

The Transformative Role of Artificial Intelligence in Training Obstetrics and Gynecology Residents

Anuradha Choudhary¹, Aditya Narayan Choudhary²

Keywords: Artificial intelligence, Artificial intelligence in healthcare, Gynecology, Obstetrics, Resident training.

Journal of Obstetric and Gynaecological Practices POGS (2023): 10.5005/jogyp-11012-0012

INTRODUCTION

The field of obstetrics and gynecology is a vital branch of medicine that focuses on women's reproductive health and childbirth. The training of obstetrics and gynecology residents play a critical role in producing competent healthcare professionals who can provide high-quality care to women. With the rapid advancements in technology, artificial intelligence (AI) has emerged as a transformative tool that can revolutionize medical education and training.¹ In this article, we hereby explore the role of AI in training obstetrics and gynecology residents, highlighting its potential benefits and challenges.

Enhanced Learning and Simulation

One of the primary advantages of AI in obstetrics and gynecology training is its ability to provide enhanced learning experiences through realistic simulations. Artificial intelligence-powered virtual reality (VR) and augmented reality (AR) platforms allow residents to practice a wide range of procedures, such as pelvic exams, suturing, and even complex surgeries, in a controlled and risk-free environment. These simulations provide a safe space for residents to gain hands-on experience, develop their technical skills, and improve their confidence before performing procedures on actual patients. Artificial intelligence algorithms can provide real-time feedback, pointing out errors and suggesting improvements, thus aiding in skill refinement.²

Access to Comprehensive Knowledge

Artificial intelligence can act as a vast repository of medical knowledge, giving residents access to comprehensive and up-to-date information. With AI-powered platforms, residents can access a wealth of medical literature, research papers, clinical guidelines, and case studies relevant to obstetrics and gynecology. This access empowers residents to stay abreast of the latest developments in the field, make evidence-based decisions, and enhance their diagnostic and treatment capabilities.³ Furthermore, AI can assist in automating routine tasks, such as medical record review and data analysis, freeing up residents' time to focus on more complex aspects of patient care.⁴

Personalized Learning

Every resident has unique strengths, weaknesses, and learning styles. Artificial intelligence can leverage individualized algorithms to tailor the training experience to meet the specific needs of each resident. By analyzing performance data and tracking learning

¹Department of Obstetrics and Gynaecology, Maxwell Superspeciality Hospital, Varanasi, Uttar Pradesh, India

²Department of Plastic Surgery, Heritage Institute of Medical Sciences, Varanasi, Uttar Pradesh, India

Corresponding Author: Aditya Narayan Choudhary, Department of Plastic Surgery, Heritage Institute of Medical Sciences, Varanasi, Uttar Pradesh, India, Phone: +917976842712, e-mail: Choudharyadityanarayan@gmail.com

How to cite this article: Choudhary A, Choudhary AN. The Transformative Role of Artificial Intelligence in Training Obstetrics and Gynecology Residents. *J Obstet Gynaecol Pract POGS* 2023;1(2): 61–62.

Source of support: Nil

Conflict of interest: None

patterns, AI algorithms can identify areas of improvement and design personalized learning modules to address those gaps. This personalized approach ensures that residents receive targeted training, maximizing their learning outcomes and optimizing the time spent during their training period.^{5,6}

Diagnostic Assistance

Artificial intelligence algorithms have the potential to assist residents in diagnostic decision-making. By analyzing patient data, medical history, and diagnostic imaging, AI systems can provide valuable insights and assist in identifying potential diagnoses, highlighting relevant clinical factors, and suggesting appropriate treatment options. This augmentation of diagnostic capabilities can serve as a valuable learning tool for residents, promoting critical thinking and honing their clinical reasoning skills.⁷

Improved Preoperative Planning

Artificial intelligence technologies are aiding surgeons in the preoperative planning phase of surgery. By leveraging machine learning techniques, AI algorithms can learn from large datasets and provide surgeons with valuable insights and recommendations, allowing for more accurate surgical diagnosis and planning.⁸

Furthermore, AI can simulate surgical procedures virtually, enabling surgeons to visualize the potential results before operating on the patient. This virtual planning not only reduces the risk of complications but also improves surgical efficiency by reducing the time spent in the operating room.⁹

Enhanced Surgical Precision

During surgeries, precision is of utmost importance. Artificial intelligence-powered technologies such as computer-aided surgery (CAS) systems provide surgeons with real-time guidance and feedback during the procedure. These systems use image recognition algorithms to track the surgical instruments and the patient's anatomy, providing the surgeon with visual cues and assistance in realtime.¹⁰

Additionally, AI algorithms can integrate data from various sources, such as preoperative images, intraoperative imaging, and surgical navigation systems, to create a comprehensive and accurate map of the surgical site. This fusion of information enhances the surgeon's ability to locate critical structures, precisely plan incisions, and optimize the placement of sutures, leading to better aesthetic and functional outcomes.¹⁰

Personalized Treatment

Every patient with infertility issues is unique, requiring a personalized treatment plan tailored to their specific needs. Artificial intelligence algorithms excel at analyzing vast amounts of patient data, including genetic information, facial morphology, and past surgical outcomes. By leveraging this data, AI can aid in developing personalized treatment plans that consider individual variations and optimize the surgical approach.¹¹

Postoperative Monitoring and Rehabilitation

Artificial intelligence technologies are also transforming the postoperative phase of obstetrics and gynecology surgery. With the help of computer vision and machine learning, AI algorithms can analyze postoperative images and detect any signs of complications or suboptimal healing. This early detection allows for timely interventions and reduces the risk of adverse outcomes.¹²

Furthermore, AI-powered virtual rehabilitation systems are being developed to assist patients in their recovery journey. These systems provide personalized exercises, guidance, and feedback, helping patients recover. Artificial intelligence algorithms continuously adapt the rehabilitation programs based on the patient's progress, leading to more efficient and targeted therapy.¹³

Challenges and Considerations

While the integration of AI in obstetrics and gynecology training holds immense promise, several challenges must be addressed. The ethical use of AI, data privacy and security, and the potential for overreliance on technology are some of the key concerns that need to be carefully navigated. Additionally, the incorporation of AI in training programs requires significant investment in infrastructure, resources, and faculty training to ensure its successful implementation and integration into the curriculum.¹⁴

CONCLUSION

Artificial intelligence has the potential to revolutionize the training of obstetrics and gynecology residents, offering enhanced learning experiences, personalized instruction, and diagnostic assistance. By leveraging AI-powered simulations, access to comprehensive

medical knowledge, and personalized learning algorithms, residents can acquire the necessary skills and knowledge to deliver quality care to women. However, careful consideration must be given to the ethical, privacy, and security implications and appropriate investments must be made to overcome the challenges associated with the integration of AI in training programs. Ultimately, the synergy between AI and resident training holds great promise in advancing the field of obstetrics and gynecology.

REFERENCES

1. Noorbakhsh-Sabet N, Zand R, Zhang Y, et al. Artificial intelligence transforms the future of health care. *Am J Med* 2019;132(7):795–801. DOI: 10.1016/j.amjmed.2019.01.017.
2. Knoops PGM, Papaioannou A, Borghi A, et al. A machine learning framework for automated diagnosis and computer-assisted planning in plastic and reconstructive surgery. *Sci Rep* 2019;9:13597. DOI: <https://doi.org/10.1038/s41598-019-49506-1>.
3. Kanevsky J, Corban J, Gaster R, et al. Big data and machine learning in plastic surgery: A new frontier in surgical innovation. *Plast Reconstr Surg* 2016;137(5):890e–897e. DOI: 10.1097/PRS.0000000000002088.
4. Mehta N, Devarakonda MV. Machine learning, natural language programming, and electronic health records: The next step in the artificial intelligence journey? *J Allergy Clin Immunol* 2018;141(6):2019–2021.e1. DOI: 10.1016/j.jaci.2018.02.025.
5. Pucchio A, Rathagiri R, Caton N, et al. Exploration of exposure to artificial intelligence in undergraduate medical education: A Canadian cross-sectional mixed-methods study. *BMC Med Educ* 2022;22(1):815. DOI: 10.1186/s12909-022-03896-5.
6. Winkler-Schwartz A, Bissonnette V, Mirchi N, et al. Artificial Intelligence in medical education: Best practices using machine learning to assess surgical expertise in virtual reality simulation. *J Surg Educ* 2019;76(6):1681–1690. DOI: 10.1016/j.jsurg.2019.05.015.
7. Kumar Y, Koul A, Singla R, et al. Artificial intelligence in disease diagnosis: A systematic literature review, synthesizing framework and future research agenda. *J Ambient Intell Humaniz Comput* 2023;14(7):8459–8486. DOI: 10.1007/s12652-021-03612-z.
8. Yi J, Kang HK, Kwon JH, et al. Technology trends and applications of deep learning in ultrasonography: Image quality enhancement, diagnostic support, and improving workflow efficiency. *Ultrasonography* 2021;40(1):7–22. DOI: 10.14366/usg.20102.
9. Espinoza J, Good S, Russell E, et al. Does the use of automated fetal biometry improve clinical work flow efficiency? *J Ultrasound Med* 2013;32(5):847–850. DOI: 10.7863/ultra.32.5.847.
10. Loftus TJ, Tighe PJ, Filiberto AC, et al. Artificial intelligence and surgical decision-making. *JAMA Surg* 2020;155(2):148–158. DOI: 10.1001/jamasurg.2019.4917.
11. Iftikhar P, Kuijpers MV, Khayyat A, et al. Artificial intelligence: A new paradigm in obstetrics and gynecology research and clinical practice. *Cureus* 2020;12(2):e7124. DOI: 10.7759/cureus.7124.
12. Anisuzzaman DM, Wang C, Rostami B, et al. Image-based artificial intelligence in wound assessment: A systematic review. *Adv Wound Care (New Rochelle)* 2022;11(12):687–709. DOI: 10.1089/wound.2021.0091.
13. Wæhrens EE, Amris K, Fisher AG. Performance-based assessment of activities of daily living (ADL) ability among women with chronic widespread pain. *Pain* 2010;150(3):535–541. DOI: 10.1016/j.pain.2010.06.008.
14. Farhud DD, Zokaei S. Ethical issues of artificial intelligence in medicine and healthcare. *Iran J Public Health* 2021;50(11):i–v. DOI: 10.18502/ijph.v50i11.7600.