

Exploring the Potential of Artificial Intelligence in Infectious Disease

Husna Sengul Askin¹, Ahmet Sahin², Lutfu Askin^{3*}

¹ Gaziantep City Hospital, Department of Infectious Disease, Gaziantep, Turkey.

² Gaziantep Ersin Arslan Education and Research Hospital, Department of Infectious Diseases and Clinical Microbiology, Gaziantep, Turkey.

³ Gaziantep Islam Science and Technology University, Department of Cardiology, Gaziantep, Turkey.

Abstract

Artificial intelligence (AI) is effectively addressing numerous challenges in the detection and treatment of infectious diseases, leveraging its inherent capabilities. Our research's primary focus was on the key obstacles associated with AI in the context of infectious diseases. This review recommends using AI in both clinical practice and infectious disease research. AI assists academics in saving time by efficiently arranging the various components of a paper, including the title, abstract, introduction, methodology, findings, and discussion. As a result, the pace of academic writing increases and improves. Certain assumptions in the field of AI can be misleading or incorrect, compromising the study's validity. Contemporary AI systems offer precise and dependable outcomes, although they frequently lack profound understanding. The lack of self-diagnostic technology in AI results in incorrect object or situation identification and poses potential safety risks. Effective medical technology utilization requires regulatory scrutiny and monitoring. Several institutions have halted their research activities because of AI inefficiency. AI can aid researchers in gathering medical data and conducting patient surveys.

Key words: *Infectious disease, Medical data, Artificial intelligence*

* **Corresponding author:** Lutfu Askin, E-mail: lutfuaskin23@gmail.com, ORCID ID:0000-0001-7768-2562

Introduction

Artificial intelligence (AI) is the emulation of human cognitive processes by computers, especially computer systems. The processes include learning (acquiring material and rules for its application), reasoning (using rules to draw approximate or definite conclusions), and self-correction (1). AI is often classified into two categories: Narrow AI, often known as weak AI, is specifically created and educated to do a single job. It is focused on efficiently carrying out a certain activity, such as face recognition, language translation, or playing chess. The majority of current AI systems belong to this group (2). Strong AI, also known as general AI, has human-like capabilities and can comprehend, acquire, and use knowledge in several fields. AI is mostly theoretical and continues to be the focus of current research. AI approaches include machine learning for computers to learn from data and make predictions or judgements, and natural language processing for computers to comprehend and produce human language (3). Additional methods include computer vision, robotics, expert systems, and neural networks. AI is used in many sectors, such as healthcare, finance, education, transportation, entertainment, and beyond. It has the capacity to transform

industries, enhance efficiency, and address intricate issues (4). Nevertheless, technology also gives rise to ethical and cultural difficulties, including employment displacement, algorithmic prejudice, privacy concerns, and the risk of abuse. It is crucial to tackle these difficulties and guarantee that the development and use of AI contribute positively to society (5).

AI has great promise in the areas of infectious disease research, prevention, and control. Here are some applications of AI:

AI algorithms can examine extensive datasets of clinical symptoms, test findings, and demographic information to detect patterns that suggest infectious illnesses. AI models may aid in the early identification of epidemics by assessing social media postings, internet search patterns, and news stories to identify signals of increasing sickness activity. AI algorithms can evaluate molecular structures to predict the efficacy of new medication molecules in fighting infectious illnesses, aiding in drug discovery and development. This may greatly speed up the drug development process by cutting down on the time and money needed for laboratory testing (6).

Epidemiological Modelling: AI-driven models may mimic the transmission of infectious illnesses across populations and forecast upcoming epidemics. These models include elements including

population density, travel patterns, and environmental conditions to provide significant insights for public health planning and response operations (7).

Customised Treatment: AI algorithms may examine patient data to create treatment regimens that are specific to individual risk factors, genetic predispositions, and reactions to therapy. Enhancing patient outcomes by refining treatment approaches and minimising the likelihood of problems (8).

AI systems can analyse real-time data from many sources including electronic health records, wearable devices, and environmental sensors to track disease spread and detect emergent hazards. This allows public health officials to promptly carry out interventions and containment measures. AI algorithms may aid in developing and refining vaccines by forecasting antigen structures, pinpointing new vaccination options, and enhancing vaccine compositions. This may expedite the process of creating vaccines for newly developing infectious illnesses. AI algorithms can assess healthcare resource utilisation trends to anticipate future demand for medical supplies, hospital beds, and healthcare professionals during infectious disease epidemics. This aids healthcare companies in optimising resource allocation and guaranteeing prompt patient access to services (9, 10).

How can AI be Applied in Infectious Disease?

AI may be used in several ways to tackle issues of infectious illnesses. AI algorithms may evaluate various datasets, such as patient symptoms, test findings, and environmental variables, to identify patterns that suggest infectious illnesses. Machine learning models may assist healthcare practitioners in diagnosing infections more precisely and rapidly, which can aid in prompt treatment and containment efforts. AI-powered models in epidemiological modelling may mimic disease transmission dynamics in communities by considering demographics, movement patterns, and environmental circumstances (11, 12).

These models allow academics and public health officials to forecast the transmission of infectious illnesses, evaluate the efficacy of intervention efforts, and distribute resources effectively. AI approaches like deep learning and molecular modelling help accelerate drug research by forecasting the effectiveness and safety of possible medication candidates. AI algorithms examine extensive databases of chemical compounds and biological targets to identify potential candidates for future testing, expediting the development of novel antiviral medicines and vaccines (13, 14).

AI systems may assess current data from many sources, such as social media, news stories, and healthcare databases, to track disease outbreaks and identify new risks. AI-powered surveillance systems detect clusters of cases and unique sickness patterns, allowing for early warning and swift response to infectious disease epidemics. Personalised therapy and care include using AI algorithms to assess individual patient data, including genetic information, medical history, and treatment outcomes, in order to customise treatment plans and actions. AI facilitates personalised medicine by forecasting specific patient outcomes and treatment responses, leading to optimised patient care and enhanced treatment results (15, 16).

AI methods may expedite vaccine development by forecasting antigen structures, refining vaccine compositions, and pinpointing possible vaccination options. AI-driven vaccine design platforms expedite the development and testing of vaccines for new infectious illnesses, thereby decreasing the time and expenses involved in vaccine creation. AI algorithms can assess healthcare resource utilisation trends to anticipate future demand for medical supplies, hospital beds, and healthcare professionals during infectious disease epidemics (17).

AI assists healthcare systems in efficiently allocating resources and planning capacity

to properly handle increases in demand and provide sufficient treatment for patients. AI has promising prospects to improve the prevention, diagnosis, treatment, and management of infectious illnesses. AI utilises sophisticated algorithms and computational methods to enhance proactive and efficient strategies for managing infectious illnesses, leading to better public health results and decreased global infectious disease impact (18).

AI in Clinical Practice of Infectious Disease

AI is being more often used in the therapeutic field of infectious illnesses, providing many advantages in diagnosis, treatment, and care. Here are some of the primary applications of AI:

AI algorithms may aid physicians in detecting infectious illnesses by evaluating medical pictures like X-rays, CT scans, and MRIs to discover patterns that suggest certain infections. AI-driven image analysis technologies can identify distinct characteristics of pneumonia, TB, and other infectious illnesses, aiding physicians in making precise and prompt diagnoses. Antimicrobial stewardship involves using AI systems to examine electronic health records (EHRs) and microbiological data. AI algorithms assist doctors in optimising antibiotic prescription practices, reducing needless antibiotic administration, and preventing the spread of antimicrobial-

resistant illnesses by recognising patterns of antimicrobial use and resistance (4, 19).

AI-driven predictive analytics models can anticipate the likelihood of healthcare-associated infections (HAIs) and other infectious problems in hospitalised patients. By examining patient data, including vital signs, test findings, and clinical notes, these models allow for the early detection of high-risk patients and support specific treatments to avoid infections and enhance patient outcomes (20).

AI algorithms may assist physicians in optimising treatment plans for infectious illnesses by assessing patient-specific data such as microbiological test results, comorbidities, and medication history. AI-supported therapy suggestions allow for tailored and successful treatment methods by taking into account specific patient features and pathogen characteristics (21).

AI-powered surveillance systems can monitor real-time data streams, such as electronic health records, laboratory results, and syndromic surveillance data, to identify outbreaks of infectious illnesses. By examining the timing and location of illnesses, these systems provide advance notice of developing dangers and enable rapid public health response actions. Genomic analysis may be conducted using AI methods like machine learning and deep learning to examine pathogen genomic data and identify genetic changes linked to

virulence, antibiotic resistance, and transmission dynamics. AI-supported genomic analysis clarifies the genetic epidemiology of infectious illnesses, improving our comprehension of disease transmission routes and guiding specific management strategies (22, 23).

AI-driven telemedicine technologies provide remote consultations and monitoring of patients with infectious illnesses, especially in underserved or rural regions. Telemedicine improves access to infectious disease care and maintains continuity of care for patients by using AI algorithms for triage, symptom evaluation, and remote monitoring of vital signs. AI has the potential to revolutionise the clinical practice of infectious illnesses by boosting diagnosis accuracy, optimising treatment choices, improving surveillance capacities, and allowing more customised and proactive ways to manage infectious diseases. AI technologies are anticipated to have a growing impact on fighting infectious illnesses and enhancing patient outcomes as they progress (24, 25).

ChatGPT in Scientific Writing of Infectious Disease

Title

Many publishing requirements state that a research report's title is the most essential portion since it summarises the study's results. ChatGPT lists infectious disease

research paper names. ChatGPT answers natural language inquiries using machine learning from a large text corpus. With relevant keywords and proper writing, this programme may produce numerous suitable research paper titles. Knowing ChatGPT cannot replace human judgement and aptitude is crucial. The tool may propose titles, but researchers must verify that they match the article's content and context. When naming a research article, researchers should consider readership, publication requirements, and ethics (8).

Abstract

An abstract should be short, concentrate on important concepts, follow an organised framework, include relevant keywords, verify for accuracy and clarity, and consider the audience. Summarising primary results, methods, and conclusions using ChatGPT may assist in producing an infectious disease study abstract (8).

Introduction

ChatGPT helps academics write infectious disease research papers. ChatGPT may discuss the epidemiology and clinical features of the infectious illness in the study paper. ChatGPT proposes ways the article might cover research topic-related gaps. ChatGPT may suggest discussing infectious disease research to contextualise the study question and article. ChatGPT may suggest presenting the research question, aims, and

a brief summary of the study methods and results to form a logical framework (26-29).

Method

ChatGPT may also provide comments on infectious disease research methodologies. Provide a checklist or directions for structuring the methods section to incorporate all necessary information. Advise on study design, participant selection, data collection, and statistical analysis. These concepts might be tailored to the study. Verify the methods section for clarity and consistency. It recommends alternative words or phrases to simplify the sentence. Find missing or contradictory data in the technique. Examples of well-written infectious disease methods sections to help with formatting and style (26-30).

Results

ChatGPT offers infectious disease research report results authoring. Summarise results via tables, graphs, or diagrams. Clearly explain the results, including statistical analysis and trends. Include any study design or data collection biases in your interpretation. This software can check that the findings are accurate and include all important information (8).

Discussion

ChatGPT may aid in the infectious illness research report debate. Summary of research results, including data patterns and trends. Explain the study results and any design or data collection biases. Discuss

how the results of infectious disease research relate to past and future research. Give answers to study limitations and suggest further research. Develop a concise conclusion that outlines the discussion section's important points (8).

Can AI substitute for an infectious disease doctor?

Although AI has advanced in healthcare and may aid infectious disease physicians in many activities, it is improbable that AI will entirely replace infectious disease doctors in the near future. Here are several reasons:

Sophisticated Decision-Making: Diagnosing and treating infectious diseases involves complex decision-making based on patient history, test findings, epidemiological considerations, and clinical expertise. AI may assist in data analysis and provide suggestions, but human physicians have the skills and experience required to evaluate complex clinical situations and make knowledgeable judgements (31).

Infectious disease specialists not only diagnose and treat diseases but also provide emotional support and direction to patients and their families, enhancing patient interaction and empathy. AI lacks the capacity for empathy and good communication with patients, which are crucial elements of medical treatment. Infectious illness specialists take into account several aspects of patients' lives, such as socioeconomic issues, cultural

views, and psychological concerns, while creating treatment programmes. AI may find it challenging to successfully integrate these environmental aspects into therapeutic decision-making (32).

Medical decision-making often entails ethical difficulties and concerns about patient autonomy, beneficence, and non-maleficence. Infectious disease specialists are skilled in handling intricate ethical dilemmas, but AI lacks moral judgement and may not consistently follow ethical standards (33).

Continuous learning and adaptation: contagious illness Doctors participate in continuous learning and professional advancement to be informed about the most recent research, guidelines, and best practices in infectious diseases. AI systems may be proficient in learning from extensive datasets but may not be as adept as human physicians in adapting to new knowledge and changing therapeutic recommendations (34).

Collaborative healthcare approach: Infectious disease specialists work with diverse teams, such as nurses, chemists, laboratory scientists, and public health experts, to provide thorough treatment to patients with infectious disorders. AI may aid in data integration and communication in healthcare, but it cannot substitute for the collaborative aspect of healthcare teams. AI may enhance the skills of infectious disease

physicians and enhance patient outcomes, but human knowledge and judgement are still essential in medicine. AI is unlikely to completely replace infectious disease physicians. Instead, it will likely be used as a beneficial tool to assist their clinical decision-making and improve patient care (35, 36).

What Problems will AI Bring in the Field of Infectious Disease?

AI has several advantages in the realm of infectious illness, but it also brings out multiple obstacles and issues. For training and validation, AI algorithms rely on sizable datasets that might contain biases or errors. Biases in training data, including the lack of representation of certain demographics or locations, may result in algorithmic biases and discrepancies in diagnosis, treatment, and results. Incomplete or noisy data might hinder the effectiveness and dependability of AI models in predicting and managing infectious diseases (37).

Interpretability and Transparency: AI models, especially deep learning algorithms, are often opaque systems with decision-making processes that are challenging to comprehend or explain. Insufficient openness in AI algorithms may erode confidence among professionals, patients, and policymakers, especially in crucial areas like infectious disease diagnosis and treatment. It is crucial to

guarantee the interpretability and transparency of AI models for their acceptance and use in clinical practice (38). Utilising AI in infectious illnesses presents ethical dilemmas regarding patient privacy, permission, autonomy, and fairness. Data privacy, informed consent for AI-driven diagnoses and treatments, and the risk of algorithmic discrimination need thorough examination and regulation. It is crucial to ensure that AI technologies comply with ethical norms and regulatory requirements to reduce possible damages and provide fair access to healthcare services (39).

Collaboration between humans and AI: AI may aid physicians in diagnosing, treating, and controlling infectious illnesses, but human supervision and discretion in clinical decision-making must be maintained. Relying too much on AI algorithms without thorough evaluation and confirmation by human specialists might result in mistakes, incorrect diagnoses, and negative consequences. Facilitating successful cooperation between people and AI systems, referred to as human-centred AI, is essential for maximising the capabilities of both and enhancing patient care (40).

Allocation of resources and accessibility: Implementing AI technology in infectious illnesses might worsen current gaps in healthcare access and resource distribution. The high expenses of AI adoption, inadequate infrastructure, and differences in

digital literacy and technology access might exacerbate the divide between affluent and underprivileged areas. To achieve fair access to AI-powered healthcare solutions, it is essential to tackle socioeconomic obstacles and provide resources to enhance healthcare infrastructure and capacity-building programmes (41).

AI-driven infectious disease monitoring systems and healthcare platforms face security and privacy risks, including susceptibility to cybersecurity threats such as data breaches, malware attacks, and unauthorised access. Ensuring patient data security, confidentiality, and protection against harmful activity are crucial factors in creating and implementing AI-powered healthcare technology.

Enforcing strong cybersecurity protocols and complying with data protection laws are crucial for maintaining patient confidence and confidentiality (42).

To tackle these difficulties, multidisciplinary cooperation among doctors, academics, policymakers, ethicists, and technologists is needed to create responsible AI solutions that focus on patient safety, equality, and ethical concerns. Proactively tackling these obstacles, AI has the potential to change infectious disease management and effectively enhance public health results (43). The main topic points of recent studies are shown in Tables 1, 2, and 3.

Table 1. The main topic points of recent studies

Reference no.	Authors	Subjects	Main theme
Ref [1]	Brownstein et al.	Infectious-Disease	Artificial intelligence (AI) is the emulation of human cognitive processes by computers, especially computer systems. The processes include learning (acquiring material and rules for its application), reasoning (using rules to draw approximate or definite conclusions), and self-correction.
Ref [2]	Smith et al.	Infectious-Disease	Narrow AI, often known as weak AI, is specifically created and educated to do a single job. It is focused on efficiently carrying out a certain activity, such as face recognition, language translation, or playing chess.
Ref [3]	Wong et al.	Infectious-Disease	AI approaches include machine learning for computers to learn from data and make predictions or judgements, and natural language processing for computers to comprehend and produce human language.

Ref [4]	Chu et al.	Infectious-Disease	AI is used in many sectors, such as healthcare, finance, education, transportation, entertainment, and beyond. It has the capacity to transform industries, enhance efficiency, and address intricate issues.
Ref [5]	Schwalbe et al.	Review	It is crucial to tackle these difficulties and guarantee that the development and use of AI contribute positively to society.
Ref [6]	Shi et al.	Infectious-Disease	AI algorithms can examine extensive datasets of clinical symptoms, test findings, and demographic information to detect patterns that suggest infectious illnesses.
Ref [8]	Cheng et al.	Review	AI algorithms may examine patient data to create treatment regimens that are specific to individual risk factors, genetic predispositions, and reactions to therapy.
Ref [9]	Parums et al.	Infectious-Disease	AI systems can analyse real-time data from many sources including electronic health records, wearable devices, and environmental sensors to track disease spread and detect emergent hazards.
Ref [10]	Relf et al.	Review	AI algorithms can assess healthcare resource utilisation trends to anticipate future demand for medical supplies, hospital beds, and healthcare professionals during infectious disease epidemics.
Ref [12]	Peiffer-Smadja et al.	Review	AI algorithms may evaluate various datasets, such as patient symptoms, test findings, and environmental variables, to identify patterns that suggest infectious illnesses.
Ref [13]	Tran et al.	Infectious-Disease	AI approaches like deep learning and molecular modelling help accelerate drug research by forecasting the effectiveness and safety of possible medication candidates.
Ref [15]	Bess et al.	Infectious-Disease	AI systems may assess current data from many sources, such as social media, news stories, and healthcare databases, to track disease outbreaks and identify new risks.

Table 2. The main topic points of recent studies

Reference no.	Authors	Subjects	Main theme
Ref [17]	Park et al.	Review	AI methods may expedite vaccine development by forecasting antigen structures, refining vaccine compositions, and pinpointing possible vaccination options.

Ref [18]	Tran et al.	Infectious-Disease	AI assists healthcare systems in efficiently allocating resources and planning capacity to properly handle increases in demand and provide sufficient treatment for patients.
Ref [19]	Kulkarni et al.	Review	AI-driven image analysis technologies can identify distinct characteristics of pneumonia, TB, and other infectious illnesses, aiding physicians in making precise and prompt diagnoses.
Ref [20]	Babcock et al.	COVID-19	AI-driven predictive analytics models can anticipate the likelihood of healthcare-associated infections (HAIs) and other infectious problems in hospitalised patients.
Ref [21]	Mali et al.	COVID-19	AI-supported therapy suggestions allow for tailored and successful treatment methods by taking into account specific patient features and pathogen characteristics.
Ref [22]	Edeh et al.	Hepatitis C Disease	AI-powered surveillance systems can monitor real-time data streams, such as electronic health records, laboratory results, and syndromic surveillance data, to identify outbreaks of infectious illnesses.
Ref [23]	Kaur et al.	COVID-19	AI-supported genomic analysis clarifies the genetic epidemiology of infectious illnesses, improving our comprehension of disease transmission routes and guiding specific management strategies.
Ref [24]	Karimzadeh et al.	COVID-19	AI-driven telemedicine technologies provide remote consultations and monitoring of patients with infectious illnesses, especially in underserved or rural regions.
Ref [27]	Howard et al.	Review	ChatGPT may discuss the epidemiology and clinical features of the infectious illness in the study paper.
Ref [29]	Wang et al.	Review	ChatGPT may suggest presenting the research question, aims, and a brief summary of the study methods and results to form a logical framework
Ref [30]	Brainard et al.	Review	ChatGPT may also provide comments on infectious disease research methodologies. Provide a checklist or directions for structuring the methods section to incorporate all necessary information. Advise on study design, participant selection, data collection, and statistical analysis.
Ref [32]	Lee et al.	Infectious diseases	AI may find it challenging to successfully integrate these environmental aspects into therapeutic decision-making

Table 3. The main topic points of recent studies

Reference no.	Authors	Subjects	Main theme
Ref [33]	Tran et al.	COVID-19	Medical decision-making often entails ethical difficulties and concerns about patient autonomy, beneficence, and non-maleficence. Infectious disease specialists are skilled in handling intricate ethical dilemmas, but artificial intelligence lacks moral judgement and may not consistently follow ethical standards.
Ref [34]	Parvatikar et al.	Review	Continuous learning and adaptation: contagious illness Doctors participate in continuous learning and professional advancement to be informed about the most recent research, guidelines, and best practices in infectious diseases. AI systems may be proficient in learning from extensive datasets but may not be as adept as human physicians in adapting to new knowledge and changing therapeutic recommendations.
Ref [35]	Giacobbe et al.	Infectious diseases	Collaborative healthcare approach: Infectious disease specialists work with diverse teams, such as nurses, chemists, laboratory scientists, and public health experts, to provide thorough treatment to patients with infectious disorders.
Ref [37]	Malani et al.	Review	For training and validation, AI algorithms rely on sizable datasets that might contain biases or errors. Biases in training data, including the lack of representation of certain demographics or locations, may result in algorithmic biases and discrepancies in diagnosis, treatment, and results. Incomplete or noisy data might hinder the effectiveness and dependability of AI models in predicting and managing infectious diseases.
Ref [38]	Equbal et al.	COVID-19	AI models, especially deep learning algorithms, are often opaque systems with decision-making processes that are challenging to comprehend or explain.
Ref [40]	Kim et al.	Infectious diseases	AI may aid physicians in diagnosing, treating, and controlling infectious illnesses, but human supervision and discretion in clinical decision-making must be maintained.
Ref [41]	Marcus et al.	HIV Prevention	Implementing AI technology in infectious illnesses might worsen current gaps in healthcare access and resource distribution. The high expenses of AI adoption, inadequate infrastructure, and differences in digital literacy and technology access might exacerbate the divide between affluent and underprivileged areas.
Ref [42]	Barbieri et al.	COVID-19	AI-driven infectious disease monitoring systems and healthcare platforms face security and privacy risks, including susceptibility to cybersecurity threats such as data breaches, malware attacks, and unauthorised access.

Conclusion and Outlook

AI answered most infectious illness issues connected to its capabilities and restrictions, with some changes and explanations. The research answered infectious disease AI

issues of prime importance. This review suggests AI for infectious disease clinical practice and research. Article title, abstract, introduction, technique, findings, and debates are organised via AI, saving

researchers time. This speeds up and improves scientific writing. According to the responses, some may be misleading or inaccurate, compromising study accuracy. Existing AI answers inquiries correctly, securely, and superficially but lacks information and references. The absence of diagnostic technologies in AI causes misidentification and safety issues. The moral use of medical technology requires direction and control. Several institutes have barred AI from scientific investigation due to its ineffectiveness. However, AI infectious disease research is promising. By gathering medical information and patient case studies, AI may help practitioners. Emerging technologies must be recognised and rigorously controlled. ChatGPT and other medical AI models require additional data to learn.

References

1. Brownstein JS, Rader B, Astley CM, et al. Advances in Artificial Intelligence for Infectious-Disease Surveillance. *N Engl J Med* 2023;388:1597-607.
2. Smith KP, Kirby JE. Image analysis and artificial intelligence in infectious disease diagnostics. *Clin Microbiol Infect* 2020;26:1318-23.
3. Wong F, de la Fuente-Nunez C, Collins JJ. Leveraging artificial intelligence in the fight against infectious diseases. *Science* 2023;381:164-70.
4. Chu WT, Reza SMS, Anibal JT, et al. Artificial Intelligence and Infectious Disease Imaging. *J Infect Dis* 2023;228:322-36.
5. Schwalbe N, Wahl B. Artificial intelligence and the future of global health. *Lancet* 2020;395:1579-86.
6. Shi L, Zhang JF, Li W, et al. [Artificial intelligence facilitates tropical infectious disease control and research]. *Zhongguo Xue Xi Chong Bing Fang Zhi Za Zhi* 2022;34:445-52.
7. Wong ZSY, Zhou J, Zhang Q. Artificial Intelligence for infectious disease Big Data Analytics. *Infect Dis Health* 2019;24:44-8.
8. Cheng K, Li Z, He Y, et al. Potential Use of Artificial Intelligence in Infectious Disease: Take ChatGPT as an Example. *Ann Biomed Eng* 2023;51:1130-5.
9. Parums DV. Editorial: Infectious Disease Surveillance Using Artificial Intelligence (AI) and its Role in Epidemic and Pandemic Preparedness. *Med Sci Monit* 2023;29:e941209.
10. Relf MV. Artificial Intelligence and Scientific Publishing. *J Assoc Nurses AIDS Care* 2023;34:329-30.
11. Siddig EE, Eltigani HF, Ahmed A. The Rise of AI: How Artificial Intelligence is Revolutionizing Infectious Disease Control. *Ann Biomed Eng* 2023;51:2636-7.
12. Peiffer-Smadja N, Rawson TM, Ahmad R, et al. Machine learning for clinical decision support in infectious diseases: a narrative review of current applications. *Clin Microbiol Infect* 2020;26:584-95.
13. Tran NK, Albahra S, May L, et al. Evolving Applications of Artificial Intelligence and Machine Learning in Infectious Diseases Testing. *Clin Chem* 2021;68:125-33.
14. Tsigelny IF. Artificial intelligence in drug combination therapy. *Brief Bioinform* 2019;20:1434-48.
15. Bess A, Berglind F, Mukhopadhyay S, et al. Artificial intelligence for the discovery of novel antimicrobial agents for emerging infectious diseases. *Drug Discov Today* 2022;27:1099-107.
16. Ong CWM, Blackburn HD, Migliori GB. GPT-4, artificial intelligence and implications for publishing. *Int J Tuberc Lung Dis* 2023;27:425-26.
17. Park Y, Casey D, Joshi I, et al. Emergence of New Disease: How Can Artificial Intelligence Help? *Trends Mol Med* 2020;26:627-9.
18. Tran NK, Kretsch C, LaValley C, et al. Machine learning and artificial intelligence for the diagnosis of infectious diseases in immunocompromised patients. *Curr Opin Infect Dis* 2023;36:235-42.
19. Kulkarni S, Jha S. Artificial Intelligence, Radiology, and Tuberculosis: A Review. *Acad Radiol* 2020;27:71-5.
20. Babcock S, Beverley J, Cowell LG, et al. The Infectious Disease Ontology in the age of COVID-19. *J Biomed Semantics* 2021;12:13.
21. Mali SN, Pratap AP. Targeting Infectious Coronavirus Disease 2019 (COVID-19) with Artificial Intelligence (AI) Applications: Evidence Based Opinion. *Infect Disord Drug Targets* 2021;21:475-7.
22. Edeh MO, Dalal S, Dhaou IB, et al. Artificial Intelligence-Based Ensemble Learning Model

- for Prediction of Hepatitis C Disease. *Front Public Health* 2022;10:892371.
23. Kaur I, Behl T, Aleya L, et al. Artificial intelligence as a fundamental tool in management of infectious diseases and its current implementation in COVID-19 pandemic. *Environ Sci Pollut Res Int* 2021;28:40515-32.
 24. Karimzadeh M, Ngo T, Lucas B, et al. Forecasting COVID-19 and Other Infectious Diseases for Proactive Policy: Artificial Intelligence Can Help. *J Urban Health* 2023;100:7-10.
 25. Kim J, Ahn I. Infectious disease outbreak prediction using media articles with machine learning models. *Sci Rep* 2021;11:4413.
 26. Castelvechi D. Are ChatGPT and AlphaCode going to replace programmers? *Nature* 2022.
 27. Howard A, Hope W, Gerada A. ChatGPT and antimicrobial advice: the end of the consulting infection doctor? *Lancet Infect Dis* 2023;1473-3099:00113-5.
 28. Mehta P, Titanji BK. Baricitinib in COVID-19: a coming-of-age from artificial intelligence to reducing mortality. *Lancet* 2022;400:338-9.
 29. Wang SH. OpenAI - explain why some countries are excluded from ChatGPT. *Nature* 2023;615:34.
 30. Brainard J. Journals take up arms against AI-written text. *Science* 2023;379:740-1.
 31. He S, Leanse LG, Feng Y. Artificial intelligence and machine learning assisted drug delivery for effective treatment of infectious diseases. *Adv Drug Deliv Rev* 2021;178:113922.
 32. Li C, Ye G, Jiang Y, et al. Artificial Intelligence in battling infectious diseases: A transformative role. *J Med Virol* 2024;96:e29355.
 33. Tran NK, Albahra S, Rashidi H, et al. Innovations in infectious disease testing: Leveraging COVID-19 pandemic technologies for the future. *Clin Biochem* 2023;117:10-5.
 34. Parvatikar PP, Patil S, Khaparkhantikar K, et al. Artificial intelligence: Machine learning approach for screening large database and drug discovery. *Antiviral Res* 2023;220:105740.
 35. Giacobbe DR, Zhang Y, de la Fuente J. Explainable artificial intelligence and machine learning: novel approaches to face infectious diseases challenges. *Ann Med* 2023;55:2286336.
 36. Xiang Y, Du J, Fujimoto K, Li F, et al. Application of artificial intelligence and machine learning for HIV prevention interventions. *Lancet HIV* 2022;9:e54-e62.
 37. Malani P. Artificial Intelligence, Emerging Threats, and Diagnostic Advances-Highlights From ECCMID, Europe's Largest Infectious Disease Conference. *JAMA* 2023;329:1722-3.
 38. Equbal A, Masood S, Equbal I, et al. Artificial Intelligence against COVID-19 Pandemic: A Comprehensive Insight. *Curr Med Imaging* 2022;19:1-18.
 39. Barman RK, Mukhopadhyay A, Maulik U, et al. Identification of infectious disease-associated host genes using machine learning techniques. *BMC Bioinformatics* 2019;20:736.
 40. Kim K, Lee MK, Shin HK, et al. Development and application of survey-based artificial intelligence for clinical decision support in managing infectious diseases: A pilot study on a hospital in central Vietnam. *Front Public Health* 2022;10:1023098.
 41. Marcus JL, Sewell WC, Balzer LB, et al. Artificial Intelligence and Machine Learning for HIV Prevention: Emerging Approaches to Ending the Epidemic. *Curr HIV/AIDS Rep* 2020;17:171-9.
 42. Barbieri D, Giuliani E, Del Prete A, et al. How Artificial Intelligence and New Technologies Can Help the Management of the COVID-19 Pandemic. *Int J Environ Res Public Health* 2021;18:7648.
 43. Garcia-Vidal C, Sanjuan G, Puerta-Alcalde P, et al. Artificial intelligence to support clinical decision-making processes. *EBioMedicine* 2019;46:27-9.