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Editorial

Use of Artificial Intelligence (AI) in Medical Writing: Necessity or Convenience

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I N F O

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E D I T O R I A L

Just recently, as part of the curriculum, undergraduate MBBS students were assigned to prepare a seminar and a presentation. While going through the seminar, it was observed that:

The content was good, but lacked technical details and didn't seem to come from a standard textbook.

The language of the seminar was very polished, not what was expected from that particular student.

These observations raised a red flag, and on probing the student about his source, we were astonished to learn about various uses of AI (Artificial Intelligence) applications by our student. Out of curiosity, we further investigated and consulted colleagues and juniors to learn about the wonders of AI. The search and discussion continued, and as the researchers, a thought erupted to know how AI can be used in medical writing and whether it is ethical or not.

AI tools can assist with planning, searching, analyzing review literature, analyzing data, managing images, managing references, and other aspects of report writing in medical research. It is prudent to note that the use of AI tools has reduced hundreds of work hours to a few minutes, with minimal flaws, when the author provides appropriate prompts. As a rule, AI tools fetch data from published sources or from literature available on the internet. In such cases, AI is not programmed to generate any new ideas. If it is used in planning a research protocol, then nothing novel will be generated; it will just be old wine in a new bottle.

One of the anesthetists described the use of an AI generative tool for gathering information on resuscitation and was surprised to find that "Archimedes was the first person to describe resuscitation," and after verification of scientific data sources, the claim was found to be incorrect (1). In this case, the AI tool has included spurious data sources and ignored scientific data. The potential problems with excessive use of AI tools in medical writing include: who will be the real author (Authorship), who will be held accountable for any wrong information/ data (Accountability), and what if the data is distorted due to faulty coding/ programming (bias) (Jena PK et al 2025).

A study conducted by Denver S. Pinto et al (3) has compared an AI-generated case report with Human human-written case report and concluded that, after giving meticulous instructions to the AI tool, the AI-generated case report has a logical flow and was able to highlight the novelty of the case, but the human-written report has better quality of presentation and more nuanced writing.

As such, it is futile to say that AI tools can be completely avoided in medical research and writing. AI/Machine learning is programmed to correct and evolve with repeated use, so its flaws may be minimized over time, helping save a lot of time. Though in scientific writings a set format is followed, each article is unique due to the author's language style, creativity, and originality of his/her idea; however, with the use of AI tools in medical writing, we tend to miss this versatility. The ethical issues of accountability, authorship, plagiarism, dependence, data privacy, and various biases require proper brainstorming by the scientific community to develop guidelines for their judicious use.

Journals should include mandatory disclosure about the use of AI tools in medical research publications. If the journal permits, the article should mention which area the authors have used AI tools. Even advanced plagiarism software can be used to detect the use of AI tools in medical writing, if needed. In conclusion, we recommend that AI be used as a tool to enhance human efficiency, while human creativity and novelty should continue to be used in all scientific writing.

*Disclaimer: The author has not sought any help from an AI tool for writing this manuscript.

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