

Title: Artificial intelligence, yes — But what do we need?

Authors: Federico Gordo

DOI: 10.17235/reed.2025.11435/2025 Link: <u>PubMed (Epub ahead of print)</u>

Please cite this article as: Gordo Federico. Artificial intelligence, yes — But what do we need?. Rev Esp Enferm Dig 2025. doi: 10.17235/reed.2025.11435/2025.

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.



Artificial intelligence, yes — But what do we need?

Federico Gordo Vidal.

Servicio de Medicina Intensiva.

Hospital Universitario del Henares (Coslada-Madrid)

Avenida de Marie Curie s/n

28822. Coslada

Email: fgordo5@gmail.com

Keywords: Artificial intelligence. Healthcare system. Machine learning. Patient data.

Dear Editor,

We have read with great interest the editorial by Mayol J et al. (1) regarding the digital revolution and the integration of artificial intelligence (AI) into various healthcare processes. We fully agree that this is an irreversible phenomenon with considerable transformative potential. In our field, AI is already producing significant changes through the development of expert systems and devices based on machine learning and deep neural networks, which optimize monitoring, diagnosis, and treatment in intensive care units (ICUs) as well as in the management of digestive diseases (2,3).

However, we consider it essential to highlight two key challenges to ensure that these advances translate into effective and safe clinical improvements:

Development of automated systems for the acquisition and processing of high-quality clinical data. Current evidence indicates that the robustness and applicability of AI models depend largely on the availability of reliable, standardized, and representative



clinical data. The absence of these requirements increases the risk of biases and errors in automated clinical decision-making. Therefore, it is a priority for both health authorities and professionals to promote the interoperability and integration of clinical information systems.

Incorporation of multidisciplinary professional profiles into healthcare teams. The implementation of AI in clinical practice requires collaboration between healthcare professionals, data engineers, ethics specialists, and experts in clinical data analysis and management. This multidisciplinary approach is essential to ensure the ethical, safe, and efficient integration of AI into healthcare delivery (4).

It should be noted that this debate is also extending to related fields, such as biomedical research and scientific publishing, which are also expected to undergo substantial transformations in the near future (5).

In conclusion, we share your perspective on the disruptive impact of AI in medicine, but we emphasize the need to invest both in the automation and standardization of high-quality clinical data acquisition and in the training of multidisciplinary teams. Only through these strategies will it be possible to achieve responsible, safe, and patientcentered implementation.

Referencess:

- (1) Mayol J, Gámez Alastuey M, Anula Fernández R. Redefining healthcare The transformative power of generative AI in modern medicine. Rev Esp Enferm Dig. 2025 Jun;117(6):299-302. doi: 10.17235/reed.2025.11081/2024.
- (2) Li H, Zang Q, Li Q, Lin Y, Duan J, Huang J, Hu H, Zhang Y, Xia D, Zhou M. Development of a Machine Learning-Based Predictive Model for Postoperative Delirium in Older Adult Intensive Care Unit Patients: Retrospective Study. J Med Internet Res. 2025 Jun 19;27:e67258. doi: 10.2196/67258.



- (3) Ortiz Zúñiga O, Fernández Esparrach MG, Daca M, Pellisé M. Artificial intelligence in gastrointestinal endoscopy - Evolution to a new era. Rev Esp Enferm Dig. 2022 Oct;114(10):605-615. doi: 10.17235/reed.2022.8961/2022.
- (4) Gordo Vidal F, Gordo Herrera N. Advanced data analysis and intensive care medicine. Med Intensiva (Engl Ed). 2024 Jan;48(1):1-2. doi: 10.1016/j.medine.2023.07.012.
- (5) Marcano-Millán E, Gordo F, Martín González F. Artificial intelligence, will it change the way articles are written in intensive medicine? Med Intensiva (Engl Ed). 2023 Aug;47(8):478-479. doi: 10.1016/j.medine.2023.04.002.