# Artificial Intelligence in Oncology

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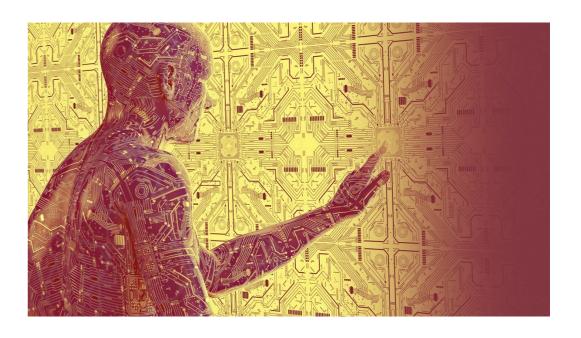
President

**Solution of Artificial Intelligence Applications** 

**CEO** 

Artificial Intelligence Expert







Al sees a fast adoption in many industries

#### Al Recent Evolution



In the last years it saw its first superhuman medical applications



Should we be worried?

#### Era of Augmented Intelligence NOT Al Era



- Al is enhancing not replacing human intelligence
- It's being proven that physicians and Al working together
- Outperform Al or Physicians working alone

#### Al Advantages for Physicians & Patients

Al gives physicians more time for human interactions with their patients

Patients will no longer seem like a collection of clinical, lab data, and images

Al could enhance patients' image as human beings

#### Information Technology

Facilitated the rise of modern medicine

Has a profound impact on medical imaging and molecular biology

Both fields produce vast amounts of highthroughput data

Instead of finding answers to biomedical questions we just started to formulate more meaningful ones.



#### Modern Medicine faces Data Science problems



Data Science problems are properly solved with AI



NOT by a conventional hypothesis-driven approach



and the old fashion statistical approach



Globally, more than 8 million people die from cancer every year

#### Cancer facts



But **early** detected cancers can be cured



Existing tests: invasive (surgical procedures) or non-invasive but with low accuracy

#### **SURVIVAL AND STAGE OF DIAGNOSIS**

•Treatment efficiency



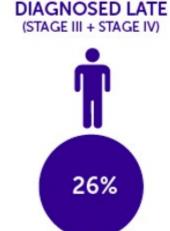
Treatment costs





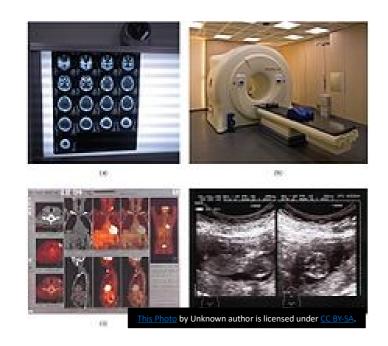








#### Molecular vs. Imaging alterations



- Imaging methods can be used for cancer early detection.
  - e.g. mammography in breast cancer
- Al can simultaneously analyze many medical images, and YET...
- Imaging can't detect a tumor before formation

Vs.
Imaging alterations



Molecular alterations related to cancer development, precede the formation of a tumor



These methods work for a size undetectable by the imaging techniques

# No more pain: "Liquid biopsies"



For molecular cancer tests:



tissue biopsies could be replaced by "liquid biopsies," (e.g., a blood drop)



blood circulation is like a *liquid nervous* system



These *non-invasive* tests avoid related patients':

Fear

Pain

Risks

#### Collaboration not replacement!



The best strategy is to exploit the complementarities between Human and Artificial Intelligence



A common mistake is to use biomedical knowledge to select subsets of relevant molecular alterations from Big Data



Or to impose a model



Let the data speak to the AI (not to us!)

Al predictive models could be very accurate (>95%)

By letting the data speak to the AI

Highly accurate predictive models can be developed

These models should satisfy the ART criteria

Molecular tests for diagnosis

**Prognosis** 

Response to treatment prediction



Highly Accurate, with performance > 95%

## The ART criteria



Robust, having similar accuracy for different groups of patients



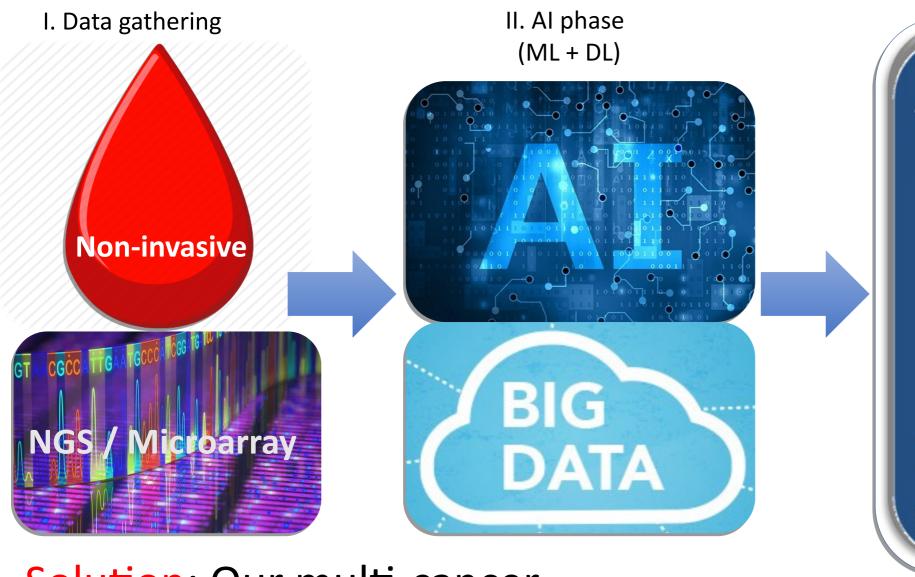
Transparent instead of "black-box."

### Our Al non-invasive multi-cancer diagnosis and early detection test

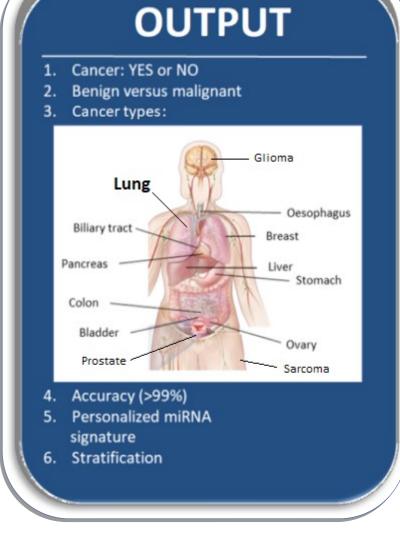
- Is the best existing test
- Working on 13 cancer types.
- Accuracy greater than 99%.
- Non-invasive, starts from a blood drop ("liquid biopsy").



#### Diagnosis for 13 cancer types



Solution: Our multi-cancer early-detection test



Accuracy > 99%!

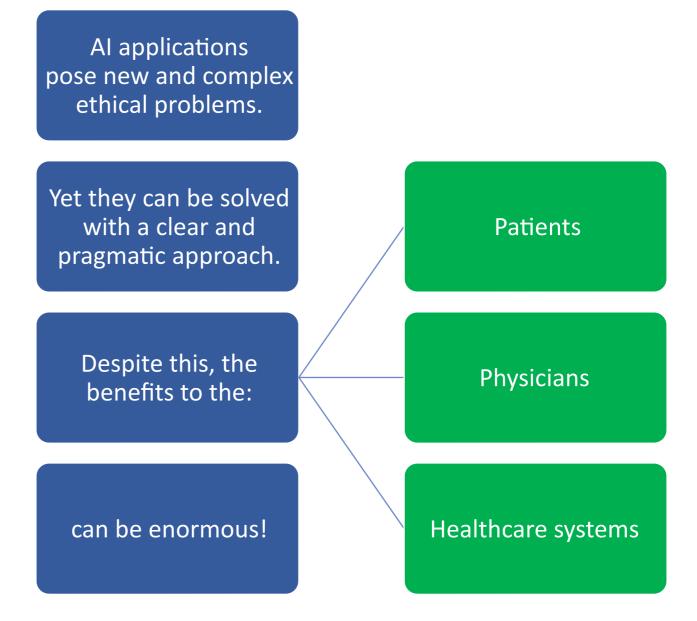
### Comparison with the competition

#### Our test:

- Has the highest accuracy (>99%)
- Works on more cancer types (13)
- Successfully discriminates between malign and benign tumors
- Was validated on a higher number of cases

Company	Cancer types	Median accuracy	Lowest accuracy	Number of cases
AIE	13	>99%	99%	>6000
CancerSEEK	8	~77%	33%	~1000
Delfi	7	~73%	57%	208

# Ethical problems and Benefits



#### The real issue



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Considering all the benefits,

It would be unethical not to use AI to revolutionize medicine.

#### Contact



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