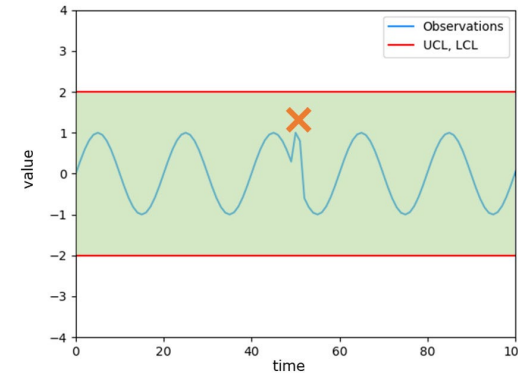
- ▶ EU guardrail: General Data Protection Regulation
  - GDPR recognises *data concerning health* as a special category of data
- ▶ Anonymization
  - Time-series-data useless without timestamps
- ▶ Pseudonymization / Coding
- ▶ Informed consent of patients (and parents?)
  - “Sometimes” data usage via research option possible
- ▶ Additionally Institutional Review Board / ethics committee approval

# Annotation of Data

- ▶ Annotations needed for many ML algorithms
- ▶ Online annotation
  - Lack of time during daily routine
  - Chance to have a “look-see”
- ▶ Post-hoc annotation
  - Missing detail knowledge
- ▶ Variance in different annotators

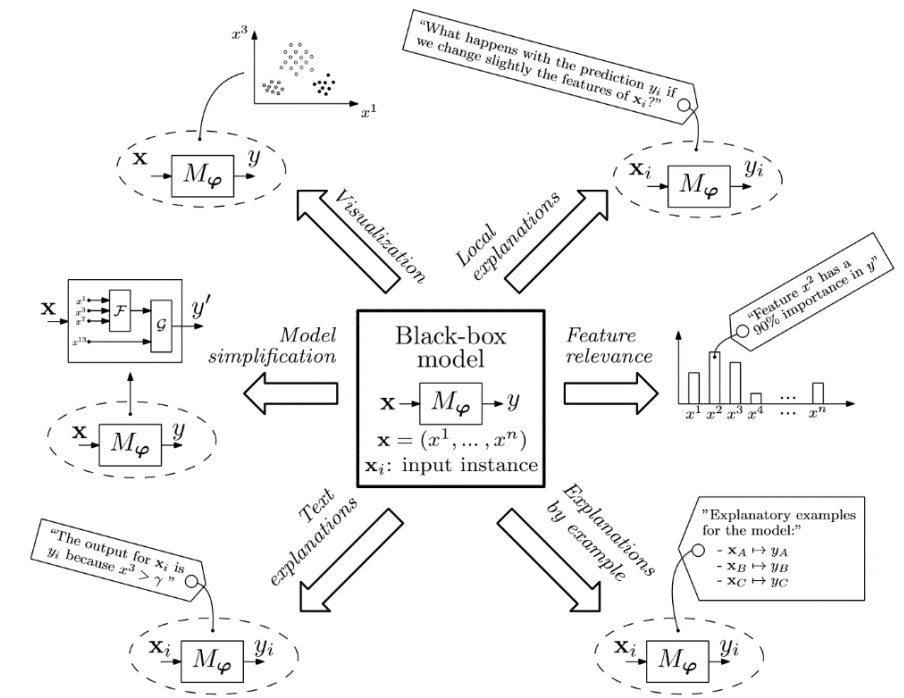


- ▶ Anomalies in Data
  - Sensor Errors
  - Wear-out of sensors
  - By-effects of treatment or caregiving
- ▶ Synchronicity of different measurements
- ▶ Need to also include rare events
- ▶ Resolution of Data
- ▶ Desire for multicentric studies
  - Legal issues of exchanging data
  - Comparability of data
    - Standard Operating Procedures
    - Classification of illnesses e.g. ICD-Codes



# Need for explainability and interpretability

- ▶ EU AI Act demands *transparency & human oversight*
- ▶ Use-Cases
  - Debugging of algorithms
  - Approval of medical product
  - Plausibilize decision support recommendations
  - Education of e.g. medical students
- ▶ Intrinsic explainable methods
  - Rule-based approaches
  - Ascribe nodes within net to specific property
- ▶ Add-on explainability
  - Additional Algorithms

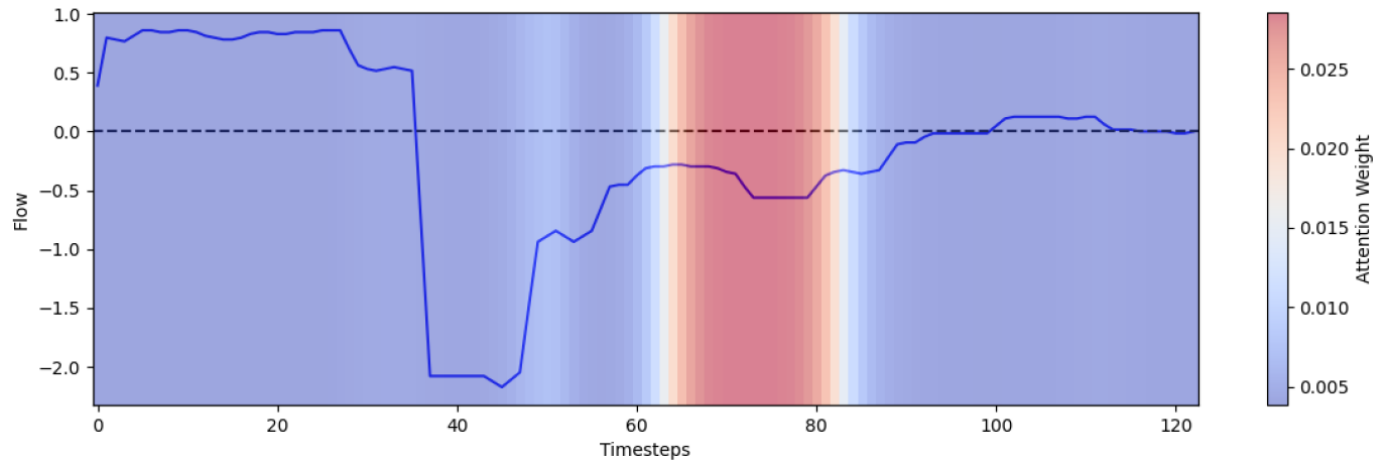


Examples for Concepts for xAI<sup>[1]</sup>

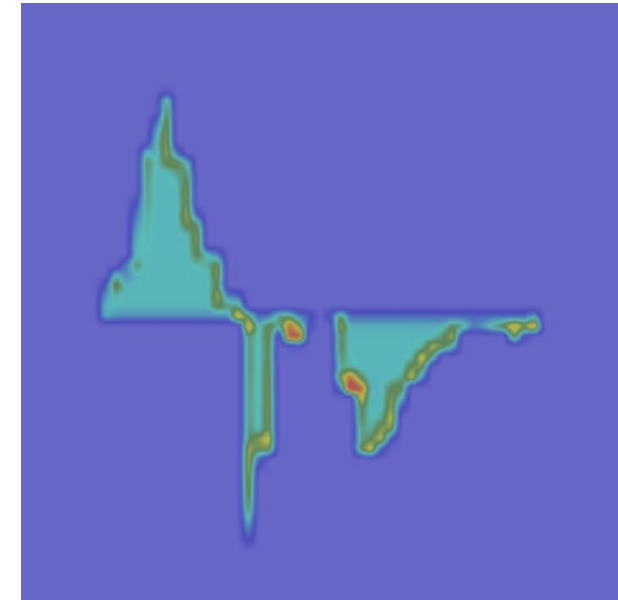
[12] Arrieta et al., "Explainable Artificial Intelligence (XAI): Concepts, Taxonomies, Opportunities and Challenges toward Responsible AI" (2019)

- ▶ Opening the black box of neural networks
- ▶ Highlight important sequences

IEE detection RNN



IEE detection CNN



- ▶ Ethical discussions need to be carried out
  - Blue-prints / pathways to enable data exchange for research
    - European Health Data Space
    - European Open Science Cloud
  - More Detailed confines for allowed actions
    - Reducing discussions with Institutional Review Boards
  
- ▶ Define different classes of explainability / interpretability for AI methods
  
- ▶ Allow for the usage of AI in Physiological Closed-Loop Control Applications
  - Displace Clinician-in-the-loop as safeguarding