Transforming Gynecology with Artificial Intelligence: Advances in Clinical Practice

Shaghayegh Mahmoudiandehkordi¹, and Maryam Yeganegi²

^{1,2} Department of Obstetrics and Gynecology Isfahan University of Medical Sciences Isfahan, Iran

ABSTRACT

Artificial Intelligence (AI) revolutionizes gynecology by enhancing diagnosis, prediction, and treatment. This review explores AI applications in early pregnancy complication prediction, fetal health monitoring, gynecological cancers (cervical and ovarian), and embryo selection in IVF. Machine learning models analyze patient data, imaging, and biomarkers to predict risks such as pre-eclampsia, detecting fetal distress, improve cervical cancer screening, and enable early ovarian cancer diagnosis. AI-driven methods for embryo selection automate viability assessment, improving success rates and reducing subjectivity. AI supports evidence-based care by enhancing accuracy and efficiency, though challenges like data privacy and clinical validation remain.

Key Words: Artificial Intelligence, Gynecology, Embryo. Pregnancy Complications.

1. INTRODUCTION

Gynecology is a critical medical specialty focusing on the health of the female reproductive system, encompassing disease prevention, diagnosis, and treatment. As gynecological research evolves, it increasingly relies on vast and diverse datasets, including imaging data, clinical records, and laboratory findings. Effective analysis of such data is crucial for identifying patterns, improving diagnostics, predicting outcomes, and personalizing treatment strategies. Traditional statistical methods have long been used to analyze gynecological data, but they often fall short in handling large, complex, and unstructured datasets generated in modern clinical practice. This gap highlights the need for advanced analytical techniques that can unlock deeper insights from medical data (Malani et al., 2023; Agnew et al., 2023).

In gynecology, data analysis plays a pivotal role in addressing some of the most pressing clinical challenges. For instance, early pregnancy complication prediction relies on analyzing maternal and fetal health indicators to identify risks such as preeclampsia, miscarriage, and preterm birth at an early stage. Early detection enables timely intervention, improving maternal and fetal outcomes (Jiang et al., 2023; Seval et al., 2023). Similarly, fetal health monitoring has advanced significantly with the use of real-time ultrasound imaging, cardiotocography, and wearable sensors (Barnova et al., 2024). These technologies, when combined with data analysis and artificial intelligence (AI), provide clinicians with continuous insights into fetal well-being, detecting anomalies such as growth restrictions and abnormal heart rhythms. Another critical area is the management of gestational diabetes mellitus (GDM), a condition that affects a significant proportion of pregnant women. Machine learning algorithms can analyze maternal glucose levels, dietary habits, and genetic factors to predict the risk of GDM and recommend personalized management plans. Effective monitoring and intervention not only reduce complications during pregnancy but also improve long-term maternal and child health outcomes. Gynecological cancers, including cervical cancer and ovarian cancer, are the leading causes of morbidity and mortality among women worldwide (Perkins et al., 2023; Ali et al., 2023). Cervical cancer, largely caused by persistent human papillomavirus (HPV) infection, can be detected early through imaging, Pap smears, and HPV testing. Deep learning-based models are increasingly being used to analyze cytological images and improve early diagnosis. Likewise, ovarian cancer, often diagnosed at advanced stages due to subtle symptoms, benefits from AI models that analyze imaging data, genetic markers, and clinical features to enhance early detection

and risk stratification. In the context of assisted reproductive technologies (ART), embryo selection has emerged as a key area where data analysis is revolutionizing decision-making. Deep learning models applied to time-lapse imaging and morphological scoring of embryos enable the selection of the most viable embryos, improving the success rates of in vitro fertilization (IVF). AI tools help embryologists assess embryo development more objectively, reducing variability and improving implantation outcomes (Glatstein et al., 2023).

As these examples illustrate, data-driven methods are transforming into multiple aspects of gynecological care, including early prediction of complications, disease detection, fetal health monitoring, and cancer diagnosis. However, traditional approaches struggle to extract actionable insights from complex datasets. This has paved the way for the adoption of Artificial Intelligence (AI) methods in gynecology, enabling more accurate predictions, faster diagnoses, and better-informed clinical decisions. Artificial Intelligence encompasses a variety of computational techniques, with Machine Learning (ML) and Deep Learning (DL) models leading the way. Machine Learning involves training algorithms to recognize patterns in data and make informed predictions or classifications without explicit programming. Deep Learning, a subset of ML, utilizes artificial neural networks inspired by the human brain to process data hierarchically, making it particularly effective for tasks involving medical imaging, natural language processing, and decision support (Ghasemi et al., 2024; Chen et al., 2022; Orouskhani et al., 2022; Abbasi et al., 2024; Minoo et al., 2024; Afrazeh et al., 2024; Norouzi et al., 2024; Rahmani et al., 2024; Wu et al., 2020; Pandey et al., 2022). In gynecology, AI applications have shown significant promise across multiple clinical domains, including disease detection, risk assessment, and surgical precision (Mahmoudiandehkordi et al., 2024; Jiang et al., 2023). Deep learning models, such as convolutional neural networks (CNNs), have been widely adopted for analyzing imaging data, including ultrasound, MRI, and histopathology images, to detect gynecological conditions such as ovarian cancer, endometriosis, and cervical abnormalities (Ghoniem et al., 2021). Other AI methods, such as natural language processing (NLP), enable the extraction of meaningful insights from electronic health records (EHRs), facilitating evidence-based decision-making (Barber et al., 2021). By integrating AI-driven tools into gynecology, clinicians can enhance diagnostic accuracy, reduce human error, and provide personalized treatment plans, ultimately improving patient outcomes. However, while AI presents numerous opportunities, challenges such as data privacy, model interpretability, and clinical validation remain critical considerations. This review explores the clinical applications of AI in gynecology, emphasizing how machine learning and deep learning models are shaping the future of gynecological care.

2. CLINICAL APPLICATIONS OF AI in GYNECOLOGY

2.1 Early Pregnancy Complications Prediction

While most pregnancies and births proceed without complications, all pregnancies carry inherent risks. According to global estimates, approximately 15% of all pregnant women will develop life-threatening complications requiring specialized care, and some may need major obstetric interventions to ensure survival. The World Health Organization (WHO) reports that around 800 women die every day worldwide due to preventable causes related to pregnancy and childbirth. These numbers underscore the need for improved risk prediction and management strategies to identify and intervene early in high-risk pregnancies.

Machine learning (ML) has emerged as a powerful tool to predict and manage early pregnancy complications (Bertini et al., 2022), including ectopic pregnancy, gestational diabetes mellitus (GDM), and preeclampsia. By leveraging patient data—such as medical history, demographic factors, laboratory results, imaging data, and lifestyle information—machine learning models can identify patterns and correlations that may not be evident through traditional statistical methods.

Key Applications of Machine Learning in Early Pregnancy Complications:

• Prediction of Preeclampsia:

Preeclampsia, a condition characterized by high blood pressure and organ dysfunction, is a leading cause of maternal and fetal morbidity. ML models trained on longitudinal datasets, including blood pressure readings, proteinuria levels,

and maternal biomarkers, can predict preeclampsia weeks or months before clinical symptoms appear. Algorithms such as Random Forest, Support Vector Machines (SVM), and ensemble learning methods have shown promise in stratifying patients into risk categories, enabling clinicians to monitor high-risk cases closely and initiate preventive treatments, such as low-dose aspirin therapy.

• Ectopic Pregnancy Detection:

Ectopic pregnancy, where the fertilized egg implants outside the uterus, can lead to life-threatening complications if undiagnosed. Deep learning models, particularly Convolutional Neural Networks (CNNs), can analyze ultrasound images to detect abnormal implantation sites with high accuracy. Additionally, ML models integrating hormone levels (e.g., β -hCG trends) and clinical symptoms can predict ectopic pregnancies early, allowing for timely intervention and improved outcomes.

• Gestational Diabetes Management:

Gestational diabetes mellitus (GDM) is a common complication that can lead to adverse maternal and fetal outcomes. ML algorithms analyze factors such as maternal age, BMI, glucose tolerance test results, and family history to predict GDM risk. Models such as logistic regression, XGBoost, and neural networks are capable of assessing GDM likelihood, facilitating early dietary interventions, glucose monitoring, and personalized care plans to reduce complications.

• Identification of Preterm Birth Risks:

Preterm birth is a major contributor to neonatal mortality. Machine learning models utilize multi-modal data, including maternal demographic data, uterine activity patterns, cervical length measurements, and genetic factors, to predict preterm birth. Advanced models like Recurrent Neural Networks (RNNs) can analyze temporal trends in patient data, improving the ability to forecast preterm labor and enabling timely interventions like corticosteroid administration to enhance fetal lung maturity.

In summary, machine learning facilitates accurate and timely prediction of early pregnancy complications, empowering healthcare providers to proactively monitor high-risk pregnancies and implement preventive measures. These advances not only reduce maternal and neonatal morbidity and mortality but also optimize resource allocation in obstetric care. As ML models are validated on larger, more diverse datasets, their integration into clinical practice promises to transform maternal healthcare globally.

2.2 Fetal Health Monitoring

Fetal health monitoring is a cornerstone of obstetric care, ensuring the well-being of the developing fetus throughout pregnancy. Obstetricians frequently use cardiotocography (CTG), a non-invasive diagnostic tool that records fetal heart rate (FHR) and uterine contractions. CTG provides critical insights into the fetus's physical condition, enabling clinicians to differentiate between normal and pathological states. However, manual interpretation of CTG data can be challenging due to its complexity, subjectivity, and variability between clinicians. Misinterpretation may delay necessary interventions, increasing the risk of adverse outcomes.

AI-driven fetal monitoring systems have the potential to revolutionize this process by automating analysis and improving the accuracy of fetal health assessments. These systems utilize advanced machine learning and deep learning techniques to analyze large volumes of electronic fetal monitoring (EFM) data in real-time, allowing for precise and timely detection of fetal distress (Barnova et al., 2024).

Key Applications of Machine Learning in Fetal Health Monitoring:

• Automated Analysis of Fetal Heart Rate Patterns:

Machine learning models, particularly supervised learning algorithms such as Support Vector Machines (SVM), Random Forest, and Gradient Boosting, can classify fetal heart rate patterns into normal, suspicious, or pathological categories. Features such as baseline heart rate, variability, accelerations, and decelerations are extracted from CTG recordings and analyzed to identify abnormalities suggestive of fetal hypoxia or distress.

• Deep Learning for Real-Time Monitoring:

Convolutional Neural Networks (CNNs) and Recurrent Neural Networks (RNNs) have been applied to analyze realtime CTG data. CNNs can process the waveform data of fetal heart rates, identifying subtle abnormalities that may not be obvious to clinicians. Long Short-Term Memory (LSTM) networks, a type of RNN, are particularly effective in capturing temporal dependencies within the CTG data, allowing for continuous monitoring and prediction of evolving fetal distress.

• Integration of Multimodal Data:

Machine learning models can integrate additional clinical data—such as maternal age, BMI, blood pressure, and gestational age—along with CTG data to provide a more comprehensive assessment of fetal well-being. For example, combining FHR patterns with uterine contraction frequency improves the predictive accuracy of preterm labor risk or fetal hypoxia.

• Detection of Fetal Hypoxia and Acidosis:

AI systems can analyze variability and late decelerations in FHR, which are often indicative of fetal hypoxia and acidosis. These conditions, if left untreated, can lead to perinatal asphyxia and adverse neonatal outcomes. By providing early detection and risk stratification, AI models allow obstetricians to intervene with appropriate measures such as oxygen therapy, fluid administration, or emergency delivery.

• Wearable Technology for Continuous Monitoring:

Advances in wearable sensors integrated with AI algorithms have enabled continuous fetal health monitoring outside clinical settings. These wearables collect FHR and uterine contraction data, which are analyzed in real time by machine learning models to detect abnormalities. This facilitates remote monitoring, empowering clinicians to track high-risk pregnancies and reducing the need for frequent hospital visits.

In summary, AI-powered fetal health monitoring systems provide a significant advancement in obstetric care by offering precise, real-time analysis of fetal heart rate and uterine contraction data. These systems enable early detection of fetal distress, improving decision-making and ensuring timely interventions to prevent adverse perinatal outcomes. As AI algorithms are further refined and validated, their integration into clinical practice holds the potential to standardize fetal monitoring and enhance maternal-fetal care globally.

2.3 Cervical Cancer and Ovarian Cancer

Cervical cancer is the fourth leading cause of cancer-related deaths among women worldwide, with a disproportionately high burden in developing countries. Cervical cancer is primarily associated with persistent infection by human papillomavirus (HPV), a group of viruses that trigger abnormal cell growth in the cervix. Fortunately, cervical cancer is highly preventable through early screening programs such as Pap smears and HPV testing, which allow for early detection and treatment of precancerous lesions. Despite the effectiveness of these methods, significant challenges remain, particularly in low-resource settings where women face barriers such as costly screening procedures, limited awareness, and insufficient access to medical facilities.

Ovarian cancer, on the other hand, is often referred to as the "silent killer" because it presents with vague symptoms and is frequently diagnosed at advanced stages. It remains one of the most lethal gynecological malignancies due to its subtle onset, lack of reliable early detection tools, and high recurrence rates. Current diagnostic techniques, such as transvaginal ultrasounds and serum markers like CA-125, have limitations in sensitivity and specificity, particularly for early-stage detection.

Machine learning (ML) and deep learning approaches are revolutionizing the screening, diagnosis, and prognosis of both cervical and ovarian cancers. By analyzing imaging data, cytology reports, genetic markers, and clinical history, these methods improve diagnostic accuracy, reduce false positives, and enable earlier detection, thereby enhancing patient outcomes (Silverwood et al., 2024).

Applications of Machine Learning in Cervical Cancer:

• Automated Pap Smear Analysis:

Pap smears remain the gold standard for cervical cancer screening. However, manual examination of smear slides is labor-intensive and subject to interobserver variability. Machine learning models, particularly Convolutional Neural Networks (CNNs), have been trained to analyze cytological images and accurately identify abnormal cells. These models detect precancerous and cancerous lesions with higher precision, reducing false positives and unnecessary follow-up procedures. Automated systems like the DeepPap framework have demonstrated robust performance in classifying cells into normal, atypical, or malignant categories.

• HPV Testing and Risk Stratification:

Machine learning models can analyze HPV genotyping data to identify high-risk HPV strains associated with cervical cancer progression. Algorithms such as Support Vector Machines (SVM) and Random Forest integrate HPV test results with clinical and demographic data to predict the likelihood of developing cervical lesions, enabling risk-based stratification and personalized follow-up recommendations.

• Colposcopy Image Analysis:

AI-based systems analyze colposcopy images to identify regions of interest indicative of cervical intraepithelial neoplasia (CIN). Advanced CNN architectures can detect subtle visual changes in cervical tissue that may be missed by the human eye, improving the accuracy of colposcopy examinations and aiding clinicians in decision-making.

Applications of Machine Learning in Ovarian Cancer:

• Early Detection Using Biomarkers:

Serum biomarkers like CA-125 and HE4 are commonly used for ovarian cancer detection, but their sensitivity and specificity are limited, especially in early stages. Machine learning models integrate these biomarkers with other clinical features—such as age, genetic predisposition, and imaging findings—to enhance the accuracy of ovarian cancer detection. Ensemble methods like XGBoost and Random Forest have been shown to outperform traditional diagnostic approaches.

• Imaging-Based Detection:

Ultrasound and CT/MRI scans are widely used for detecting ovarian masses, but distinguishing between benign and malignant lesions remains challenging. Deep learning models, including CNNs and U-Net architectures, can analyze imaging data to classify ovarian tumors with high accuracy. These models automatically extract features such as tumor size, texture, and morphology, reducing the need for subjective interpretation.

• Prognosis and Recurrence Prediction:

Machine learning models predict patient prognosis by analyzing clinical, genetic, and histopathological data. Survival models such as Cox proportional hazards regression combined with ML techniques can assess factors influencing recurrence risk, treatment response, and overall survival. For instance, gene expression data analyzed through AI tools can identify high-risk patients who may benefit from aggressive treatment strategies.

• Personalized Treatment Plans:

AI models can optimize treatment planning by predicting patient response to therapies such as surgery, chemotherapy, or targeted treatments. By analyzing tumor genomics and molecular profiles, these models enable the identification of potential therapeutic targets and suggest personalized treatment approaches, improving outcomes and minimizing unnecessary interventions.

In summary, machine learning and deep learning are transforming the diagnosis and management of cervical and ovarian cancers. By enhancing the accuracy of Pap smear screening, HPV testing, and imaging analysis, AI ensures timely detection of cervical cancer, particularly in underserved regions. Similarly, AI-driven tools for biomarker analysis, imaging interpretation, and treatment optimization are addressing the challenges of ovarian cancer diagnosis and management. These advancements hold significant potential to reduce the global burden of gynecological cancers and improve patient outcomes

2.4 Embryo Selection

Embryo selection is a critical step in in vitro fertilization (IVF), where the most viable embryos are chosen for transfer to maximize the chances of successful implantation and pregnancy. Traditionally, this process relies on manual morphological assessment of embryos under a microscope, which is time-consuming, subjective, and prone to interobserver variability. Advances in deep learning have revolutionized embryo selection by automating the process, reducing variability, and improving accuracy, ultimately saving valuable labor time in clinical practice.

2.4.1 Traditional Black-Box Methods in Embryo Selection

Deep learning-based black-box methods are widely applied to analyze raw time-lapse imaging or static images of embryos without explicitly defining embryonic features. Unlike conventional approaches that depend on visible morphological criteria such as blastomere count, symmetry, and fragmentation, black-box models can predict implantation potential and pregnancy outcomes directly from raw imaging data. These models bypass the need for human-defined features by automatically identifying patterns that are imperceptible to embryologists (Diakiw et al., 2022).

For example, deep learning models such as Convolutional Neural Networks (CNNs) analyze high-dimensional imaging data to assess embryo viability. They process multiple frames of time-lapse videos, capturing minute developmental changes over time, such as the timing of cell divisions and the rate of blastocyst expansion, which are strong indicators of embryo health.

Key Applications of Machine Learning in Embryo Selection:

• Automated Viability Scoring:

Deep learning algorithms evaluate embryo images and generate a viability score that predicts the likelihood of successful implantation. Models like CNN-based classifiers or ensemble methods are trained on large datasets of historical embryo imaging data and associated pregnancy outcomes. These systems outperform manual assessments by identifying subtle patterns such as irregularities in cell division and cytoplasmic texture that are often overlooked.

• Time-Lapse Imaging Analysis:

AI models analyze continuous time-lapse images of embryo development to identify key morphokinetic parameters, such as the timing of the first and second cell divisions or the formation of the blastocyst. Long Short-Term Memory (LSTM) networks, a type of recurrent neural network, excel at analyzing temporal sequences, enabling precise tracking of embryo growth dynamics. Time-lapse analysis provides deeper insights compared to static observations, improving the predictive accuracy of embryo selection.

2.4.1 End-to-End Black-Box Prediction Models:

Deep learning frameworks can operate in a fully automated "end-to-end" fashion, receiving raw embryo imaging data as input and directly predicting implantation success or pregnancy likelihood as output. These black-box systems are data-driven and do not rely on predefined morphological features, which allows them to uncover hidden relationships between imaging data and embryo viability (Zhong et al., 2024).

• Integration of Multimodal Data:

Machine learning models can combine imaging data with clinical parameters, such as maternal age, previous IVF attempts, and genetic testing results (e.g., preimplantation genetic screening), to improve embryo selection decisions. Multimodal approaches leverage both visual and non-visual data to create a comprehensive assessment of embryo potential.

• Reducing Embryologist Workload:

By automating the embryo selection process, AI significantly reduces the time and labor required for manual assessment. Embryologists can focus on validation and decision-making, while AI systems handle the repetitive analysis tasks, increasing efficiency in busy fertility clinics.

In summary, deep learning methods are transforming embryo selection by providing automated, accurate, and objective assessments of embryo viability. These systems save valuable labor time, improve success rates, and reduce the subjectivity of traditional approaches, making AI an essential tool in modern fertility clinics. As these models continue to evolve and gain clinical acceptance, they will play a pivotal role in improving outcomes for patients undergoing IVF treatment.

3. CHALLENGES AND FUTURE DIRECTIONS

Despite the transformative potential of machine learning (ML) and artificial intelligence (AI) in gynecology, several challenges limit their widespread adoption in clinical practice. One of the primary barriers is the availability and quality of data. Machine learning models require large, diverse, and high-quality datasets to perform effectively. However, in gynecology, access to such datasets is often limited due to fragmented records, inconsistent annotations, and small sample sizes, particularly in low-resource settings. Additionally, patient data, including imaging, genetic profiles, and electronic health records (EHRs), is highly sensitive and subject to strict privacy regulations such as HIPAA and GDPR. Balancing data privacy and utility remains a critical challenge for large-scale AI adoption.

Another major concern is the black-box nature of many deep learning models. In gynecology, where decisions directly impact maternal and fetal health, it is essential for clinicians to trust AI outputs. The lack of interpretability makes it difficult to explain how AI models arrive at specific predictions, limiting their acceptance. Developing explainable AI (XAI) frameworks, which provide clear visualizations or justifications for decisions, will help bridge this gap. Similarly, machine learning models are often susceptible to bias, particularly when trained on non-representative datasets. Underrepresentation of certain populations can lead to skewed predictions, exacerbating healthcare disparities. Efforts to ensure fair and unbiased AI tools, validated across diverse demographic and regional groups, are vital for equitable outcomes.

In addition to these technical challenges, the integration of AI into clinical workflows remains a hurdle. Many healthcare systems lack the infrastructure to support AI implementation, and clinicians may be hesitant to adopt new technologies that disrupt established routines. Seamless integration of AI tools into existing platforms, such as EHRs or imaging systems, is essential to enhance efficiency without creating additional burdens. Furthermore, rigorous clinical trials and multi-center studies are needed to validate AI models in real-world settings and establish regulatory approval for their widespread use.

Moving forward, several directions can address these challenges and unlock AI's full potential in gynecology. Collaborative efforts should focus on building large, open-access datasets that represent diverse patient populations. Explainable AI models must be prioritized to ensure transparency, improve trust, and provide actionable insights for clinicians. In addition, integrating AI with wearable technologies and the Internet of Things (IoT) can enable real-time, continuous monitoring of maternal and fetal health, especially in high-risk pregnancies. The development of low-cost, lightweight AI solutions that operate on portable devices, such as smartphones and handheld ultrasound machines, will democratize access to advanced gynecological care in resource-limited regions.

Finally, AI can pave the way for personalized and preventive care by combining imaging, genetic, and clinical data to create tailored treatment plans. Machine learning can help identify at-risk individuals early, optimize interventions, and improve outcomes in areas such as preeclampsia, gestational diabetes, and gynecological cancers. With ongoing advancements, AI has the potential to transform gynecology into a data-driven, patient-centered field. However, addressing the challenges of data privacy, bias, clinical validation, and ethical concerns will be essential to ensure that AI delivers equitable, effective, and trusted solutions for improving women's health worldwide.

4. CONCLUSION

Integrating Artificial Intelligence (AI) in gynecology has opened new avenues for improving clinical care, diagnosis, and treatment outcomes. By leveraging machine learning (ML) and deep learning (DL) models, clinicians can analyze complex datasets, including medical imaging, electronic health records, and biomarkers, to derive actionable insights. Applications such as predicting early pregnancy complications, monitoring fetal health, screening gynecological cancers, and selecting viable embryos in assisted reproductive technologies demonstrate the transformative potential of AI in gynecology. AI enhances diagnostic accuracy, supports personalized treatment plans, and streamlines workflows, ultimately improving patient outcomes and optimizing resource utilization. However, data privacy, model interpretability, bias, and clinical validation must be addressed to ensure equitable and ethical use. Collaborative efforts to build diverse datasets, develop explainable AI frameworks, and integrate AI into existing healthcare systems will be essential for its widespread adoption.

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C. Author : ¹ <u>shaghayeghmahmoudian@gmail.com</u>