



Analysis of Individual Procedures Seems to be the Most Scientific Approach

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INTRODUCTION

A small survey was conducted to improve our understanding of radiotherapy and to explore the current state of pediatric radiology worldwide. The study compared the number of pediatric radiologists and radiologists in 34 countries with the population and number of children. The number of pediatric radiologists varied between 0 and 50 per million children. In general, the proportion of pediatric radiologists is lower than that of radiologists, even in countries with an aging population. Unfortunately, radiology is underserved in developing countries and pediatric radiology is almost non-existent. Based on her experience as a volunteer pediatric radiologist in Malawi, India, Cambodia, and Tanzania, the author highlights some of the challenges of radiotherapy in developing countries. Both the author's personal experience and research show that although the need for pediatric radiology is high globally, supplies are inadequate, especially in developing countries compared to developed countries.

DESCRIPTION

There have been attempts to show that paediatrics interventional radiology can bring value to children's hospitals, but nothing has been particularly convincing. But it is important to understand the impact of different health systems on clinical practice and the results of a single center study to other hospitals, even within the same type of hospital. There are many problems, such as the difficulty of extrapolating. Not surprisingly, there are no published randomized controlled trials comparing both cost and outcome of specific pediatric interventional radiology procedures with surgical alternatives, and indeed these may not be feasible. There is only anecdotal evidence for the value of pediatric interventional radiology in multidisciplinary teams in children's hospitals.

As Artificial Intelligence (AI) play an increasingly important role in radiology (in the adult world, not in pediatrics), there is un-

founded concern that it will completely take over the role of radiologists. When it comes to musculoskeletal applications of AI in pediatric radiology, we are still a long way from the era when AI replaced radiologists. Even in the most common application (bone age assessment), AI is often used in AI support mode rather than AI replacement or AI augmentation mode. AI to determine bone age has been in clinical use for over a decade and is the area of most research. Most of the other possible indications in children (such as appendix and vertebral fracture detection) remain largely research fields. This article provides an overview of the areas where AI is most prominent in relation to the pediatric musculoskeletal system, briefly summarizes the current literature, and highlights future research areas. Pediatric radiologists are encouraged to participate as members of research teams conducting artificial intelligence pediatric radiology research.

CONCLUSION

Artificial intelligence in medicine can help improve the accuracy and efficiency of diagnosis, treatment selection and outcome prediction. Machine learning represents a subset of artificial intelligence that uses algorithms that can learn modeling functions from data sets. More complex algorithms and deep learning can similarly learn modeling capabilities for a variety of tasks using large and complex datasets. The convergence of artificial intelligence tools has the potential to improve many aspects of healthcare delivery, from mundane tasks such as scheduling to more complex functions such as business management modeling and in-suite procedural support.

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CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

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