

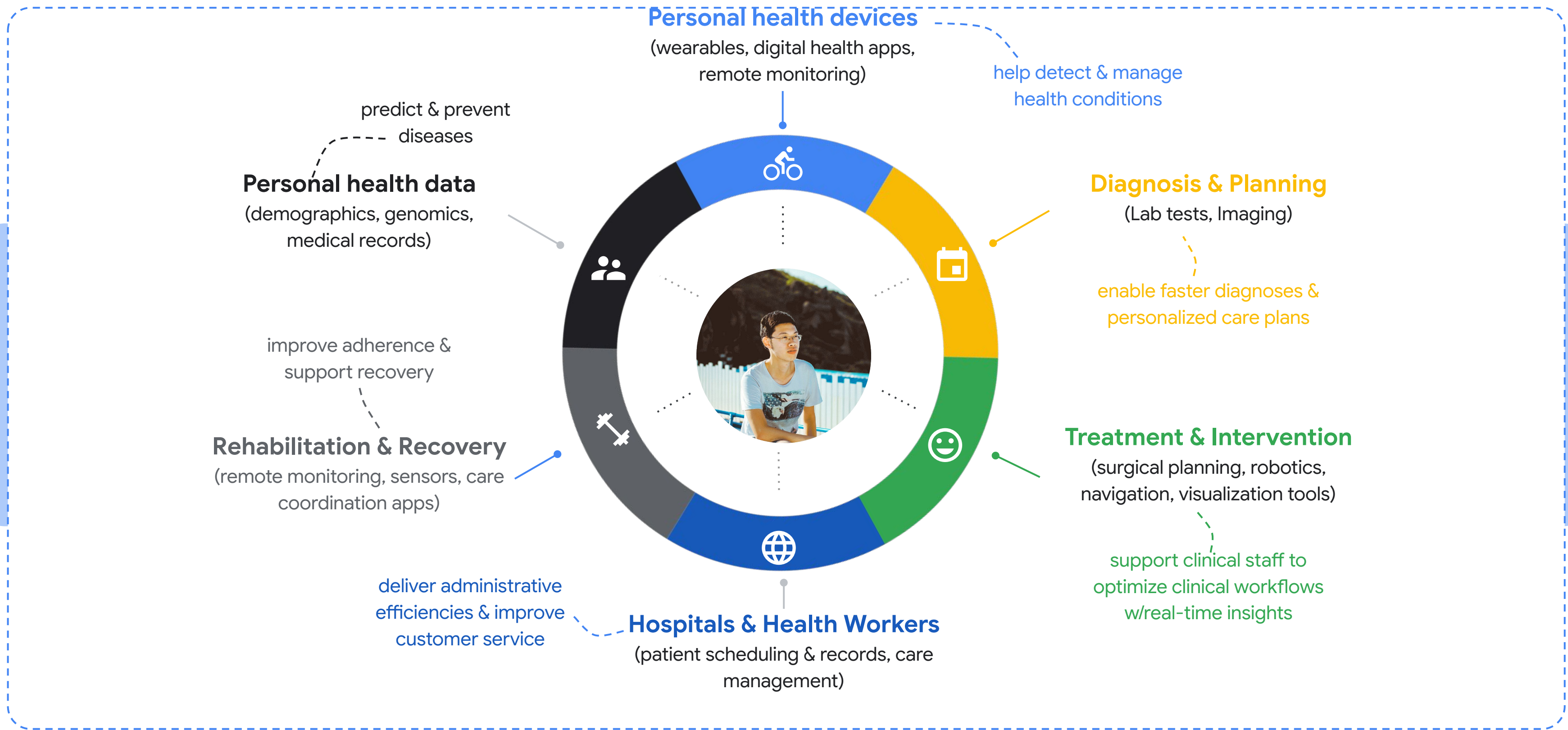
Google for Health



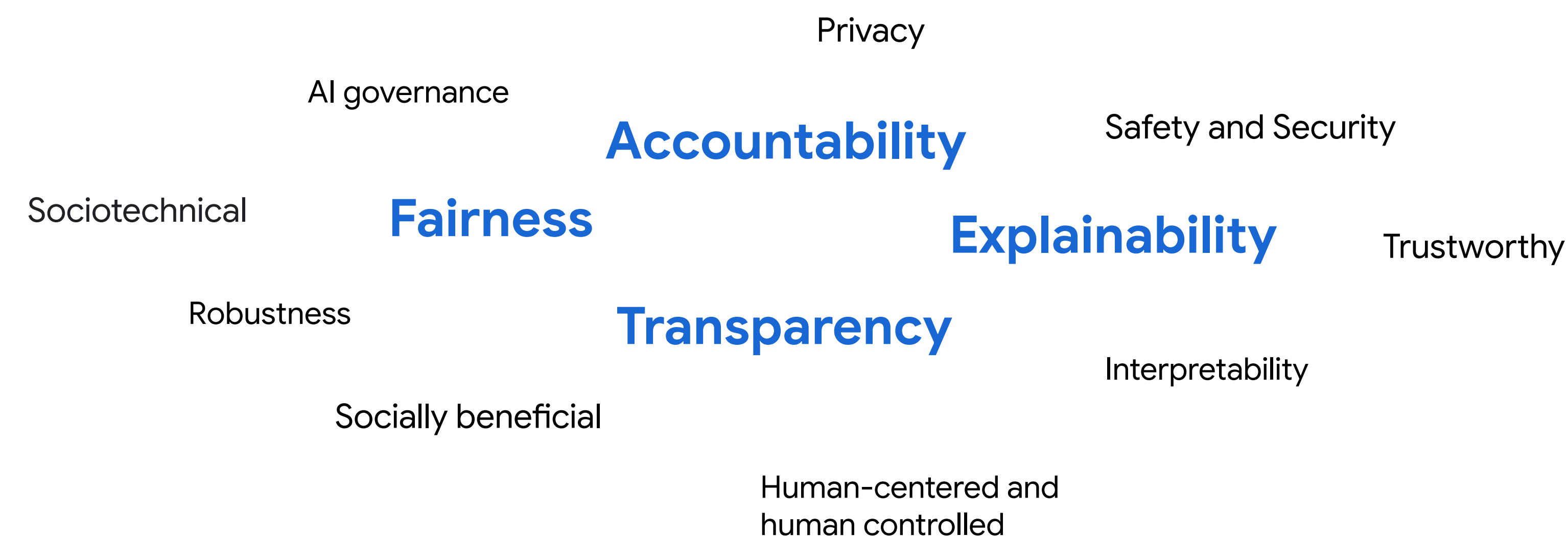
Approaches for AI/GenAI in Healthcare

Bakul Patel
Sr. Director - Global Digital Health Strategy

The AI Revolution in Healthcare



Responsible AI is



Google's Approach: Responsible AI in Practice

Govern

- Principles and policies
- Decision Making
- Transparency and Accountability

Measure

- Rigorous Evaluation
- Multi-layered Red Teaming
- AI-assisted auto-raters

Map

- Risk Identification
- External Expertise
- Risk Taxonomy

Manage

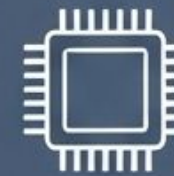
- Risk Mitigation
- Phased launches
- User Understanding
- Exosystem Enablement



US FDA Approach to AI Regulation

- Treating **medical purpose AI/ML** models as medical devices
- **PCCP**: Allowing for algorithms to be updated while maintaining safety and effectiveness
- **TPLC + GMLP**: Emphasizing quality and consistency in development
- **Public list** of AI-enabled medical devices, and PCCP approved devices

Software as a Medical Device (SaMD)



Predetermined Change Control Plans



Good Machine Learning Practice (GMLP)



Transparency



Global Efforts in AI Governance

Mainly Focused on
Traditional ML

EU AI Act

- Risk-Based Framework
- Pre-market Compliance
- Broad Scope including General Purpose AI System
- Penalties

SK AI Bill

- Balance of Promotion and Regulation
- Targeting "High-Impact" AI
- Transparency and Accountability

US FDA

- Focus on Software as a Medical Device (SaMD)
- Total Product Lifecycle (TPLC) Approach
- Emphasis on Safety, Transparency, and Bias

JP AI Promotion Bill

- Innovation-First Approach
- Voluntary Guidelines
- International Leadership

World Health Organization (WHO): "Global Initiative on AI for Health"

Ethics and Governance

Standards and Evidence

Global Collaboration

Collaborative Efforts for AI Governance



- Developing standards for **trustworthiness in health AI**
- Focus on **safe and reliable technology**



- Developing an **AI Code of Conduct (AICC)** for ethical AI in medicine
- Establishing **responsible development guidelines**



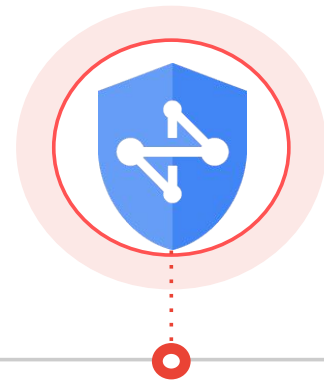
- Advocating for a **risk-based, sectoral approach.**
- **Tailoring regulations to specific AI applications and risks**

Common Themes Observed



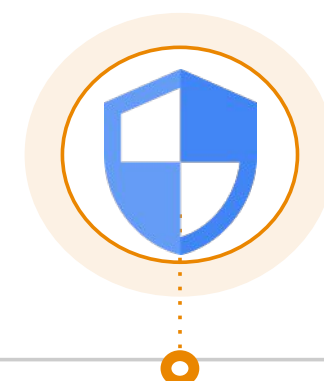
DATA GOVERNANCE

High-quality, diverse, and unbiased data is critical for safe and effective AI in healthcare.



RESPONSIBLE AI TRANSPARENCY & EXPLAINABILITY

AI algorithms to be **transparent and explainable** for users and regulators as well



SECURITY & PRIVACY

Robust Cybersecurity and compliance to be in place such as ISO 27001, 27017/18, HIPAA, **Japan's APPI** etc.

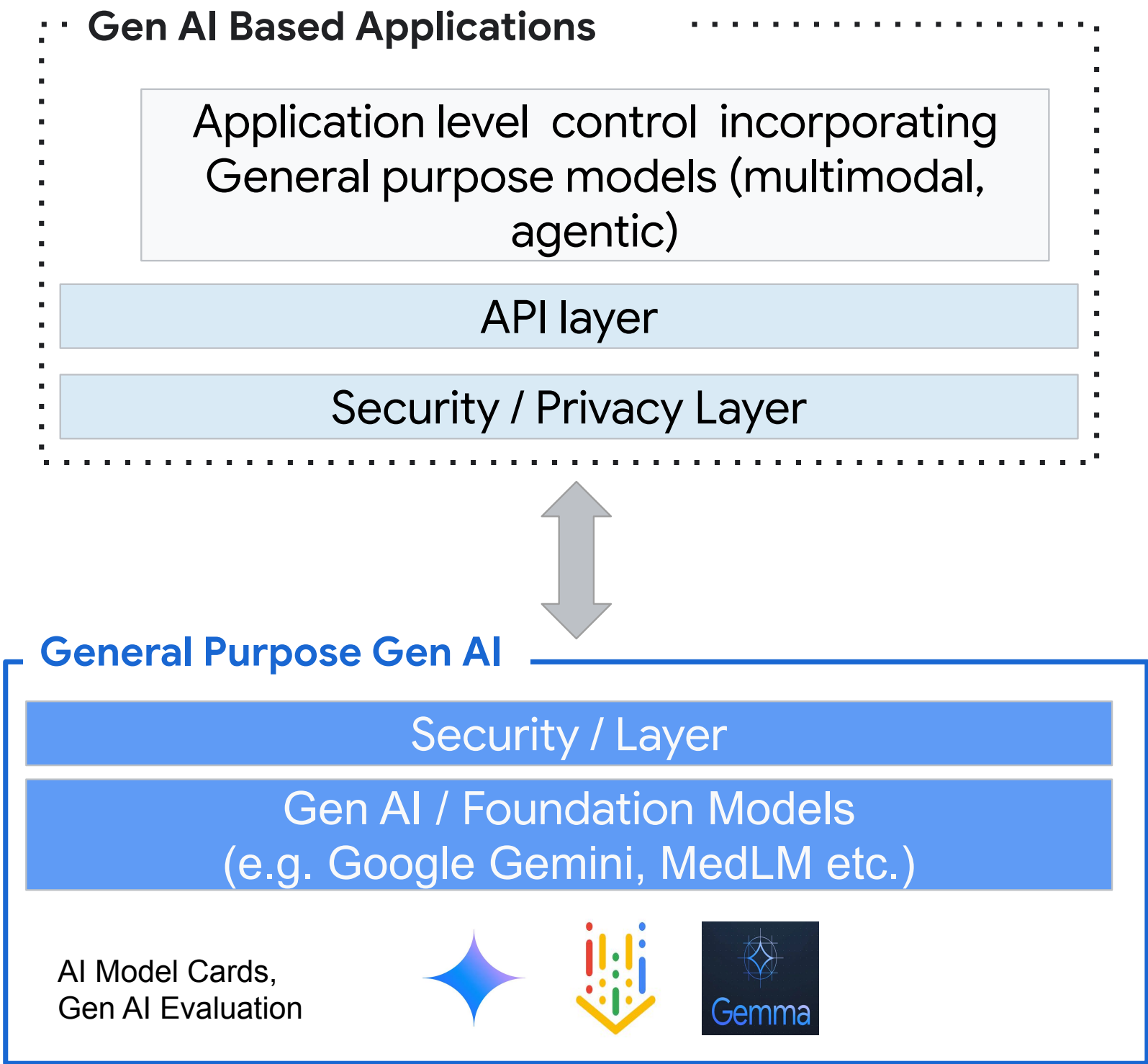


CONTINUOUS MONITORING

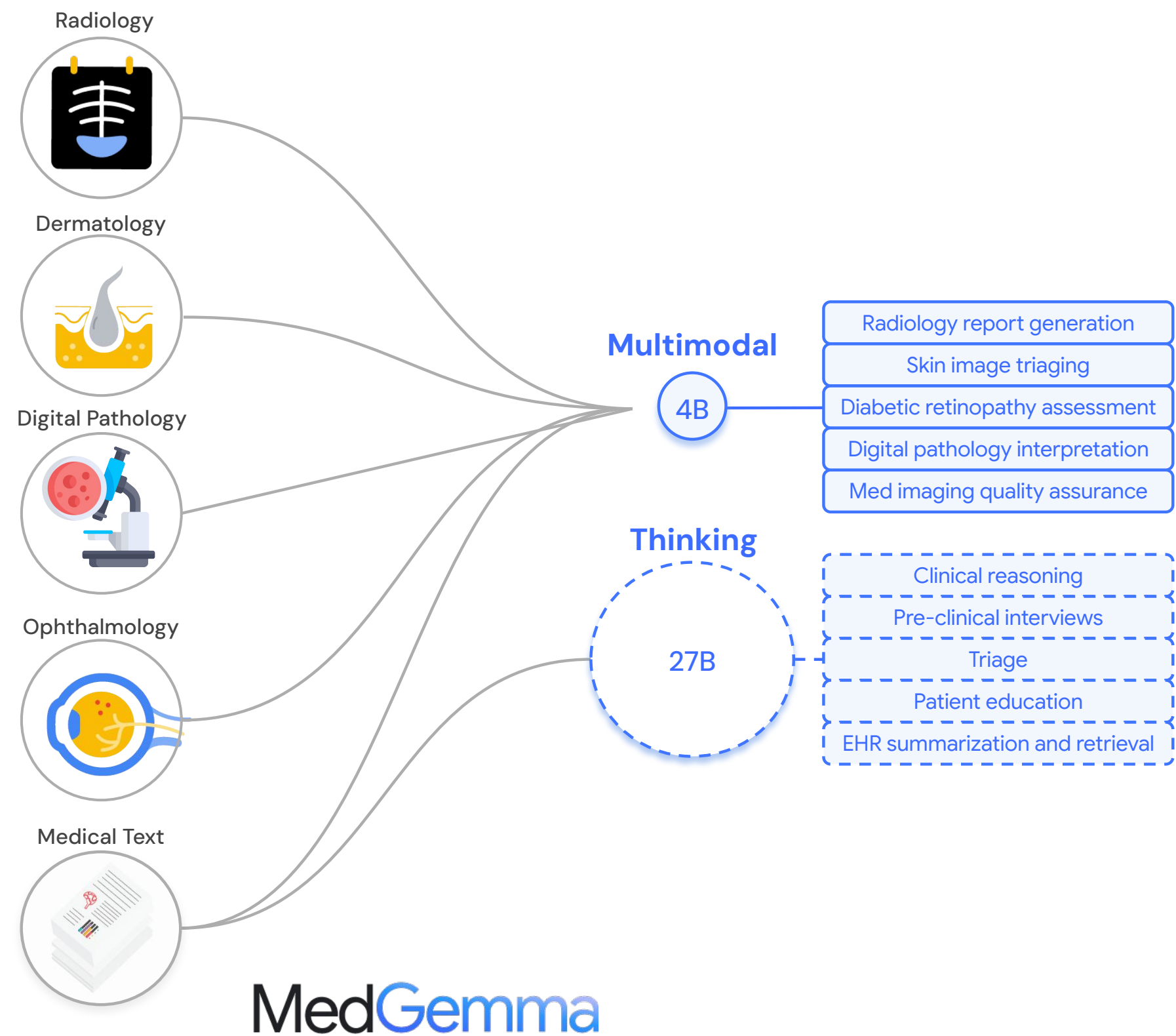
AI models require **continuous post deployment performance monitoring** and regular updates for new data or clinical practice changes.

Use of General Purpose Models in Applications

	General Purpose Gen AI (GPAI)	GenAI Based Applications
Data Governance	Broad, diverse training data, difficult to define unified governance	Governance of Application specific data
Transparency	"black box"; difficult to explain outputs	Can be more explainable for the specific use case
Security & Privacy	Overall model security including cloud technologies and certificates	Client level security controls + rely on GPAI
Monitoring	Overall model performance against global benchmarks (e.g. MedQA)	Monitor for application specific Model drift in the real world



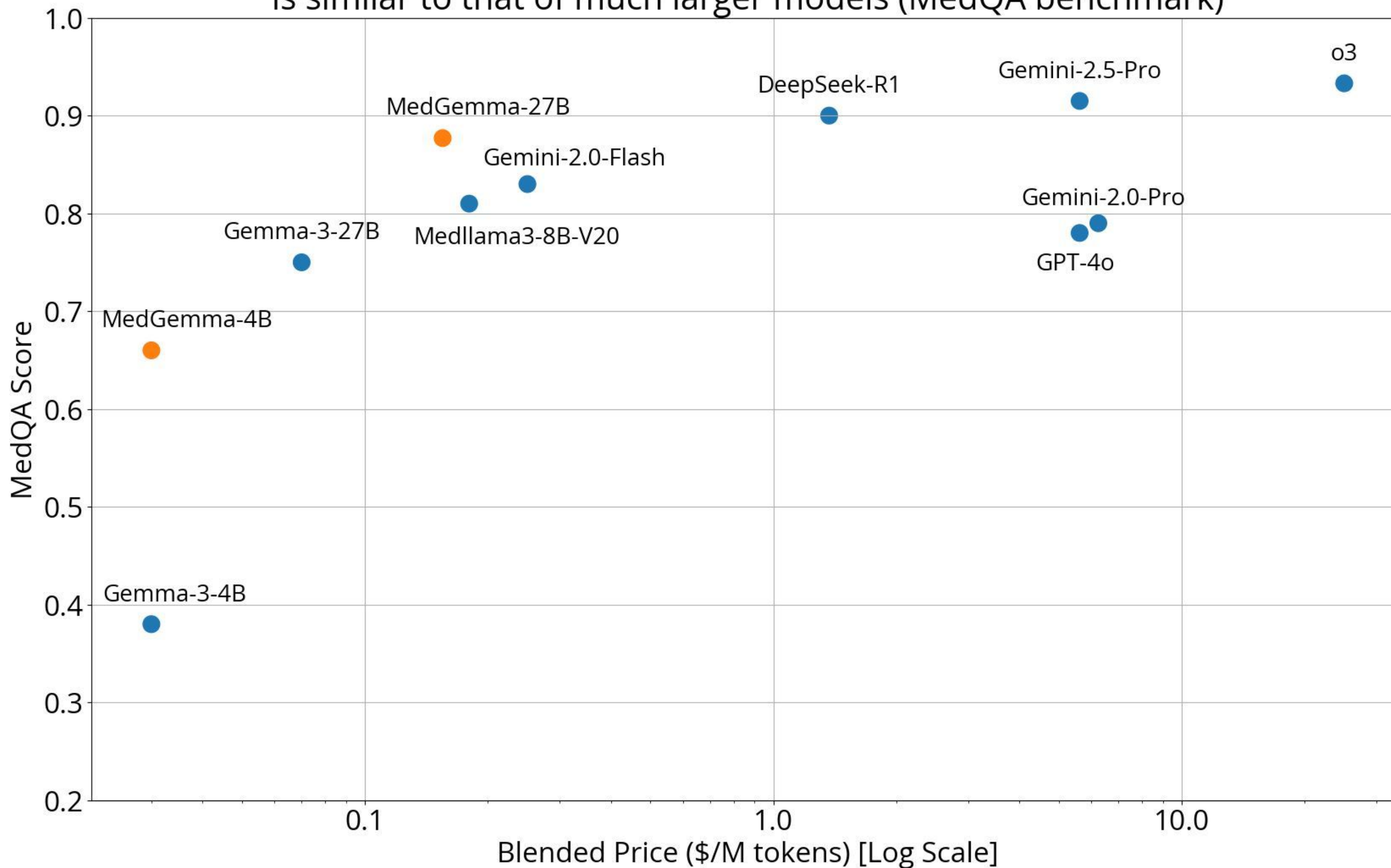
AI Innovations - Open Weight Models



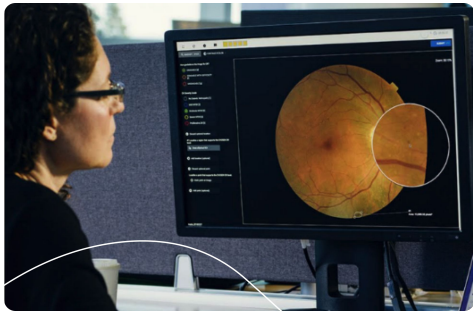
Model cards for transparency

- Information about how the model was developed
- Datasets used for training and evaluation
- Performance results
- An intended use statement
- Known limitations

MedGemma's baseline performance on clinical knowledge and reasoning is similar to that of much larger models (MedQA benchmark)



Major Challenges

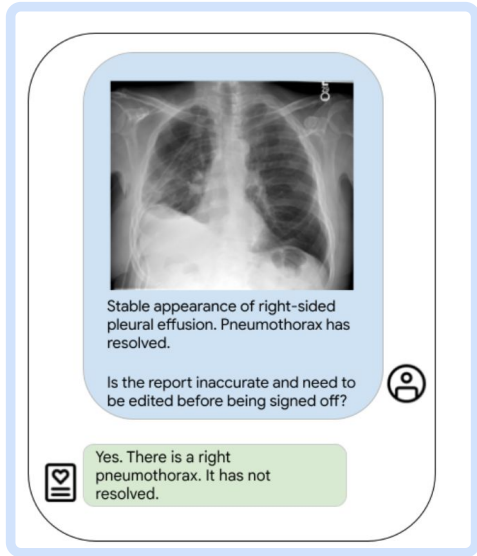


Conventional AI
(e.g. CNN, RNN)

Closed General purpose models

Open source / open weights models

Gen AI - LLMs



Fine-Tuned GenAI Applications

Data Governance: Ensuring privacy, security, and appropriate use of sensitive health data



Algorithmic Bias: The risk of AI models perpetuating or even amplifying existing health disparities



The "Black Box" Problem: Understanding and explaining how complex AI models make decisions



Accountability & Liability: Defining responsibility when AI systems are involved in patient care



Algorithm performance evaluations



How we innovate together - customer stories

Partnering to turn inventions into innovations that have a real impact for the world, at scale

Care Delivery Transformation

Search in Healthcare context

Condition list

Minimum confident score: 37.5%

Show API calls

John Doe • 62M

2 records

Active Conditions

Ranking	Condition Group	LLM Brief
2.2	Diabetes mellitus	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.
2.1	CKD	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.
2.0	Obesity	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.
1.9	Cyst	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.
1.8	Upper respiratory tract infection	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.

Historical Conditions

Ranking	Condition Group	LLM Brief
2.2	Sleep disorder	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.
2.1	Lower respiratory tract infection	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.
2.0	Hypoxemia/respiratory failure	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.
1.9	Anemia	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.
1.8	Gastroesophageal reflux disease	The patient has a history of pre-diabetes in 2017, which progressed to diabetes in 2019. He was initially on insulin, but was able to transition to oral medications. He is currently on metformin and glipizide. His most recent A1c was 6.8%.

Historical Conditions

Ranking	Condition Group	LLM Brief
---------	-----------------	-----------

Diagnostics, Therapy Planning

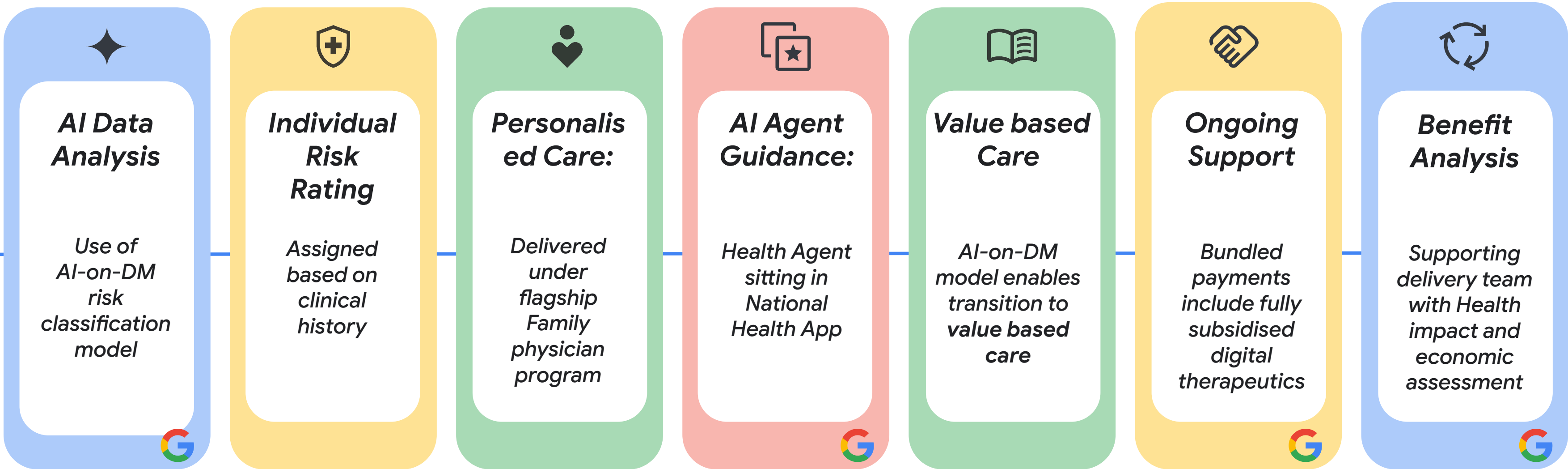


Nurse hand off, Ambient doc (e.g. in ER)

Med-PaLM

Value-based Care: Transforming healthcare in Taiwan

AI an enabler for personalisation and value-based care



Call to Action



Focused

- Regulate real-world effects, not scientific progress
- Identify and address regulatory gaps
- Focus on the outputs
- Consider a sectorally-based, hub-and-spoke governance architecture
- Encourage effective techniques to identify AI-generated content



Aligned

- Prioritize international coherence and interoperability
- Look to international standards and benchmarks



Balanced

- Risk-based frameworks centered on use cases
- Clear and differentiated obligations for the respective actors in the AI ecosystem
- Avoid regulatory burdens for research and development, and promote access to open data to enable fair learning
- Ensure that transparency requirements are balanced and feasible
- Weigh the trade-offs between AI tools and human alternatives

Out with the old!

- Existing approaches are no longer effective
- New strategies are essential for future success
- Traditional methods hinder progress and innovation
- Embrace change for sustained growth



Thank You

