## EDITORIAL

## **Editor's Foreword:**

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It is my privilege to introduce this edition of Trinity Student Medical Journal (TSMJ), where we focus on the role of artificial intelligence in medicine and its expanding applications across the healthcare spectrum. This is a topic that is not only timely, but crucial as we navigate the complexities of integrating it within medicine. As AI technology advances exponentially, it opens up new avenues for clinical practice, enhances diagnostic accuracy, and revolutionizes medical education. We are in a paradigm shift that promises to reshape our approach to patient care, medical training, and healthcare delivery.

This issue offers a compelling blend of articles highlighting AI's potential in diverse and sometimes unexpected areas of medicine. Among these, we feature an in-depth look at how AI is being adapted for neonatal care in low-resource settings. This article highlights how AI technology can facilitate early diagnosis and intervention for at-risk infants, with the potential to bridge gaps in healthcare equity and improve outcomes for the most vulnerable populations among us.

Another highlight of this volume is an insightful interview with a GP who discusses balancing clinical practice and research in developing AI technology. His reflection offers a candid perspective on the practical challenges faced by today's medical professionals as they integrate cutting-edge technologies into their daily routines.

Our authors have contributed to a diverse array of articles spanning multiple specialties, providing readers with a well-rounded view of both AI-driven and traditional medical advancements. This edition includes a thoughtful opinion piece on *primum non nocere* which explores what it means to "do no harm". This author examines the risks of overdiagnosis in modern medicine, reminding us that technology must serve, not overshadow, patient care.

In addition to the AI-focused articles, this volume brings together research and perspectives across a broad spectrum of disciplines. From the field of speech and communication sciences, the long-term sequelae of COVID-19, particularly focusing on swallowing difficulties that can profoundly impact a patient's quality of life. A surgical study evaluates the merits of appendectomy versus medical management for appendicitis, cataloging the benefits and risks inherent to each treatment approach and contributing valuable insights to surgical practice. In neurology, readers will find a detailed review of emerging treatments for acute ischemic stroke, highlighting recent advancements that hold promise for improving patient outcomes.

Other articles enrich our understanding of the interconnected nature of healthcare. A gastrointestinal piece covers the extraintestinal manifestations of these diseases, while an infectious disease article charts the evolution of COVID-19 treatments and their impact on patient care. In toxicology, the changing landscape of the fentanyl epidemic is explored, looking closely at the emergence of new fentanyl derivatives. Lastly, in emergency medicine, an article discusses the potential of immunological biomarkers in diagnosing neonatal sepsis—an area where early detection is critical to infant survival.

As I reflect upon this edition, I would like to express my heartfelt gratitude to our entire team, including our peer reviewers, directors, and editors, whose tireless efforts have made this journal a reality. None of this would have been possible without the dedication of our director, Dr. Razif, whose leadership has been the glue that held this edition together; without her, none of this would have been possible.

As you read the articles in this volume, I hope they spark meaningful conversations that motivate future students to push the limits of medical practice and explore new possibilities.

In keeping with the theme of this edition, let's remember the core principle of the Hippocratic Oath: *'primum non nocere.*' This guiding tenet serves as a reminder to embrace the integration of artificial intelligence in healthcare, while always keeping our primary duty—to do no harm. ◄

