

The Scalpel and the Algorithm: Navigating the Ethical Landscape of AI in Medical Writing

The rapid advancement of artificial intelligence (AI), particularly large language models (LLMs) like ChatGPT, has sparked excitement and apprehension within the medical community. While the allure of automated medical writing is undeniable, we must proceed cautiously, acknowledging the ethical implications of integrating these powerful tools into our practice. LLMs offer enticing possibilities, from streamlining literature reviews to drafting manuscripts, but their limitations and potential pitfalls demand careful consideration. As Fingerhut and Winter aptly warn, "AI in medical writing has limitations and dangers. The medical community must be aware of them."¹

One of the most significant concerns is the potential erosion of critical thinking. LLMs, trained on vast datasets, excel at mimicking human language and generating seemingly coherent text. However, they lack the nuanced understanding and contextual awareness crucial for scientific reasoning. As Sharma et al. points out, "AI tools cannot understand new information, generate insights, or perform deep analysis, which are essential for meaningful scientific discourse."² Over-reliance on these tools can lead to cognitive offloading, where individuals delegate critical thinking tasks to the algorithm, potentially hindering the development of essential analytical skills.⁴ This is particularly concerning for trainees and early-career professionals, who may become overly dependent on AI, bypassing the rigorous process of independent learning and critical evaluation.¹⁻³

Furthermore, LLMs' "black box" raises concerns about transparency and bias. The algorithms behind these models are often opaque, making it difficult to understand how a specific output is generated.³ This lack of transparency can obscure biases in the training data, leading to skewed interpretations or perpetuation of existing inequalities. Fingerhut and Winter highlight the risk of AI reproducing errors from "ill-constructed discussions" in previous literature, potentially amplifying misinformation.^[1] Moreover, the reliance on commercially driven AI platforms raises questions about data ownership, control, and the potential prioritization of profit over scientific integrity.¹

Despite these cautions, the potential benefits of AI in medical writing are substantial. LLMs can significantly expedite time-consuming tasks, freeing

up valuable time for clinicians and researchers. They can assist non-native English speakers with language refinement and ensure adherence to specific writing styles.² However, the responsible use of AI demands a thoughtful approach. Prompt engineering, the art of crafting effective instructions for LLMs, is crucial for medical professionals.⁵ By carefully designing prompts, we can guide the model toward desired outputs, mitigate bias, and encourage more nuanced responses. Meskó emphasizes the importance of specificity, context, and iterative refinement in prompt engineering, advocating for medical professionals to engage with and learn to control these tools actively.⁵

Transparency and ethical guidelines are paramount. The World Association of Medical Editors (WAME) and other leading organizations have issued recommendations regarding the use of AI in scholarly publications.¹⁻³ These guidelines emphasize the importance of disclosing AI assistance, acknowledging its limitations, and ensuring human oversight of all generated content. Chatbots cannot be listed as authors, as they lack the accountability and legal standing required for authorship.¹ Ultimately, human researchers remain responsible for the accuracy, integrity, and ethical implications of their work, regardless of AI assistance.

AI is not a replacement for human intellect but a powerful tool that can augment our capabilities. By embracing a balanced approach, prioritizing critical thinking, and adhering to ethical guidelines, we can harness the potential of AI to advance medical writing while safeguarding the integrity of scientific knowledge. The future of medical writing lies not in relinquishing control to algorithms but in fostering a collaborative partnership between the scalpel and the algorithm, where human expertise guides and governs the power of AI.

Disclosure

This editorial was written using advanced artificial intelligence (AI) language models. Perplexity.ai was used for research purposes, helping to gather relevant information, and Google's Gemini 1.5 Pro assisted in refining the writing to improve readability and coherence.

REFERENCES

1. Fingerhut A, Winter DC. Artificial intelligence and medical writing: where are we going? Br J Surg. 2023 ;110(8):883-884. <https://doi.org/10.1093/bjs/znad169>

2. Sharma A, Rao P, Ahmed MZ, Chaturvedi K. Artificial intelligence in scientific writing: opportunities and ethical considerations. *Int J Res Med Sci* 2025;13(1):532-542. <https://doi.org/10.18203/2320-6012.ijrms20244167>
3. Doyal AS, Sender D, Nanda M, Serrano RA. ChatGPT and Artificial Intelligence in Medical Writing: Concerns and Ethical Considerations. *Cureus*. 2023;15(8):e43292. <https://doi.org/10.7759/cureus.43292>
4. Gerlich M. AI Tools in Society: Impacts on Cognitive Offloading and the Future of Critical Thinking. *Societies* 2025;15(1):6. <https://doi.org/10.3390/soc15010006>
5. Meskó B. Prompt Engineering as an Important Emerging Skill for Medical Professionals. *J Med Internet Res* 2023;25:e50638. <https://doi.org/10.2196/50638>

Corresponding Authors:

Prof. Shams-un-Nisa Sadia
Department of Obstetrics & Gynecology
Islamic International Medical College-Trust, Riphah
International University Pakistan