

# AI for Real-Time Precision Health

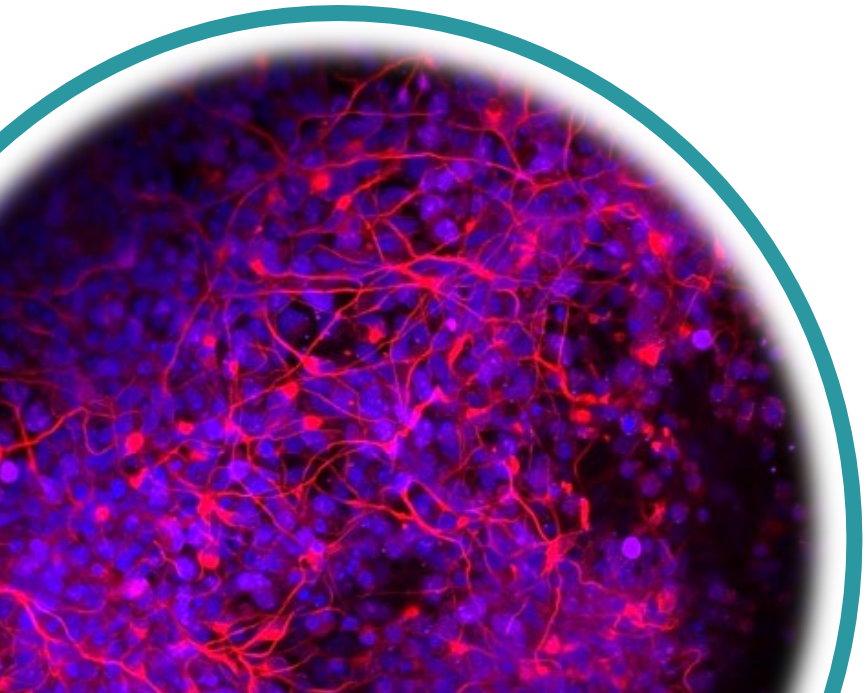
*predictive biology from cell classification to acute trauma care*

February 2, 2025

## US-Kuwait Precision Medicine Workshop

*Session II: AI and the  
Future of Precision Medicine*

**Amina Ann Qutub, PhD**







palo  
bio



**TRAUMA RESEARCH  
AND COMBAT CASUALTY  
CARE COLLABORATIVE**  
*An initiative of The University of Texas System*



**Amina Ann Qutub, PhD**

Burzik Professor in Engineering Design  
Associate Professor, Biomedical Engineering, UTSA  
Co-Director, Center for Precision Medicine  
Director, UTSA UT Health Graduate Group in Biomedical Engineering  
Assistant Director, AI MATRIX | Brain Health Consortium

Intro & Disclosures



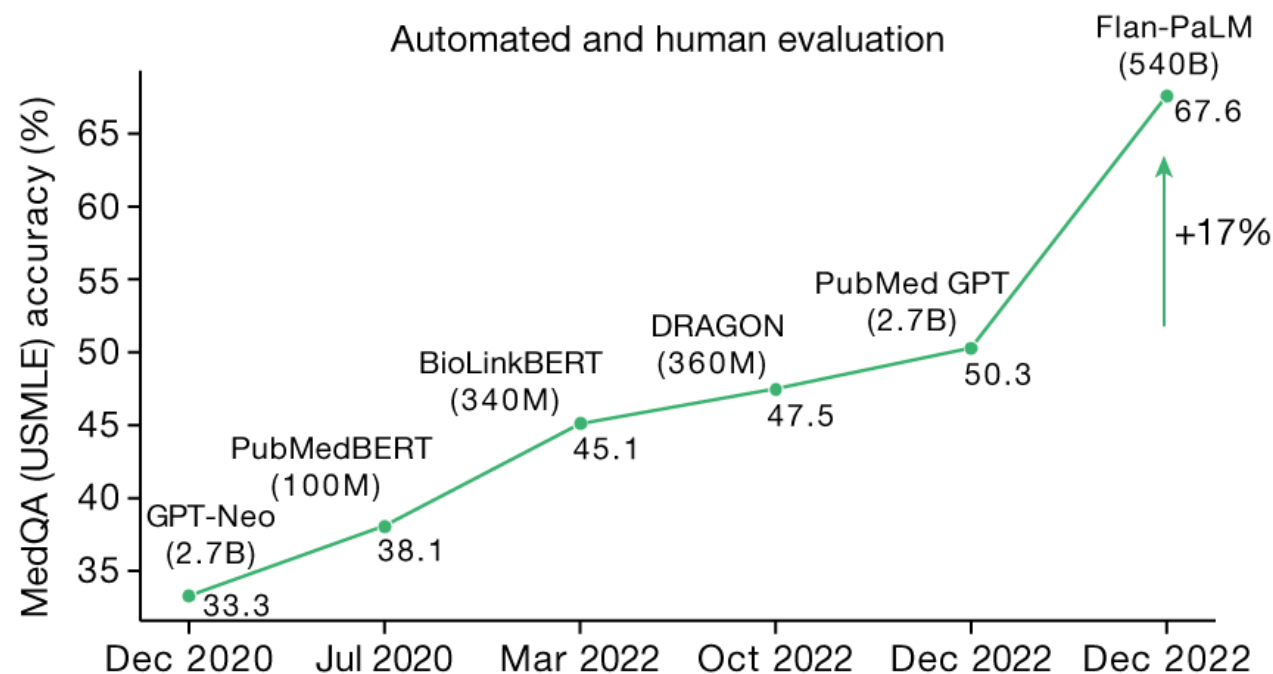
# Large language models encode clinical knowledge

Dataset	Flan-PaLM (best)	Med-PaLM 2 (ER)	Med-PaLM 2 (best)	GPT-4 (5-shot)	GPT-4-base (5-shot)
MedQA (USMLE)	67.6	85.4	<b>86.5</b>	81.4	86.1
PubMedQA	79.0	75.0	<b>81.8</b>	75.2	80.4
MedMCQA	57.6	72.3	72.3	72.4	<b>73.7</b>
MMLU Clinical knowledge	80.4	<b>88.7</b>	<b>88.7</b>	86.4	<b>88.7</b>
MMLU Medical genetics	75.0	92.0	92.0	92.0	<b>97.0</b>
MMLU Anatomy	63.7	84.4	84.4	80.0	<b>85.2</b>
MMLU Professional medicine	83.8	92.3	<b>95.2</b>	93.8	93.8
MMLU College biology	88.9	95.8	95.8	95.1	<b>97.2</b>
MMLU College medicine	76.3	<b>83.2</b>	<b>83.2</b>	76.9	80.9

Singhai et al, Nature, 2023  
arXiv:2305.09617v1, 2024



Dataset
MedQA (USMLE)
PubMedQA
MedMCQA
MMLU Clinical knowledge
MMLU Medical genetics
MMLU Anatomy
MMLU Professional
MMLU College biology
MMLU College medicine



**Q:** How long does it take for newborn jaundice to go away?

**Med-PaLM:** Newborn jaundice is when a newborn baby's skin and eyes look yellow. It is caused by a buildup of a substance called bilirubin in the baby's blood. Bilirubin is a byproduct of the normal process of red blood cells breaking down. Newborn jaundice is common and typically harmless, but it can be a sign of a more serious condition. The jaundice typically goes away on its own within a few weeks. In some cases, it may last longer or require treatment. The time it takes for the jaundice to go away can vary depending on the cause and the severity of the jaundice. If the jaundice is severe or lasts longer than a few weeks, the doctor may recommend testing or treatment to determine the cause and prevent complications.

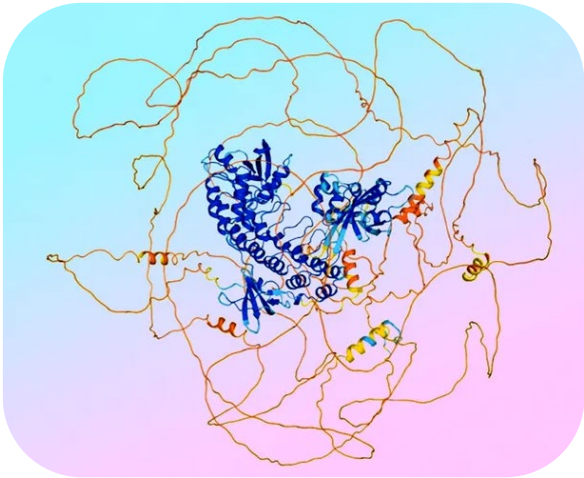
Med-PaLM performs encouragingly  
on consumer medical question answering

GPT-4 (5-shot)	GPT-4-base (5-shot)
81.4	86.1
75.2	80.4
72.4	<b>73.7</b>
86.4	<b>88.7</b>
92.0	<b>97.0</b>
80.0	<b>85.2</b>
93.8	93.8
95.1	<b>97.2</b>
76.9	80.9



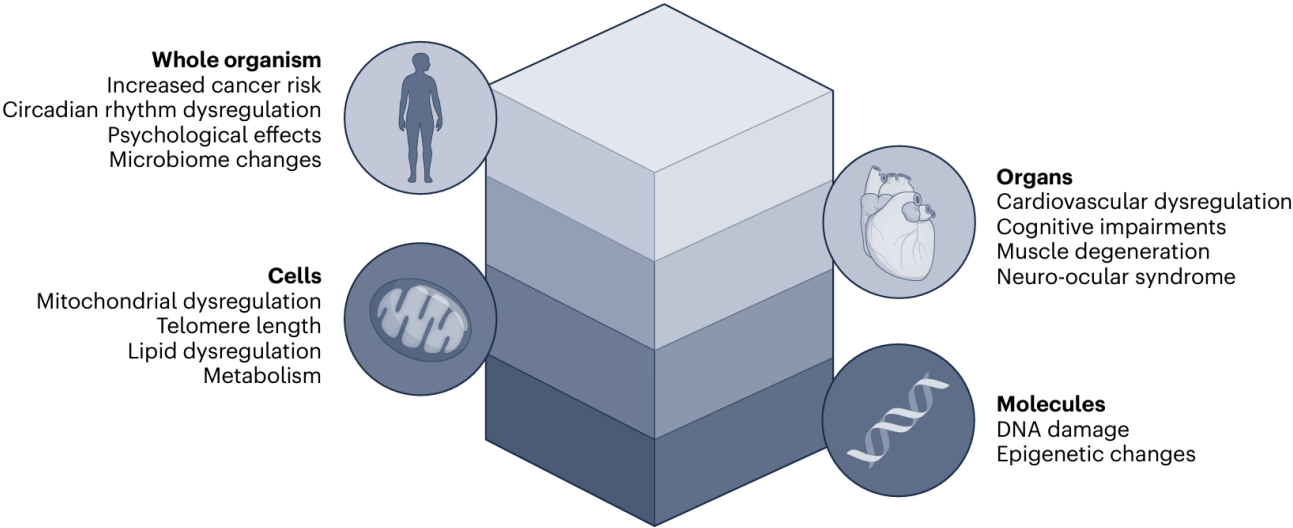
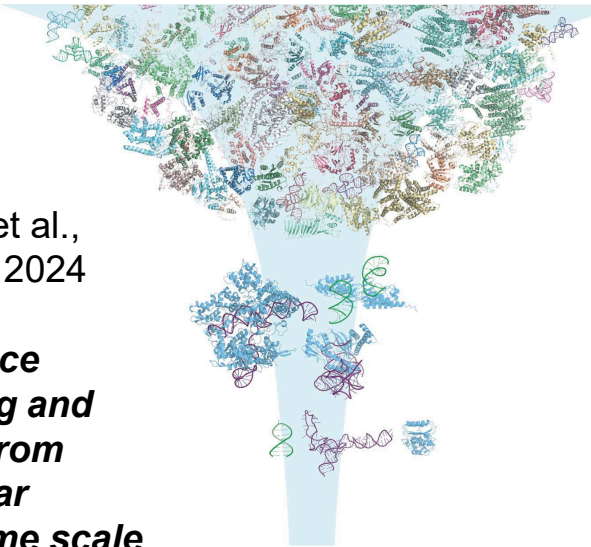
Abramson  
et al,  
Nature,  
2024

Alpha-  
Fold3



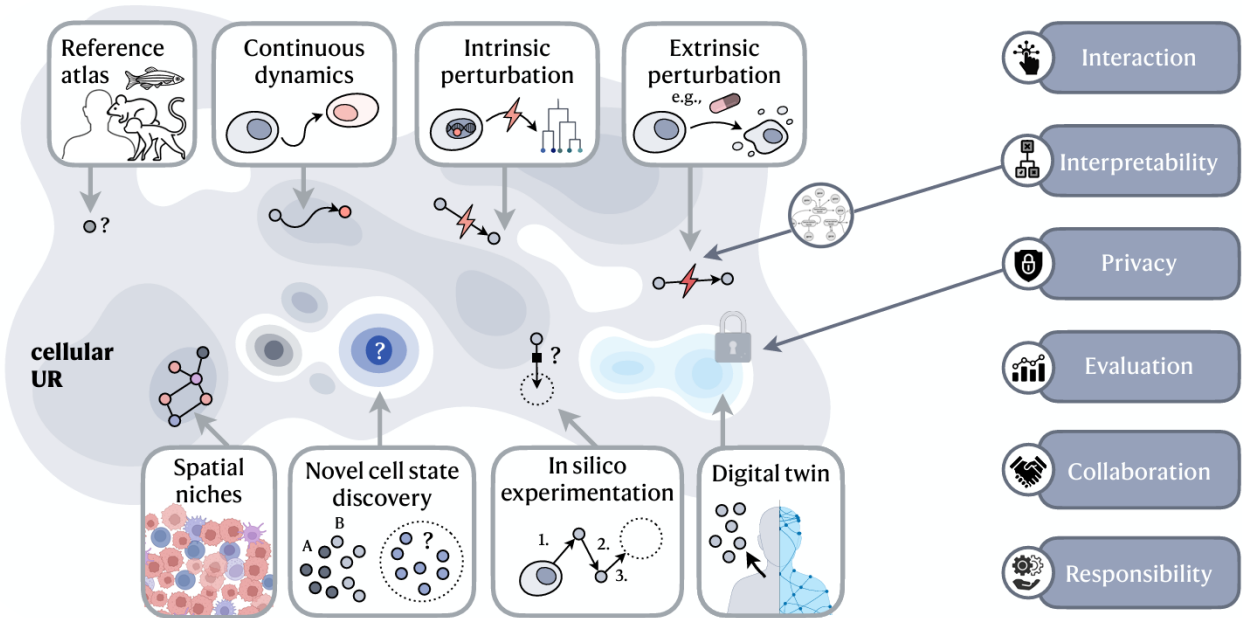
Nguyen et al.,  
Science, 2024

“Sequence  
modeling and  
design from  
molecular  
to genome scale  
with Evo”



Sanders et al.,  
Nature Machine  
Learning, 2023

“**Biological  
research and  
self-driving  
labs in deep  
space  
supported by  
artificial  
intelligence**”



Bunne et al., Cell, 2024 “How to build the virtual cell with artificial intelligence”



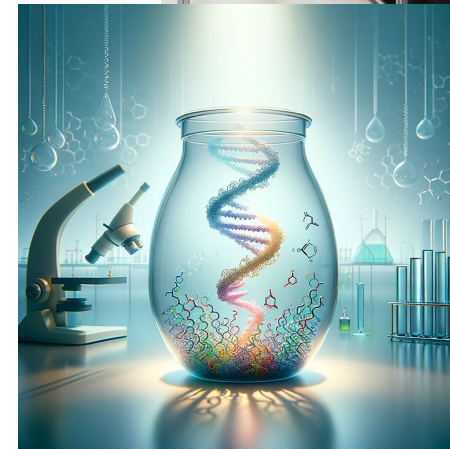
# Where AI and automation are transforming the biosciences:

- AI breaks reliance on knowns & priors
- AI and automation speed up experiments
- AI is reinventing how R&D is performed
- Enables remote access to labs 24/7
- Augments decision-making
- Enables bridge between digital and physical worlds
- Enables scientists' time to be spent on experimental planning and thought

**National Academies Workshop, 04.2024**



*Emerald Cloud Lab  
facility (Austin, TX;  
Photo: Business Wire)*



*DALL·E3 depiction of  
Frances Arnold's  
directed evolution*



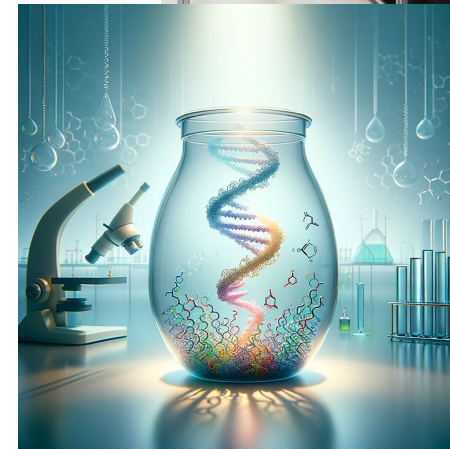
# Where AI and automation are transforming the biosciences:

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*Emerald Cloud Lab facility (Austin, TX; Photo: Business Wire)*



*DALL·E3 depiction of Frances Arnold's directed evolution*

# Predictive Biology for



Therapies

Discovery

AI for Real-Time Precision Health





## Human-Centric AI Tools for Biomedicine

We are developing novel artificial intelligence approaches to handle diverse biomedical and social data, and make AI tools accessible, robust and friendly to clinical researchers and clinicians.

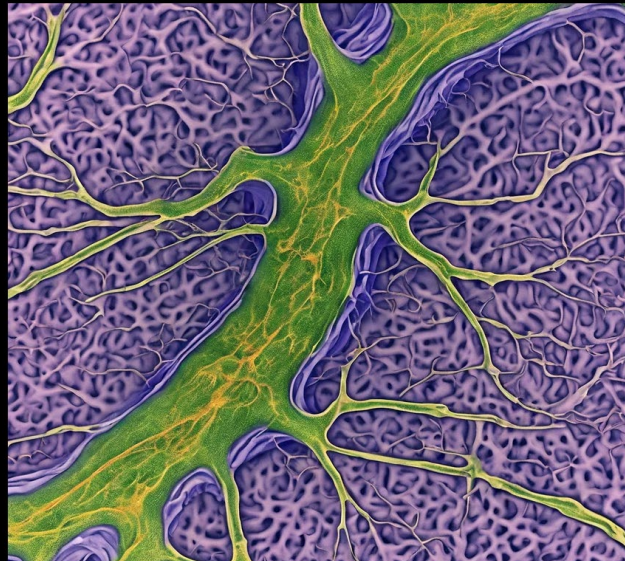


## Improving Trauma Care through AI

Our collaborative teams of trauma surgeons, neurologists, AI researchers and biomedical engineers are developing AI assistants for trauma researchers and emergency first responders to improve outcomes for trauma patients.

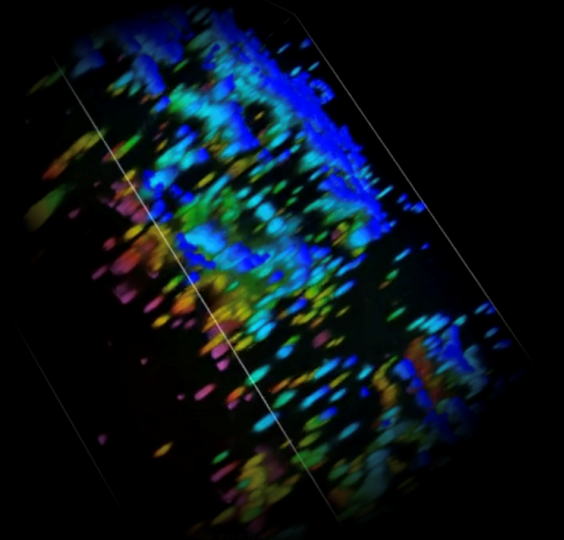
## Decoding the Brain's Immune System

A study to uncover how the brain's meningeal lymphatics regulate risks for dementia as a function of metabolic factors



## Brain Models for Biomedicine

We are developing patient-specific cellular models to understand how the brain responds to environmental stresses and identify therapies to enhance neuroregeneration. These experimental & computational models mimic brain regions regulating sensory response and circadian cycles.



# Predictive Biology for



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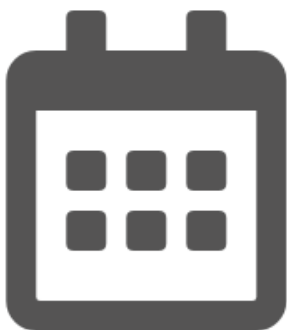


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# The Why



Years of  
Potential  
Life Lost  
before  
Age 65:  
**25.42 M  
Years**

Source: CDC

Fatal Injury Rate (per  
100,000)

**79.65**

Number of Deaths

**1,378,840**

For every 1 person who died:



**11**

People  
hospitalized



**76**

People treated  
and  
released from ED



**Cost in 2022:**

Total Injury: **\$4.98 T**

Fatal Injury: **\$3.00 T**



# The Why

- Unintentional injuries are the leading cause of death in people in the U.S. Aged 1-44
- Accidents are the 3<sup>rd</sup> leading cause of death in the U.S.
- Time to care varies
- Quality of life depends on acute, precise trauma care

# The Solution

- **Fund and build a Tiger Team** of trauma experts, AI researchers, biomedical engineers, psychologist and data analysts
- **Launch collection of coordinated trauma datasets** and data access across Texas, shared across 7 leading hospitals
- **Develop an AI prototype** and exemplar for applying AI to trauma care across the nation
  - AI analysis of trauma outcomes to **identify causes of delay**
  - AI-augmented presentation of data to **inform real-time clinical decisions to optimize patient outcomes**
  - Inform **policy decisions**



**iRemedyACT: Identification &  
Remediation of Delays to  
Definitive Care of Critically  
Injured Patients in the Texas  
Trauma System (iRemedy) with  
Advances in AI to Improve  
Care for Trauma (ACT)**



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<https://ai.utsa.edu/iremedyact/>



**Amina Ann Qutub, PhD  
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**Brian Eastridge, MD  
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**Alan Cook, MD  
(UTTyler)**



**Christian Cruz  
(UTSA)**



**Sambit Panda, PhD  
(UTSA)**



**Chris Rathbone, PhD  
(UTSA)**



**Dhiressha Kudithipudi,  
PhD (UTSA)**

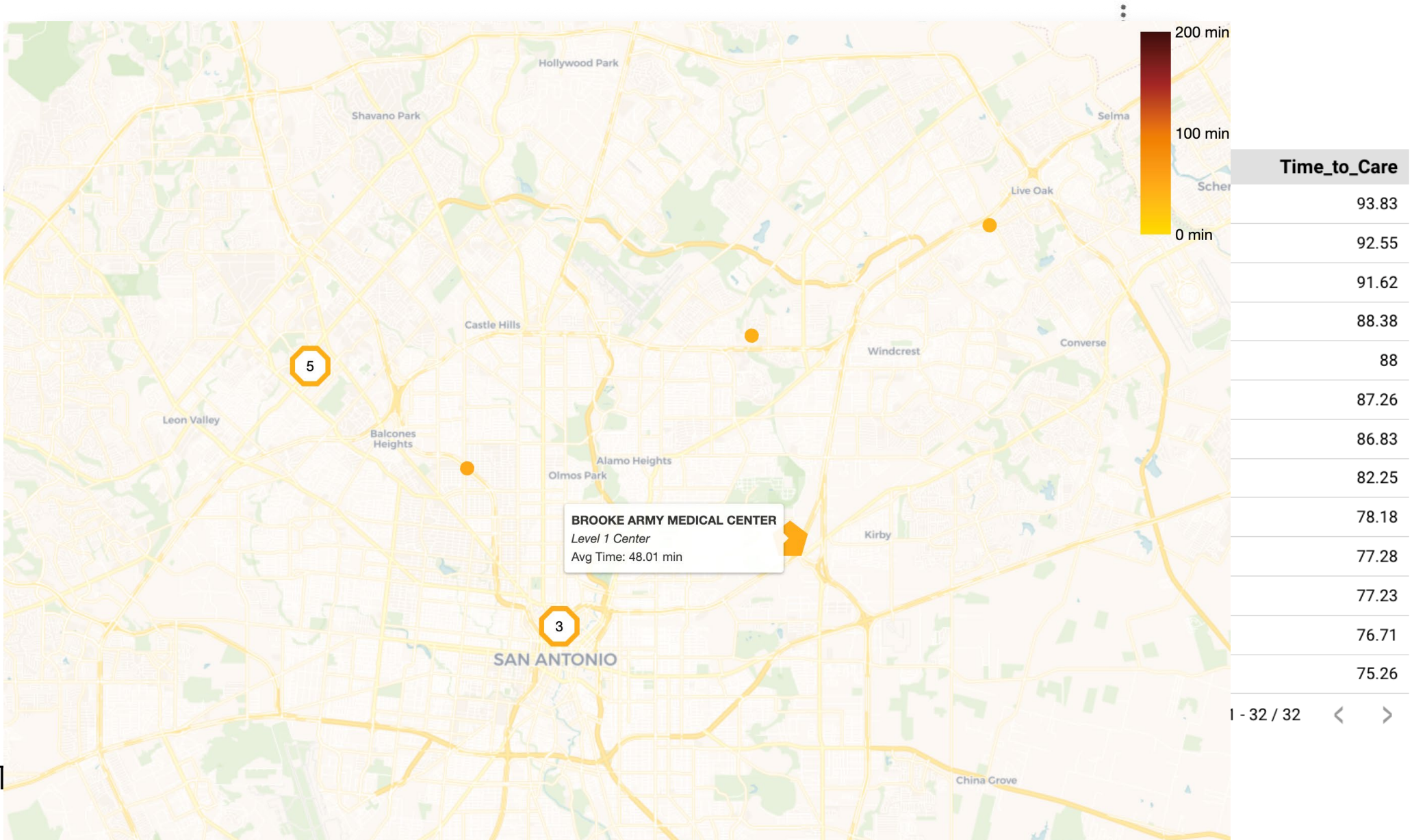


**Mark Goldberg, MD  
(UT Health)**



**Joe Houpt, PhD (UTSA)**

# Time-to-Care Varies as a Function of Trauma Type, Location, Demographics and Clinical Decisions





# Example AI real-time support for researchers - LLM comparisons

Chat-GPT-o1

## Bottom Line

- If the child is **neurologically stable**, has **no high-risk findings** on exam, and you have the **resources for pediatric imaging, sedation, and orthopedic care**, it is often safe to keep and manage the child at a Level IV facility.
- If there is any doubt about the child's neurological status, if the fracture is complex (e.g., needs urgent operative management), or if your facility **cannot** provide the needed pediatric imaging/orthopedic/sedation services in a timely fashion, **transfer to a higher-level pediatric-capable center** is safer.

As always, when in doubt, consult your on-call pediatric trauma or orthopedic specialist, follow established transfer guidelines, and prioritize the child's safety and definitive care.

**4 Recommendation:** Given the signs and symptoms presented, including the history of brief LOC, transferring the child to a Level 1 or Level 2 trauma center for further evaluation and management is advisable. The higher trauma center can provide comprehensive evaluation, including neurosurgical assessment if needed.

In conclusion, it is recommended to transfer the child to a higher echelon of care for better management of potential traumatic injuries.

[1][2]

# Predictive Biology for



Therapies

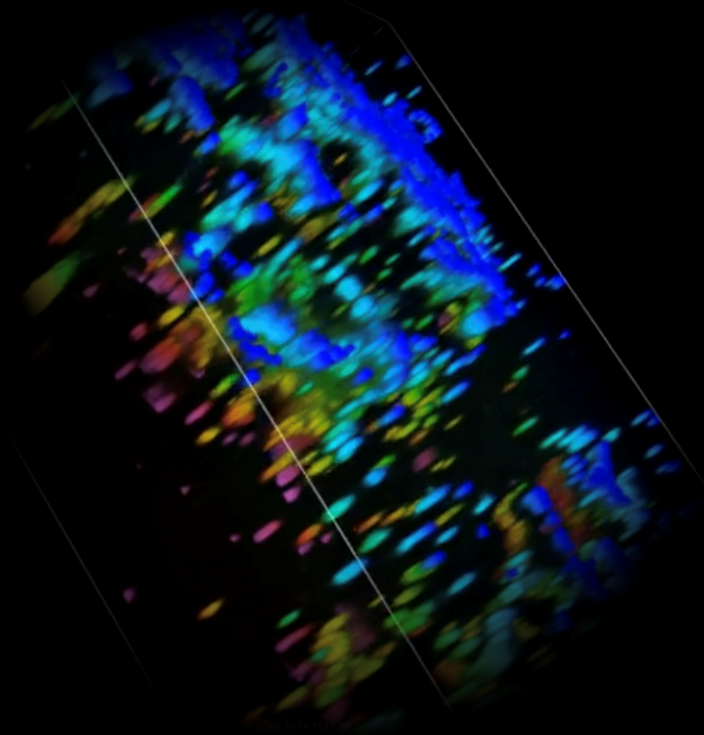
**Discovery**

AI for Real-Time Precision Health



# Brain Models for Biomedicine

We are developing patient-specific cellular models to understand how the brain responds to environmental stresses and identify therapies to enhance neuroregeneration. These experimental & computational models mimic brain regions regulating sensory response and circadian cycles.



>100 M

Children and adults in the U.S. who have a neurological disorder

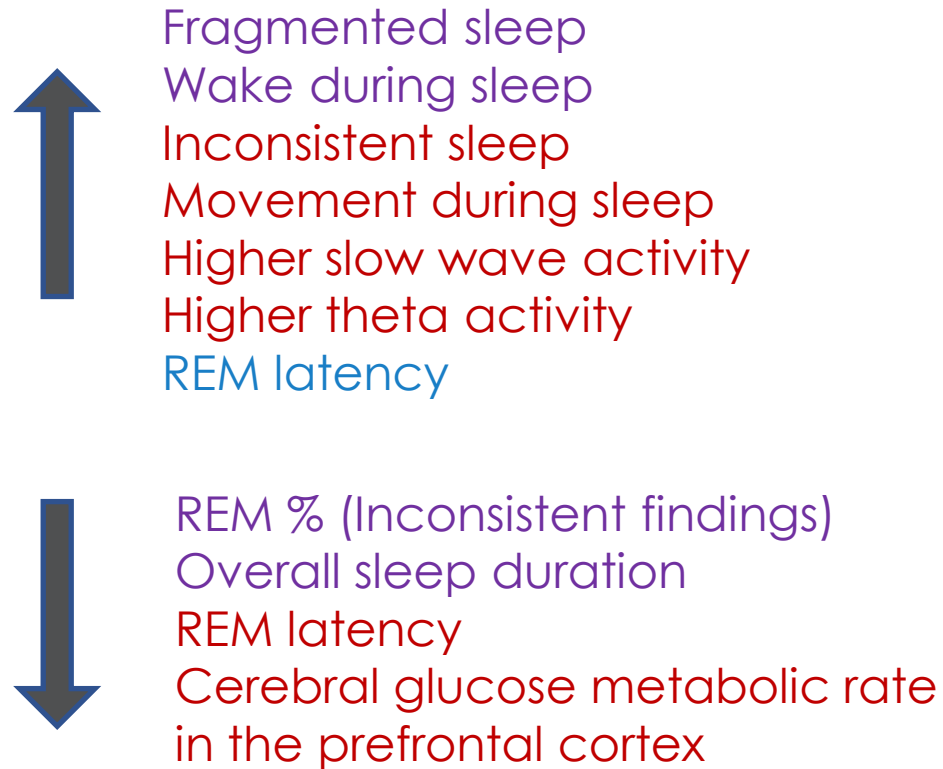
- *US Neurological Disorders Collaborators, JAMA Neurology 2021*

>40%

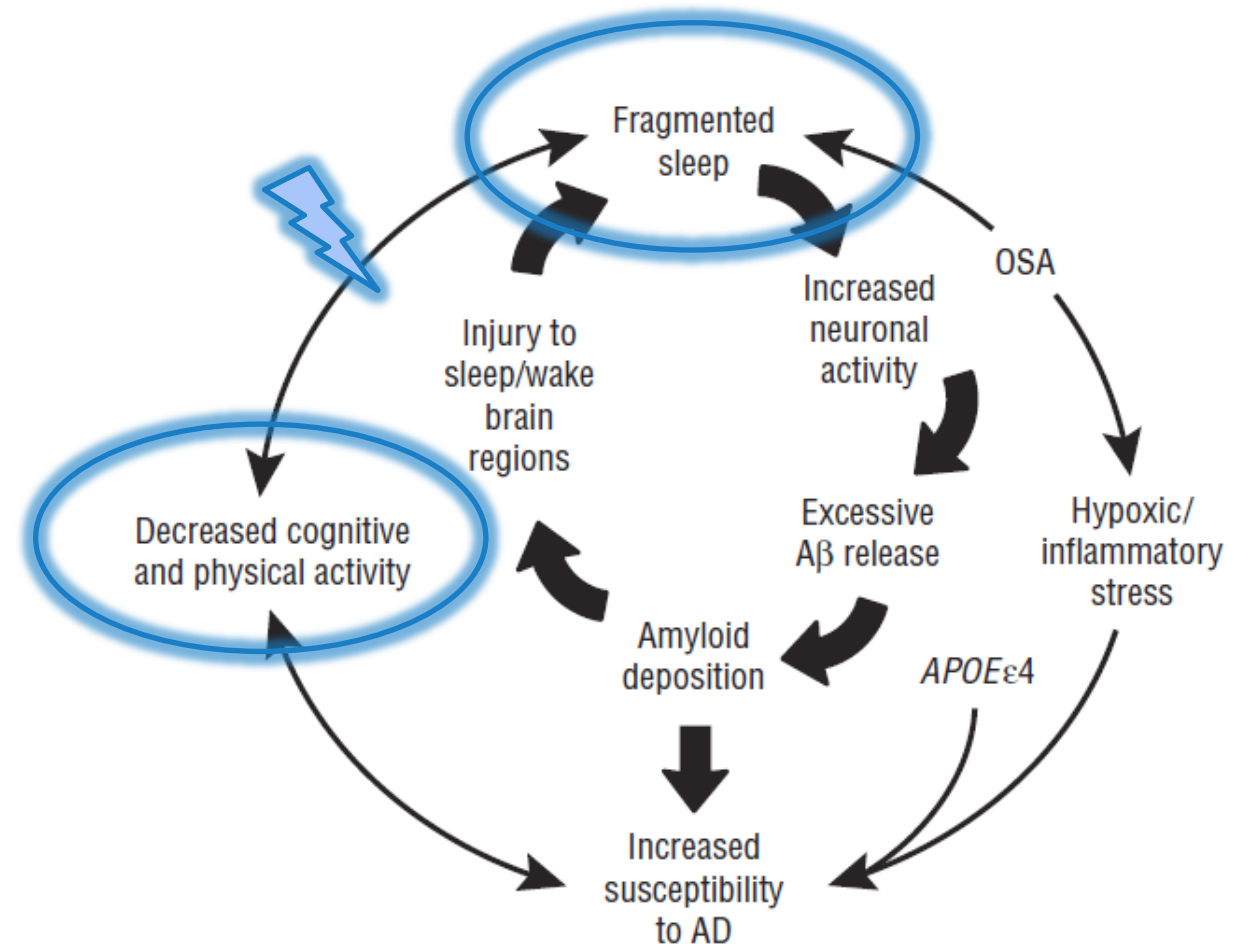
Cases of dementia that are attributed to environment (environmental stress, lifestyle factors)

- *Livingston et al., Lancet, 2020*

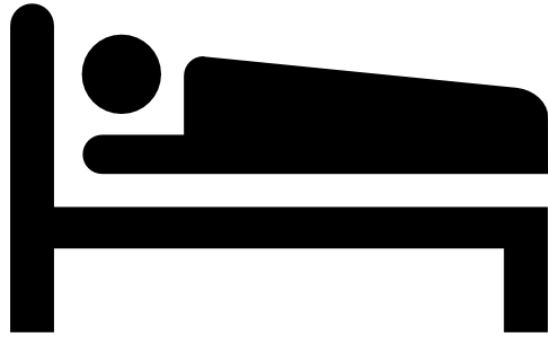
# Sleep changes in Neurological Conditions



Pediatric ADHD + Autism |  
Observed in both |  
Mild Cognitive Impairment



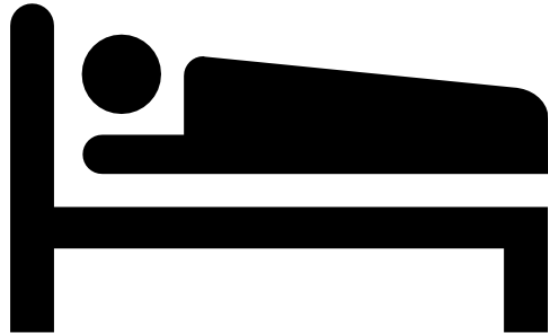
Basner & Dinges,  
Sleep, 2018



“our findings show adverse effects of **one-night sleep deprivation** on brain A $\beta$  and expand on prior findings of higher A $\beta$  accumulation with chronic less sleep”

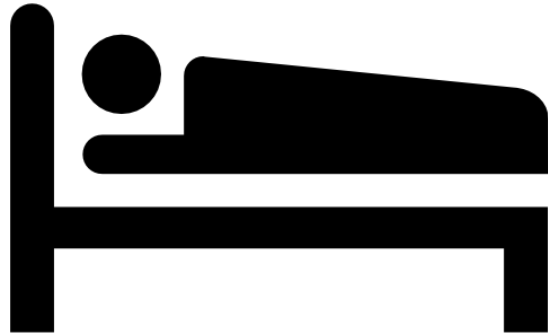
Shokri-Kojori et al., PNAS 2018





“our findings  
implicate **REM sleep**  
mechanisms as predictors  
of clinical dementia”

Pase et al., Neurology 2017

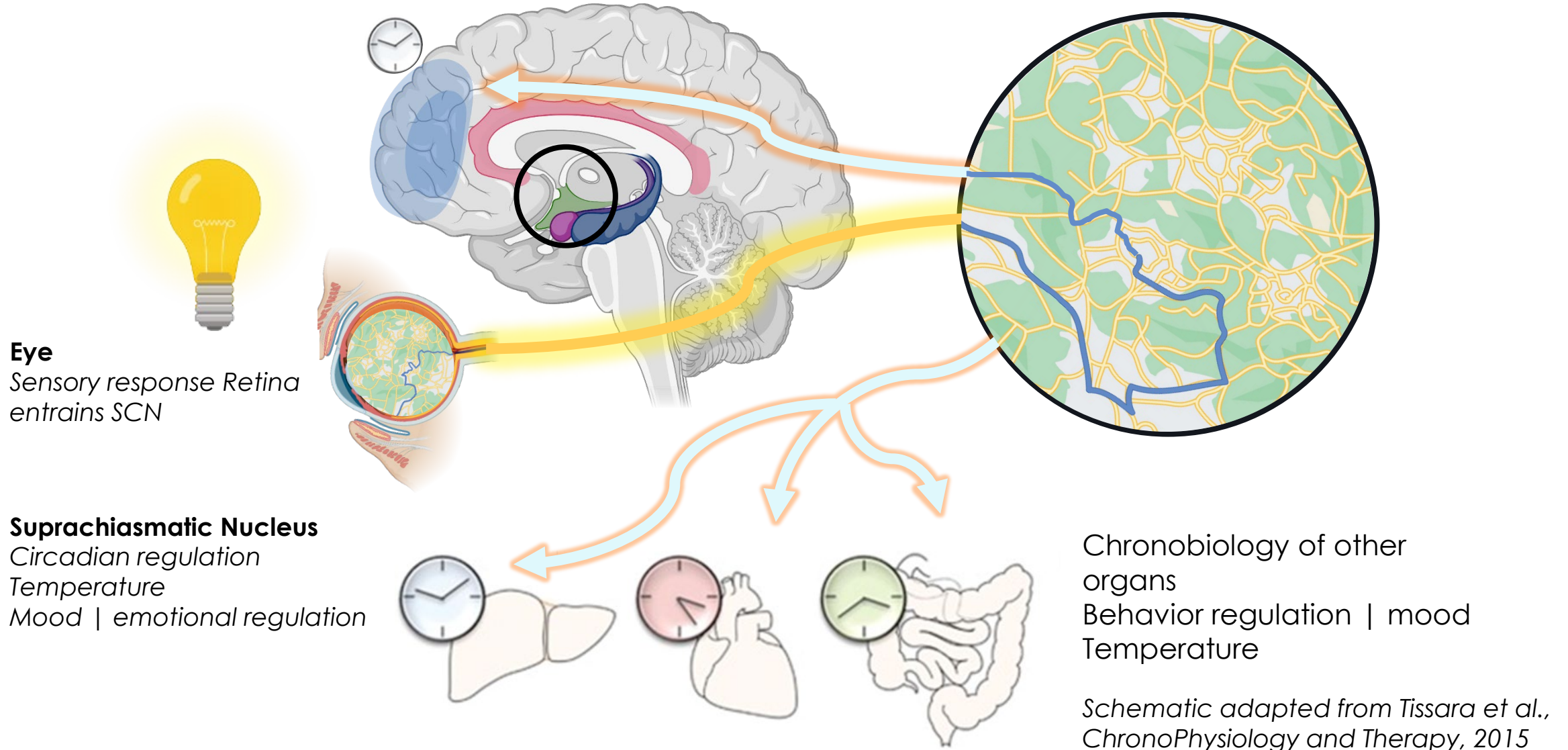


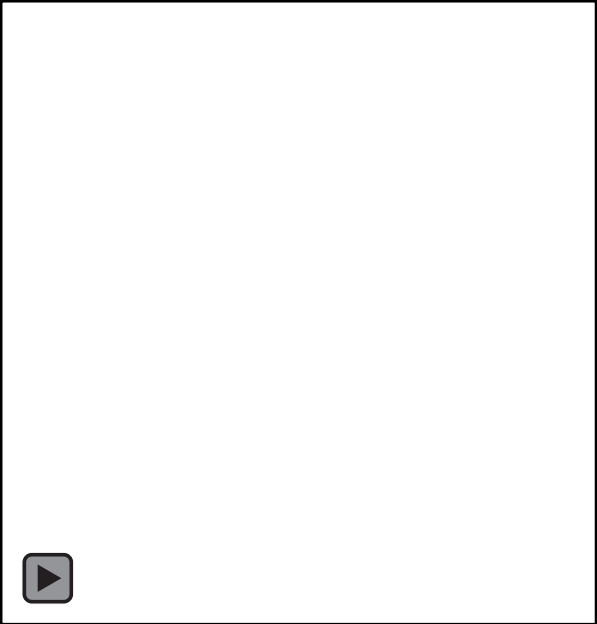
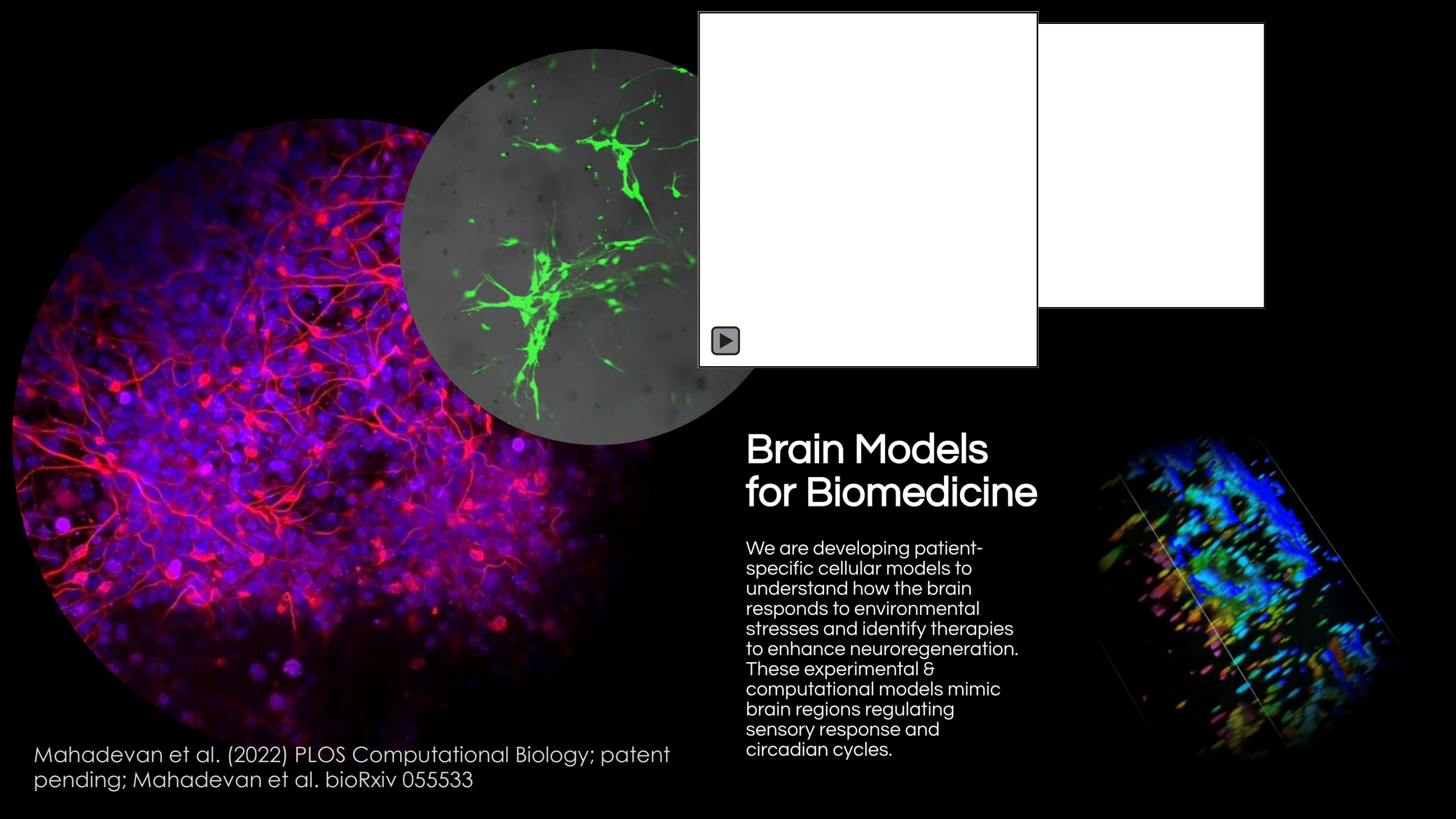
“...**sleep reduces**  
accumulating **DNA**  
**damage** in single neurons”

(shown in zebrafish model)

Zada et al., Nature  
Communications 2019

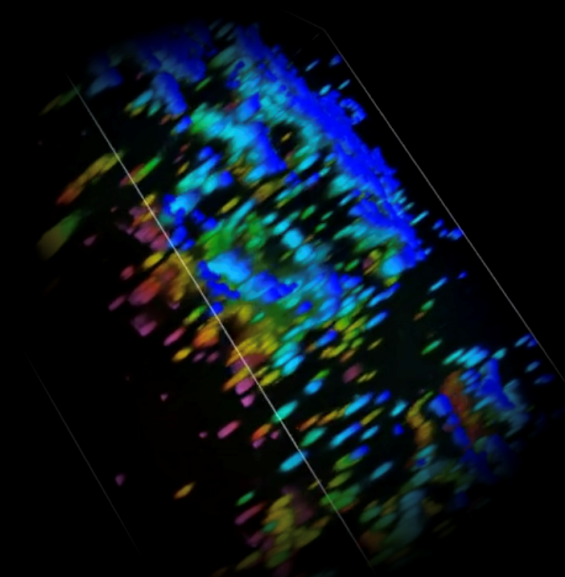
# Brain Regions Regulating Sensory Response & Sleep/Wake Cycle





## Brain Models for Biomedicine

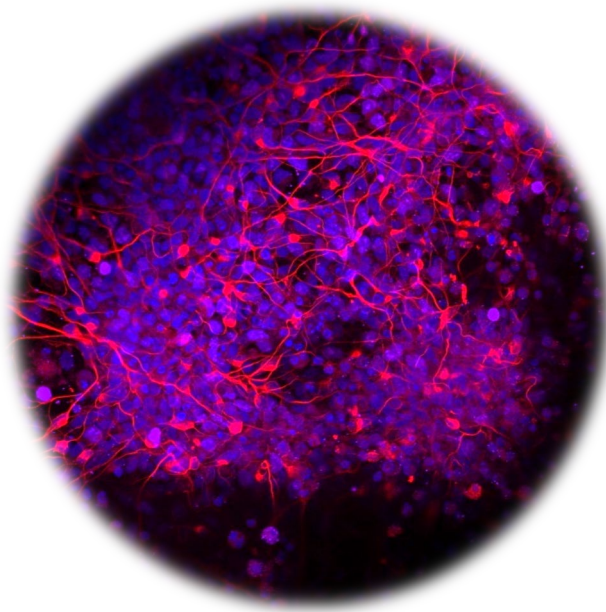
We are developing patient-specific cellular models to understand how the brain responds to environmental stresses and identify therapies to enhance neuroregeneration. These experimental & computational models mimic brain regions regulating sensory response and circadian cycles.



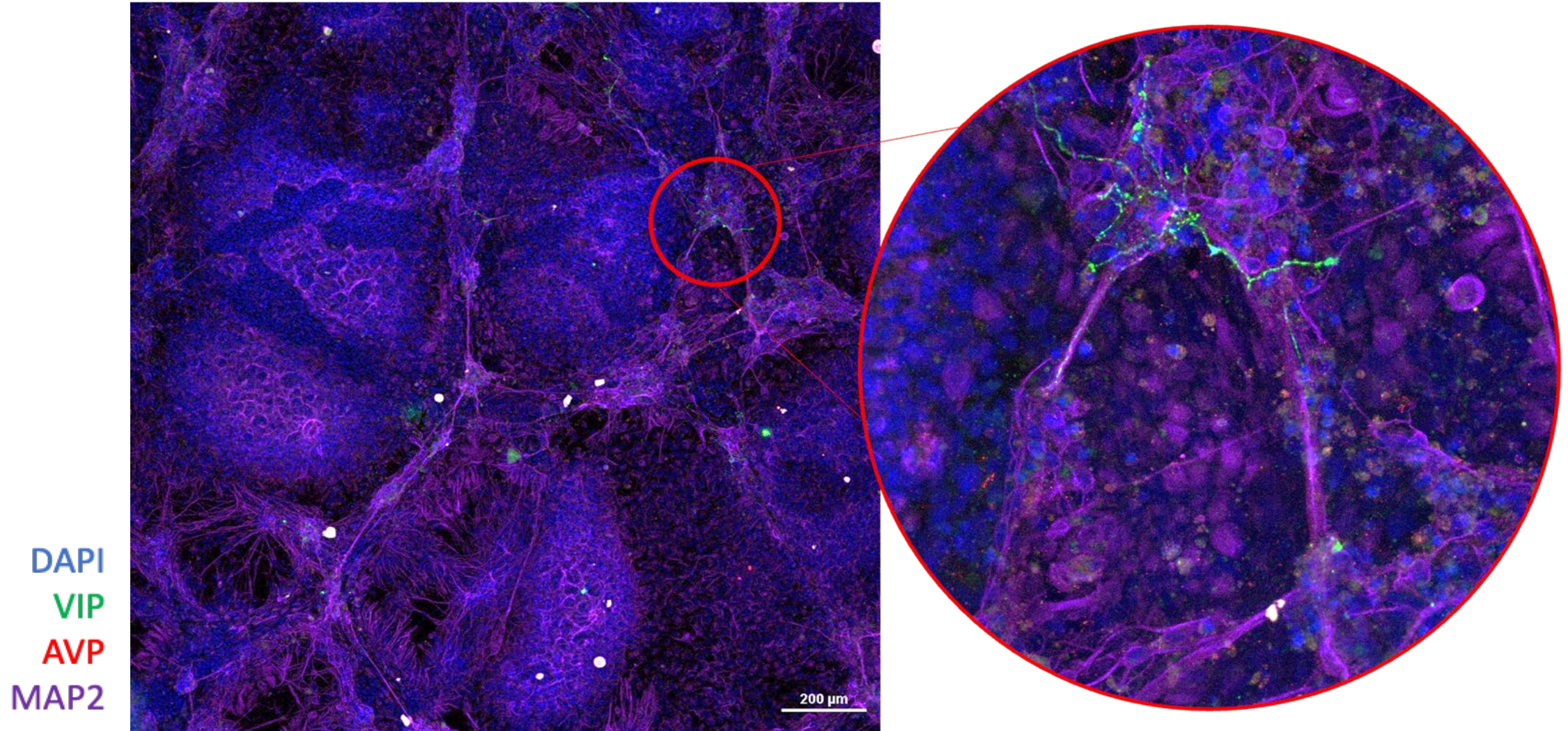
Mahadevan et al. (2022) PLOS Computational Biology; patent pending; Mahadevan et al. bioRxiv 055533



Develop brain models to enable testing hypotheses of the role of environmental effects on the suprachiasmatic nucleus, and develop a therapeutic screening tool

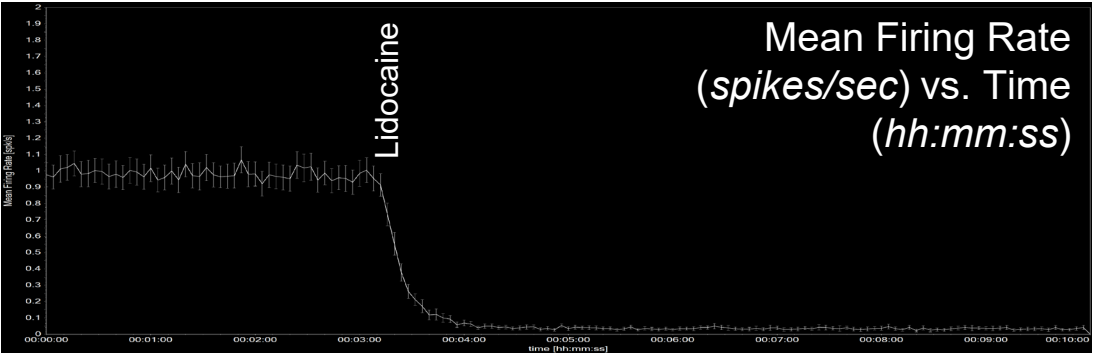
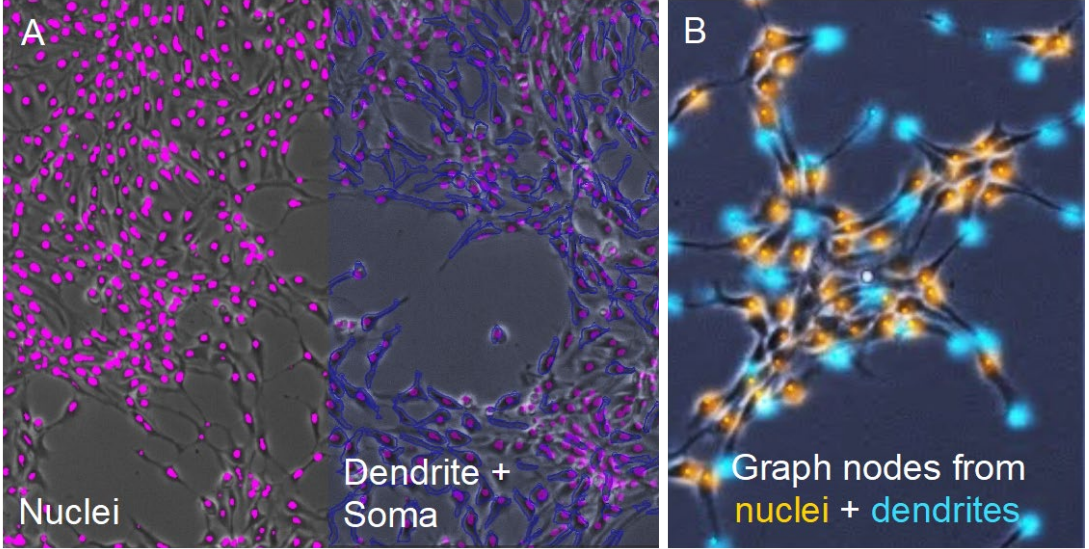
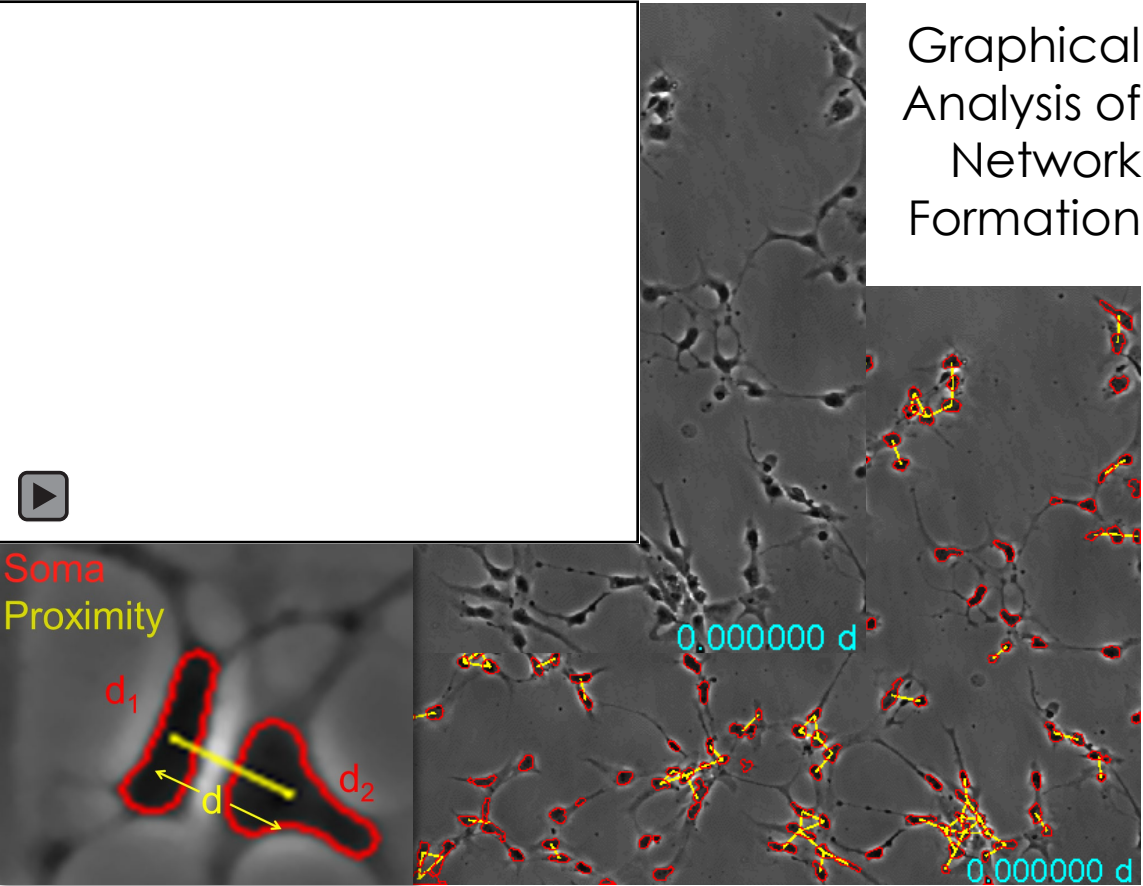


# Human induced Pluripotent Stem Cell-Derived Suprachiasmatic Nucleus – *Master Clock of the Brain*



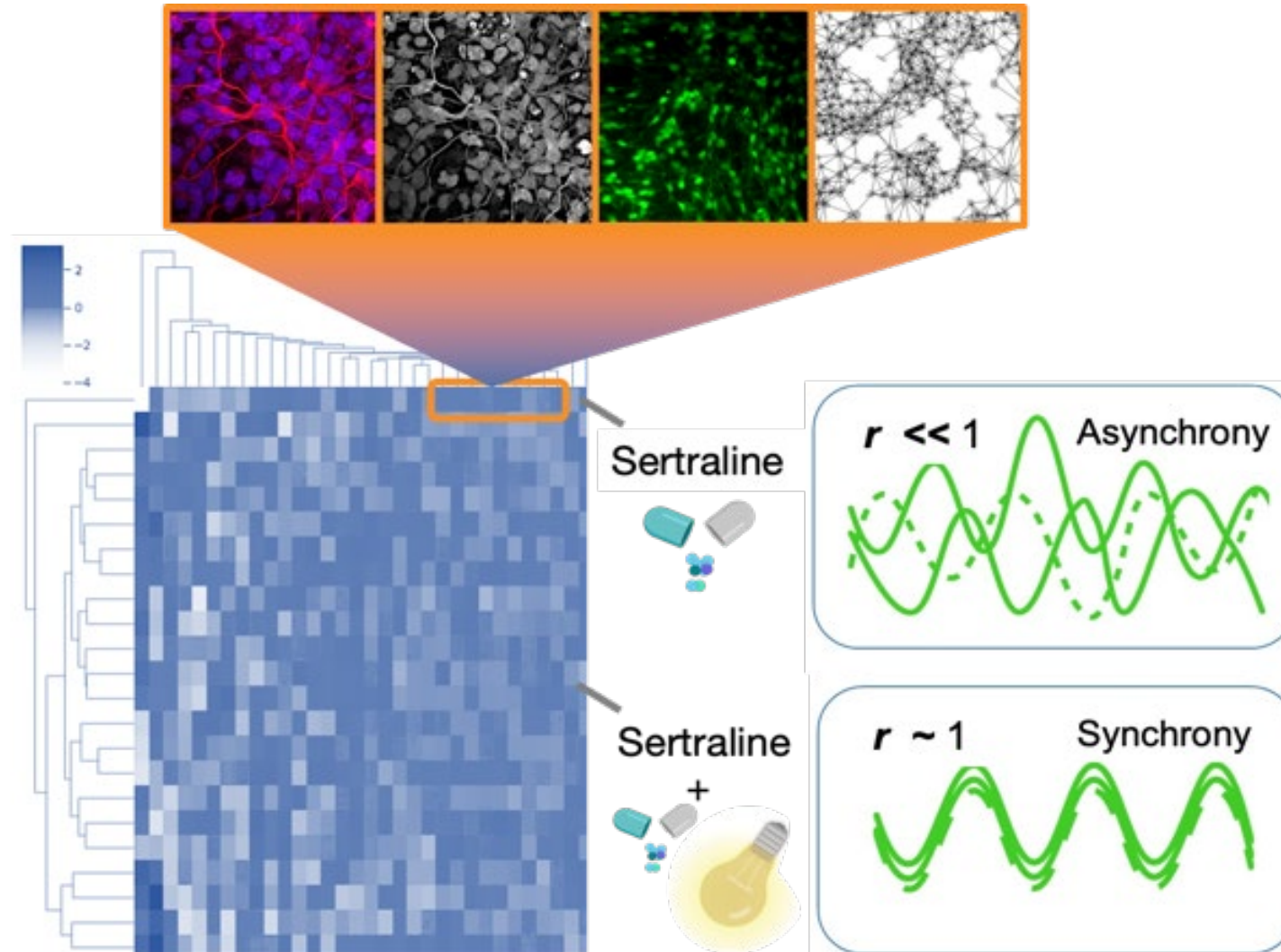


# MorphoChemo & *Electrical* Maturation into Neurons



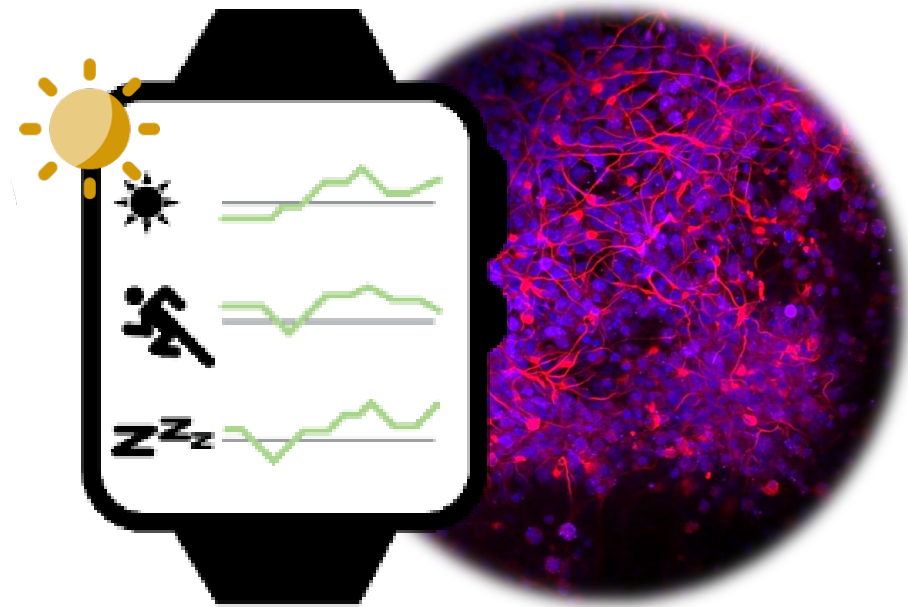
Credits: Sean Tritley; Courtney Rouse (SwRI); Arun Mahadevan

# Human brain models as nutrient and therapeutic screening tools



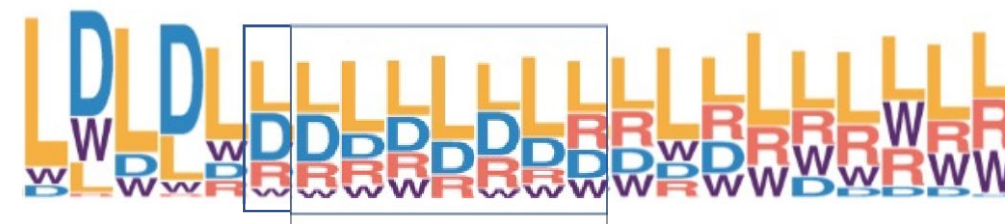
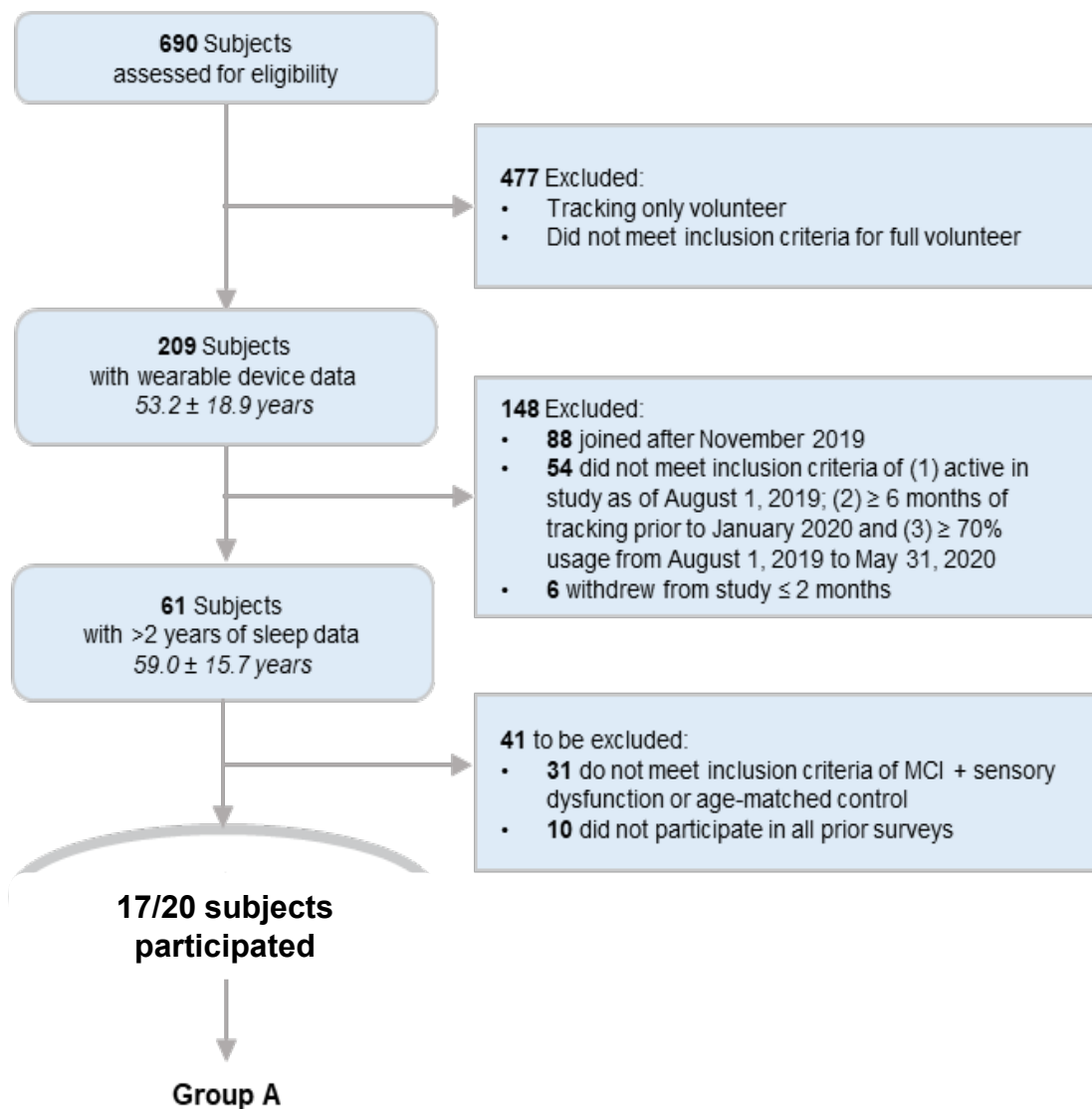


Computational analyses integrate + quantify  
environmental + neuronal features and behavior



Characterize neurosignatures of behavioral  
response to sensory stimulation

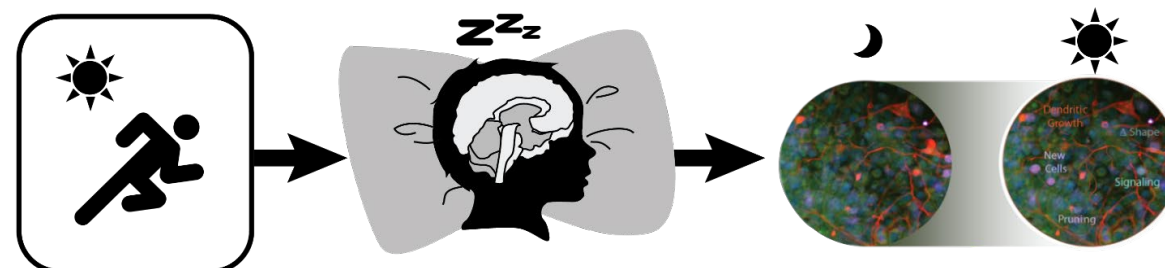




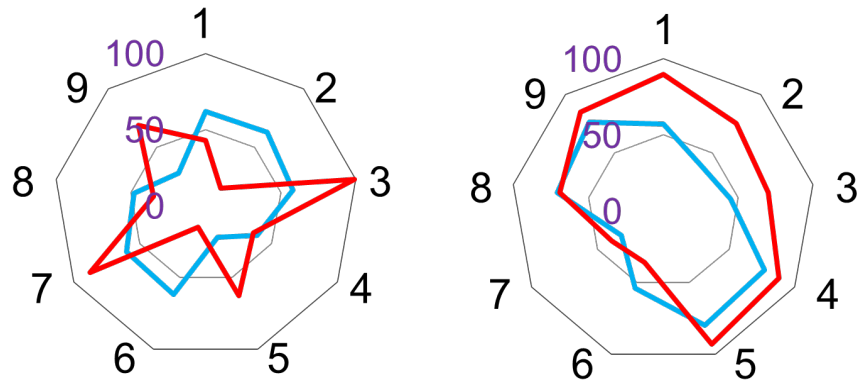
Participant A:  $< 25$  yrs



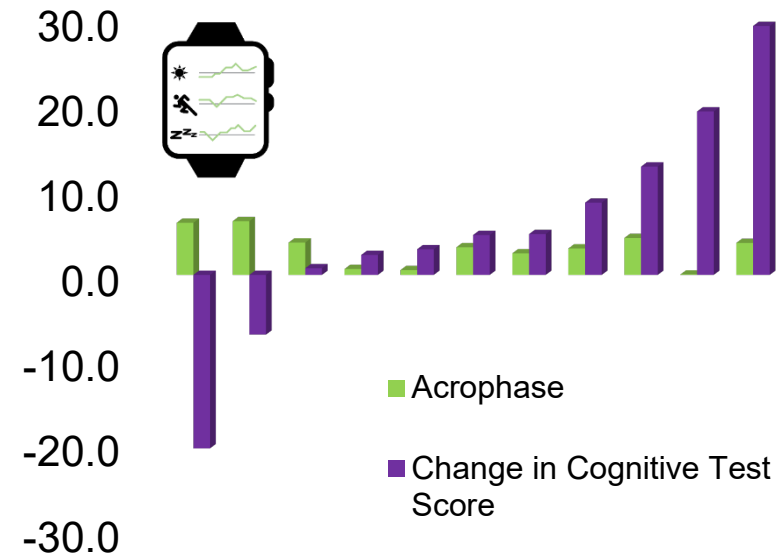
Participant B:  $> 51$  yrs



# Measuring An Individual's Neurosignature: Behavior-to-Molecular



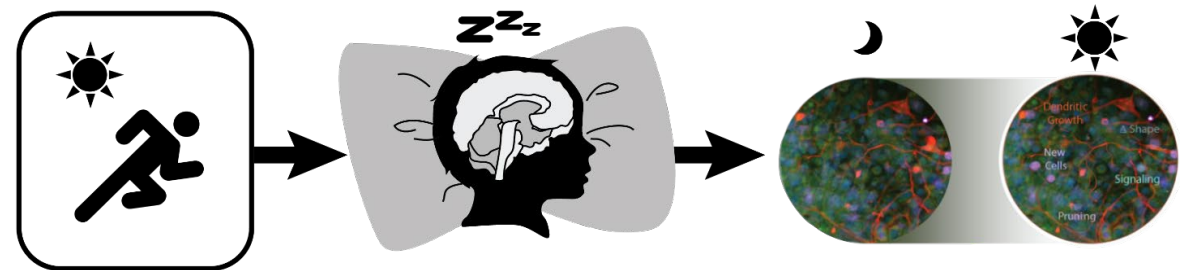
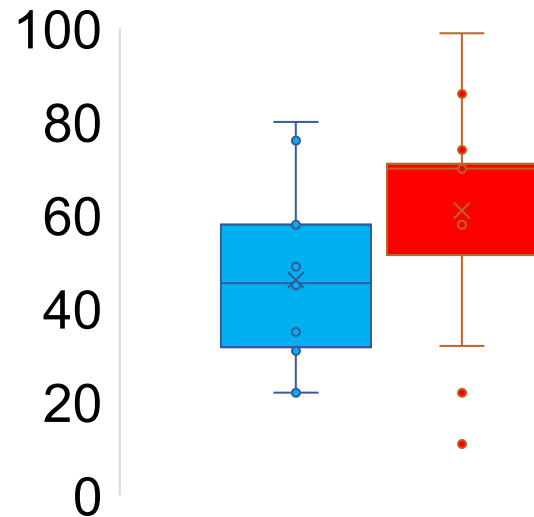
1. Instant Verbal Memory
2. Delayed Verbal Memory
3. Attention
4. Emotion Identification
5. Processing Speed
6. Flexible Thinking
7. Working Memory
8. Executive Function
9. Spatial Memory



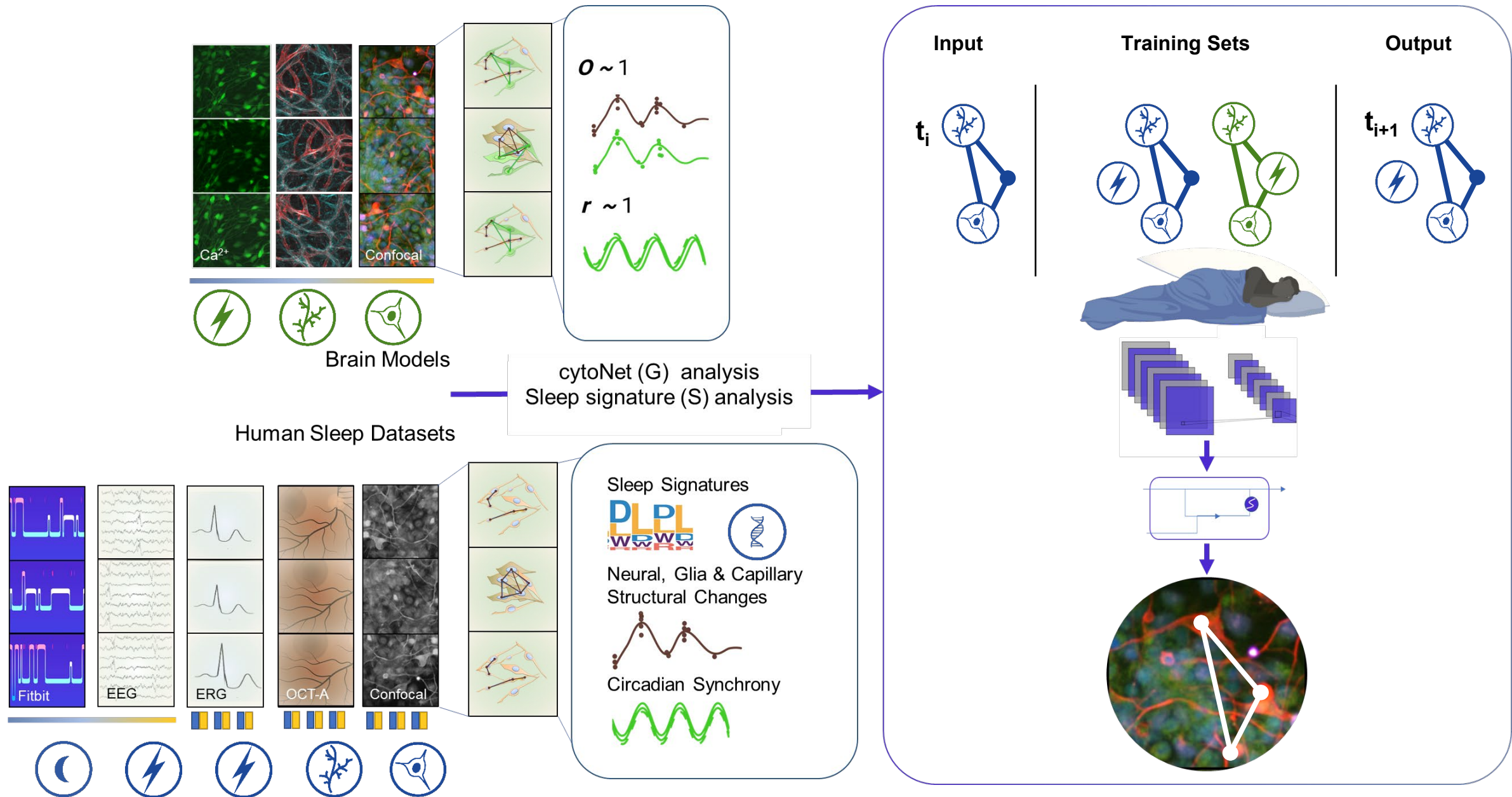
## Attention Score

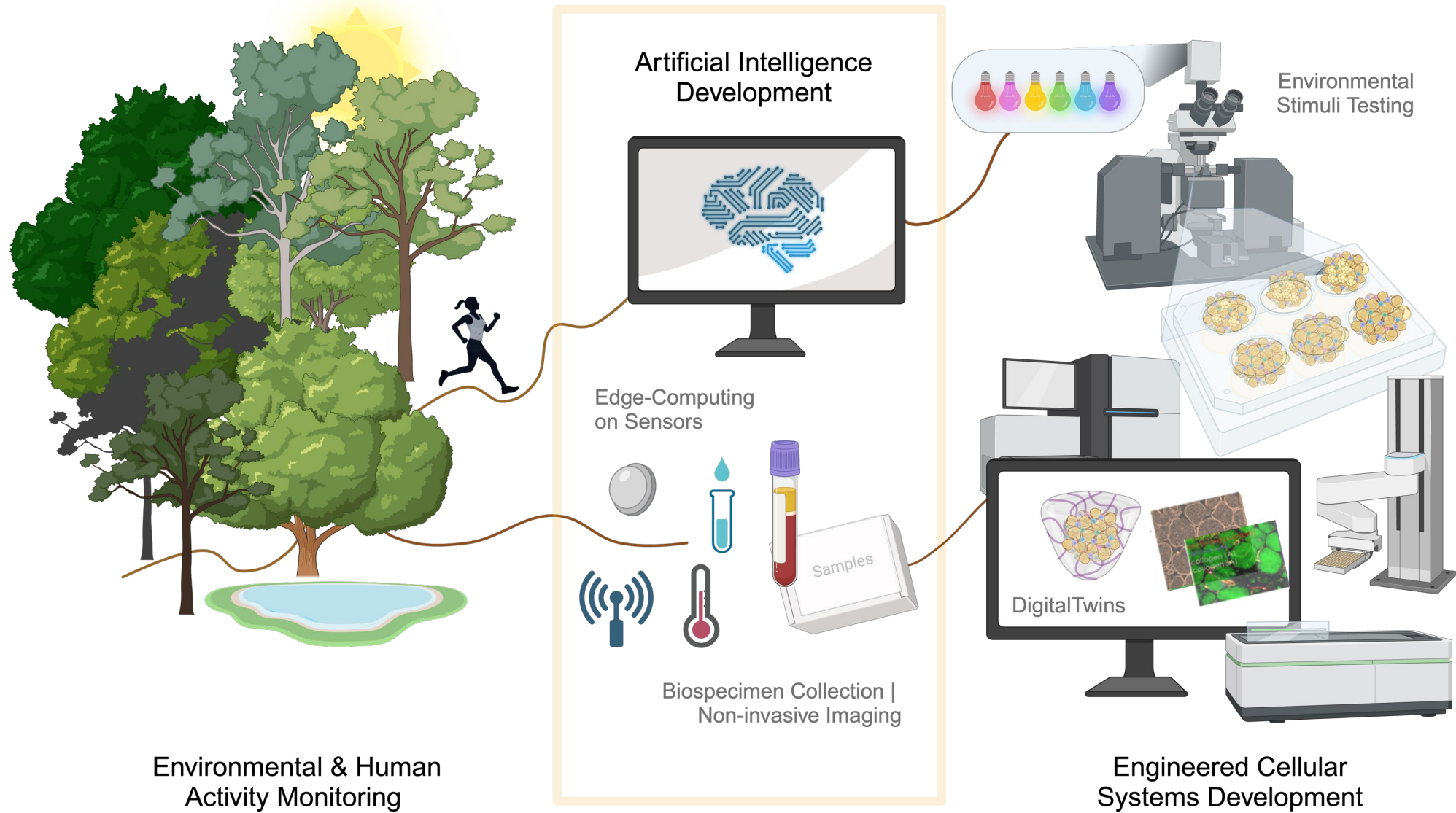
before (blue) | after (red)

60-day exercise intervention









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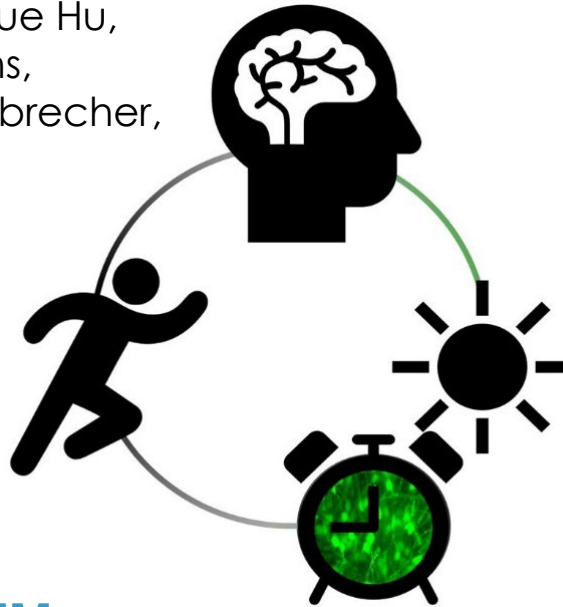
# Qutub Lab | UTSA | MATRIX AI

Miggy Frances Dumanjog (AI, computer vision)  
Christian Cruz (Data analysis & AI for trauma care)  
Sambit Panda (AI for trauma care)  
Sean Tritley (SCN models)  
David Hernandez Guzman (brain lymphatics)  
Lorinda Aspiras  
Mariam Dayeh

*Alumni:* Arun Mahadevan, Wendy Chenyue Hu,  
Byron Long, David Noren, Jennifer Dawkins,  
George Britton, Andre Schulz, Becky Zaunbrecher,  
Grace Ching



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## UT Southwestern

Ben Levi, Deb Carlson, Ryan Huebinger,  
Sneha Korlakunta, Alaa Hazime

## University of Michigan

Omer Berenfeld

## UT Health

Brian Eastridge, Mark Goldberg, Kumar Sharma, Jim Lechleiter

## UT MD Anderson Cancer Center

Steven Kornblau

## Institute for Regenerative Medicine, MATRIX, Stem Cell Core | UTSA

Eric Brey, Dhireesha Kudithipudi, Chris Navara,  
Jingyong Ye, Marc Feldman

## Southwest Research Institute (SwRI)

Courtney Rouse, David Chambers

## Texas Children's Hospital | Baylor College of Medicine

Francois St-Pierre, Terzah Horton

## Neurodevelopmental Stem Cell Biology | Sanford

Kevin Francis

## Quantu Project Volunteers

## Relevant Qutub Lab Publications

Mahadevan et al. (2022) PLOS Comp Bio  
Sanders et al. (2023) Nature Machine Intelligence  
Britton et al. (2019) Development  
Hu et al. (2019) Nature Biomedical Engineering  
Hu et al. (2018) BMC Bioinformatics  
Noren et al. (2016) Science Signaling

## Provisional Patent

"Method to Identify Patterns in Brain Activity," Qutub et al., 2024