Can robots be good doctors?

The recent claim by Babylon Health that its artificial intelligence (AI) software can outperform human doctors again raises perennial questions such as ‘how is medicine more than biomechanisms?’ ‘how is communication more than information?’ and ‘what can we expect of art and science in our ministrations of healthcare?’

I can well believe that AI may perform well with clearly communicating patients who have a similar mindset to the doctor and who then present clear-cut and typical physical pathology of the kind that can be quickly sorted and ‘fixed’. But most presentations in primary care are not like this. For example, shame, anxiety, loneliness or fear may obscure signalling yet elude direct discussion; a complaint may be offered as a kind of ‘stalking horse’ before venturing a more crucial problem; painful personal experiences may respond to allusion yet retreat from explicit exposure.

Experienced and sensitive GPs know how important such nuances are in any healing, comforting or containing encounter. They also know how crucial personal and vernacular understandings and imagination are in the wealth of afflictions that cannot be simply fixed-by-formula.

What seems lacking in the AI enthusiasts’ view is that most problems presenting to both primary and mental healthcare have quite as much human as biomechanical complexity: increasingly now, for example, we are afflicted by our problems of living and ageing. Few of these can be neatly resolved by technology and
algorithms, yet many can be palliated, guided, contained and compensated by wise, imaginative and kindly personal continuity of care.

Yes, robots may sometimes be able to treat – but can they ever heal?

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