

Artificial Intelligence Applications in Ophthalmology

Dr R Parthasarathi
Associate Professor
Department of Community Medicine
KAPVGMC

INTRODUCTION

- Ophthalmology AND integration of artificial intelligence (AI):
Various imaging modalities: Anterior segment photography, Fundus photography, OCT, High-resolution digital images.
- Provide rich datasets for training AI algorithms
- Enables precise diagnosis and monitoring of various ocular conditions.
- Retinal disease management heavily relies on image recognition.
- Cost-effective solution for screening and diagnosis.

INTRODUCTION

FDA AI ENABLED MEDICAL DEVICES APPROVAL

[https://www.fda.gov/medical-devices/software-medical-device-samd/
artificial-intelligence-enabled-medical-devices](https://www.fda.gov/medical-devices/software-medical-device-samd/artificial-intelligence-enabled-medical-devices)

AI for Diagnosis of Retinal Diseases

- **High Precision Diagnosis:** Accurately distinguishes retinal diseases, aiding optimal treatment.
- **Improved Access:** Cost-effective screening in underserved and high-volume settings.
- **Automated Analysis:** Detects subtle, invisible changes in retinal images.
- **Multiple Disease Detection:** Screens for various conditions from a single image.

AI for Diagnosis of Retinal Diseases



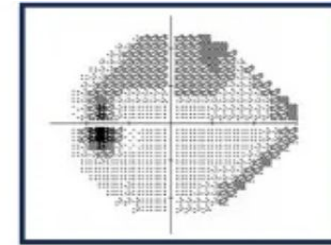
Anterior segment diseases



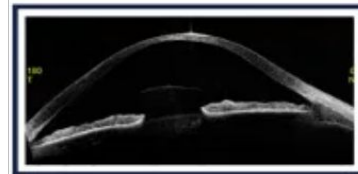
Posterior segment abnormalities



Fundus diseases



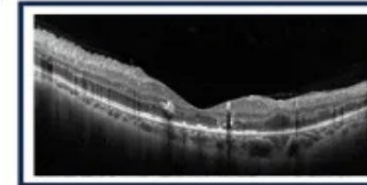
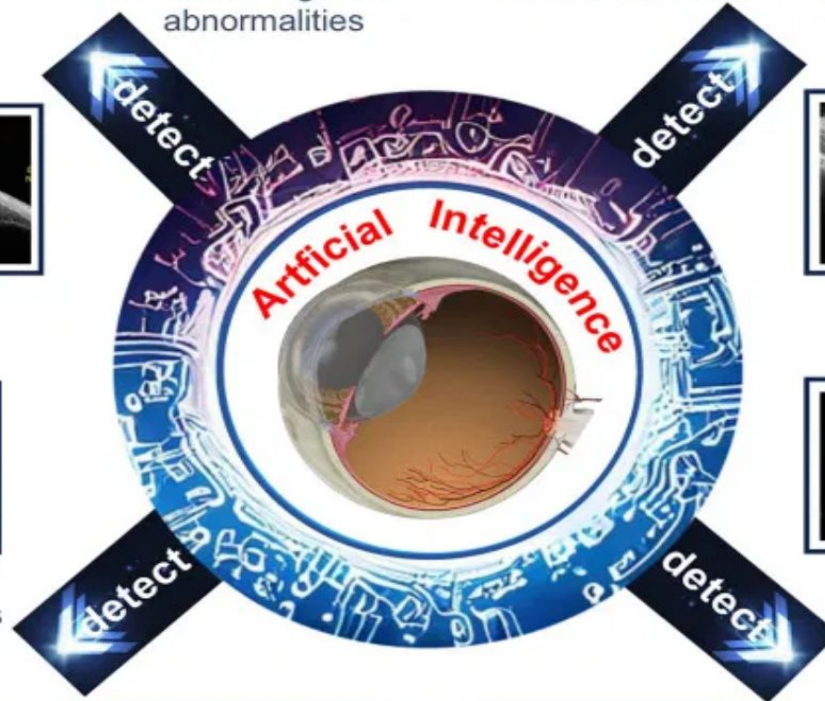
Visual field abnormalities



Anterior chamber abnormalities



Anterior chamber angle abnormalities



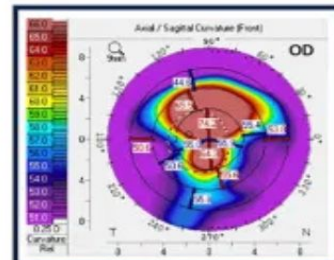
Macular diseases



Anterior segment abnormalities



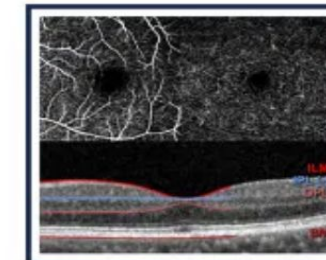
Retinal vascular diseases



Corneal abnormalities



Orbital diseases



Retinal and choroidal diseases

AI for Diagnosis of Retinal Diseases



| Diagnosis | Likelihood |
|--------------------------|------------|
| Normal | 0.000 |
| AMD | 0.000 |
| CSC | 0.000 |
| BRVO-CRVO | 0.000 |
| Macular hole | 0.000 |
| ERM | 0.995 |
| Diabetic retinopathy | 0.000 |
| Glaucoma | 0.000 |
| Myopic chorioretinopathy | 0.000 |
| Papilledema | 0.005 |
| Retinal pigment streak | 0.000 |
| Optic atrophy | 0.000 |

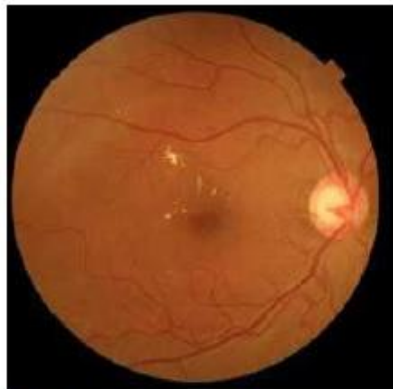
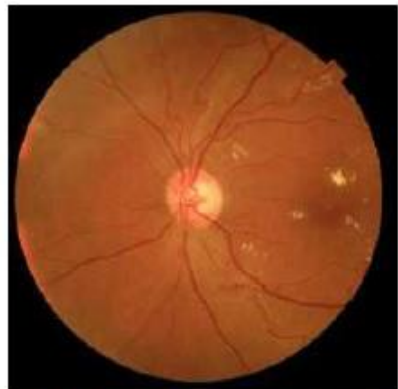
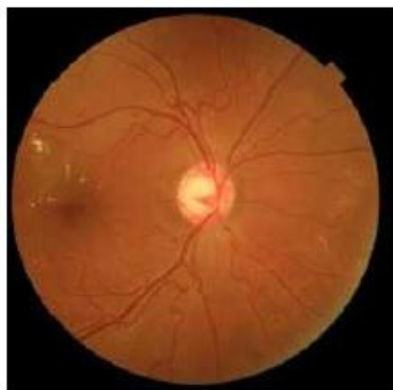
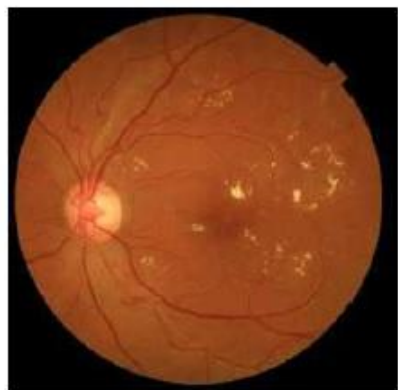
IDx-DR Analysis Report

| | |
|---------------------|--|
| Patient ID: | VTDR |
| IDx Submission ID: | 22-30 |
| Exam Analysis Date: | 2017-04-06 |
| Exam Analysis Time: | 11:09:15 PM |
| Exam Result: | Vision-threatening diabetic retinopathy detected |

IDx-DR

Approved by FDA in 2018

<https://www.healthvisors.com/en/idx-dr/>



IDx-DR

| Test | Indication | Population, age range, and frequency | Cost* |
|--------|------------------------------------|---|--|
| IDx-DR | Screening for diabetic retinopathy | Adults 22 years and older with diabetes mellitus who have no history of diabetic retinopathy† Annual unless retinopathy detected | Patient: \$101 Practice: The Topcon TRC-NW400 camera costs approximately \$15,000 to \$22,000 IDx-DR software (the fee charged per analyzed image is unavailable) |

*—Payment rate according to Healthcare Bluebook and Lombart Instrument Co.

†—This is the population indicated for IDx-DR software use. It is not indicated for diabetic retinopathy screening in general.

*—Payment rate according to Healthcare Bluebook and Lombart Instrument Co.

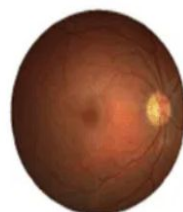
†—This is the population indicated for IDx-DR software use. It is not indicated for diabetic retinopathy screening in general.

| Patient Information | General Information |
|-----------------------------|---------------------------------------|
| Patient ID: p001 | Referring Location: Diab Clinic |
| Patient Name: Ryan Sangolli | Referring Provider: Dr. John Doe |
| Date of Birth: 1971-Apr-05 | EyeArt Control ID: 88178 |
| Gender: Male | Dilation Status: Not Dilated |
| Encounter ID: e001 | Exam Analysis Date: 2020-Feb-25 14:29 |

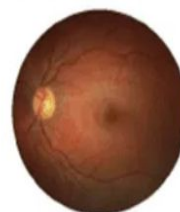
EyeArt Diabetic Retinopathy (DR) Exam Result Summary

Negative for more than mild DR in both eyes. Retest in 12 months.

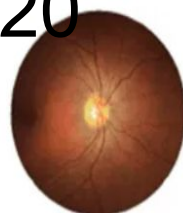
| Right Eye Results | Left Eye Results |
|---|---|
| mtmDR Result: Negative for more than mild DR | mtmDR Result: Negative for more than mild DR |
| vtDR Result: Negative for vision-threatening DR | vtDR Result: Negative for vision-threatening DR |



Macula Centered, Right Eye



Macula Centered, Left Eye



ONH Centered, Right Eye



ONH Centered, Left Eye

*Do not use the above thumbnail images for diagnostic purposes.

Notes

A negative result indicates a low risk for moderate non-proliferative DR, severe non-proliferative DR, proliferative DR, and clinically significant diabetic macular edema.

| Patient Information | General Information |
|----------------------------|---------------------------------------|
| Patient ID: p004 | Referring Location: Diab Clinic |
| Patient Name: Leon Wescott | Referring Provider: Dr. John Doe |
| Date of Birth: 1958-Jan-15 | EyeArt Control ID: 88181 |
| Gender: Male | Dilation Status: Not Dilated |
| Encounter ID: p004 | Exam Analysis Date: 2020-Feb-25 14:30 |

EyeArt Diabetic Retinopathy (DR) Exam Result Summary

Vision-threatening DR detected in both eyes. Refer to an eye care professional for evaluation (with preferential scheduling if possible).

| Right Eye Results | Left Eye Results |
|---|---|
| mtmDR Result: More than mild DR detected | mtmDR Result: More than mild DR detected |
| vtDR Result: Vision-threatening DR detected | vtDR Result: Vision-threatening DR detected |



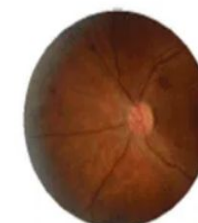
Macula Centered, Right Eye



Macula Centered, Left Eye



ONH Centered, Right Eye



ONH Centered, Left Eye

*Do not use the above thumbnail images for diagnostic purposes.

Notes

A positive result for vision-threatening diabetic retinopathy indicates a high risk for severe non-proliferative DR, proliferative DR, or clinically significant diabetic macular edema.

Approved by FDA in 2020

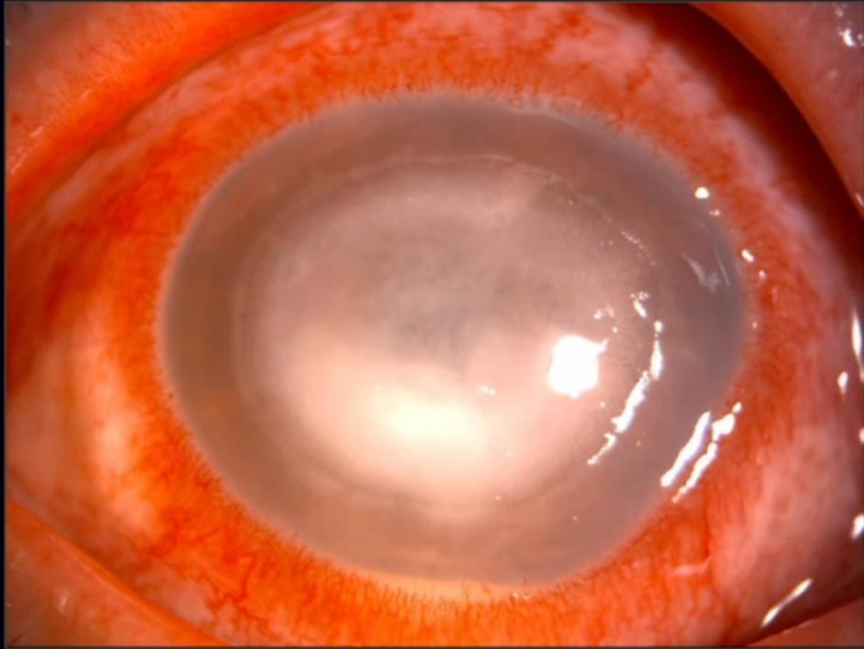
• <https://www.eyenuk.com/en/products/eyeart/>

AI for Diagnosis of Corneal Diseases

- **Distinguishes Infectious vs. Noninfectious:** Guides Antibiotics vs. steroids.
- **Identifies Pathogens:** Estimates causative organisms from slit-lamp images
- **Rapid Diagnosis:** Prevents complications-perforation, scarring, vision loss.
- **Detects Multiple Conditions:** Differentiates keratitis, pterygium, dry eye, and other anterior segment diseases.

AI for Diagnosis of Corneal Diseases

CorneAI



Analysis completed.

| Results | |
|-----------------------------|--|
| Normal | |
| Infectious keratitis | |
| Immunological keratitis | |
| Corneal scar | |
| Corneal deposits | |
| Bullous keratopathy | |
| Tumor | |
| Cataract/IOL | |
| Acute glaucoma | |

| Causative pathogen | |
|---------------------|--|
| Bacteria | |
| Fungi | |
| Acanthamoeba | |
| Herpes virus | |

AI for Diagnosis of Other Eye Diseases

- AMD:** Detects early signs, predicts progression, guides prevention
- ROP:** Accurately stages from retinal images, often surpassing humans
- Glaucoma:** Identifies optic nerve damage early using fundus and OCT
- Keratoconus:** Diagnoses clinical and subclinical forms, supporting personalized management.

AI for Diagnosis of Other Eye Diseases

- **Pediatric Ophthalmology:**

- Strabismus Detection
- Refractive Error Screening
- Reading Disability Risk
- Amblyopia Detection:

AI for Ophthalmic Surgery

- Robotic Surgery:** Improves precision and tremor control for delicate procedures like subretinal delivery.
- Cataract Surgery:** Offers real-time visual feedback during phacoemulsification.
- Preoperative Safety:** Verifies identity, laterality, and lens parameters using AI tools.
- Intraoperative Guidance:** Uses OCT-based AI to guide tool placement and enhance surgical accuracy.

AI for Ophthalmic Surgery






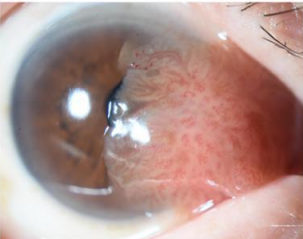
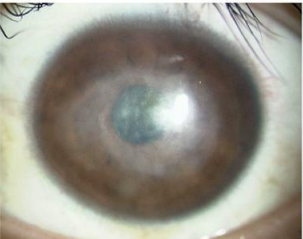


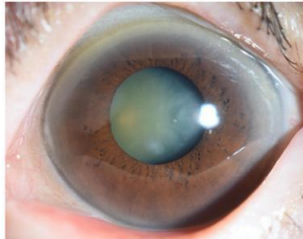
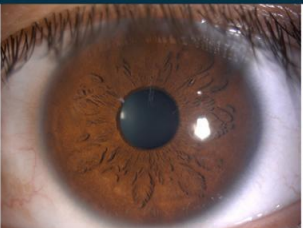
- Mobile camera is used to capture the image to recognize the parameters shown on the packages of planned, reserved, and backup lenses. The AI system verifies the accuracy of these parameters before surgery

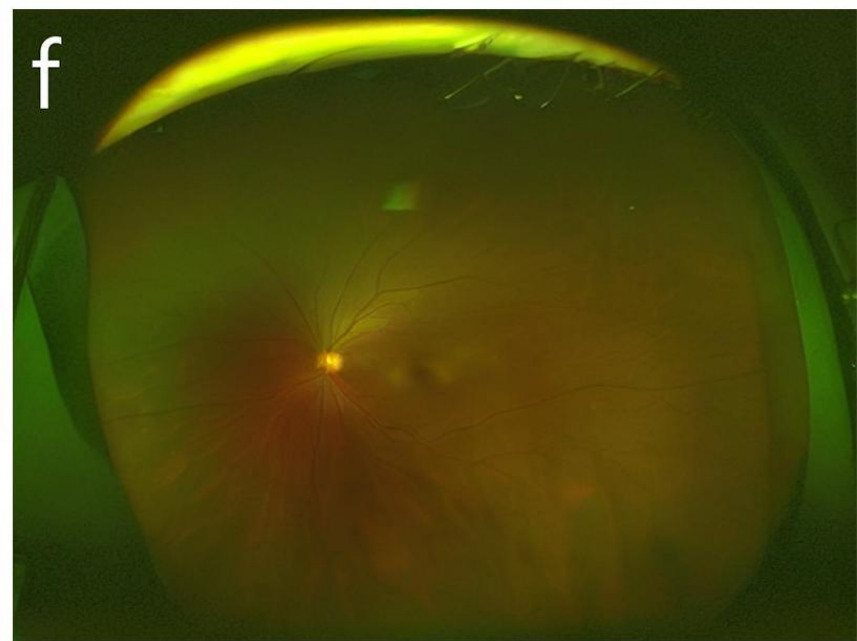
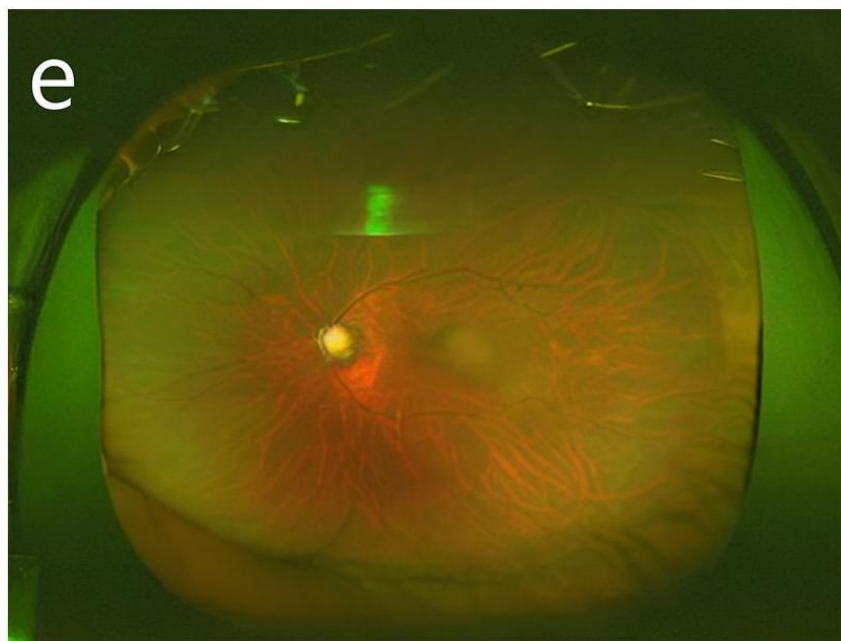
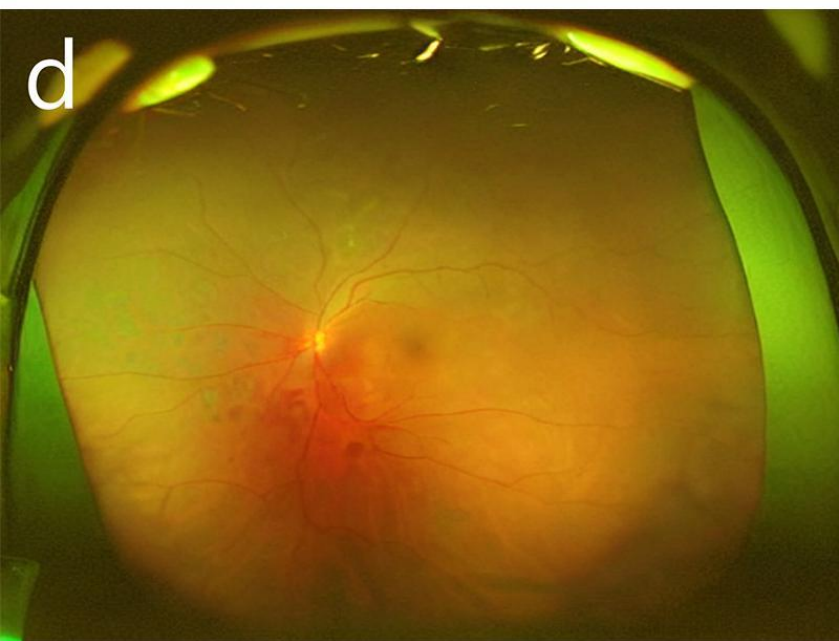
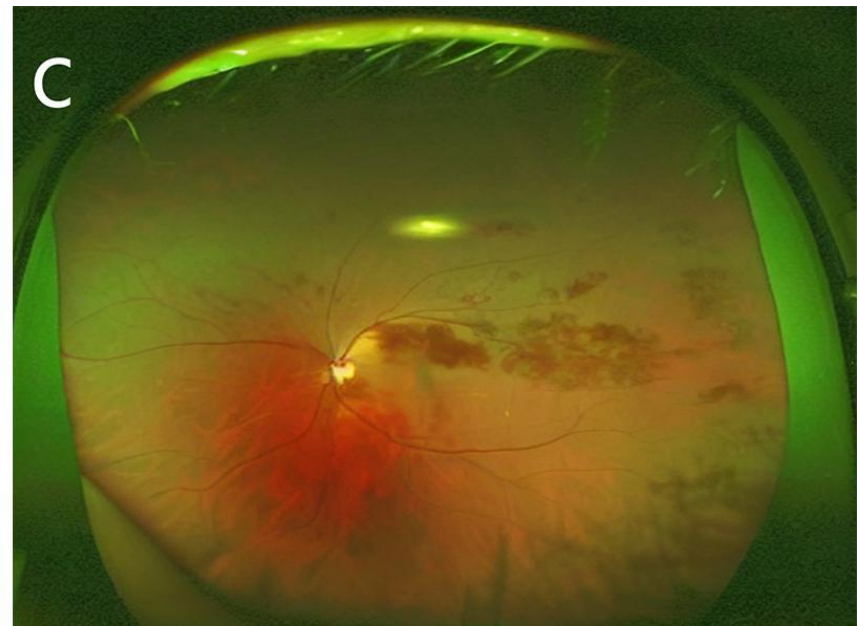
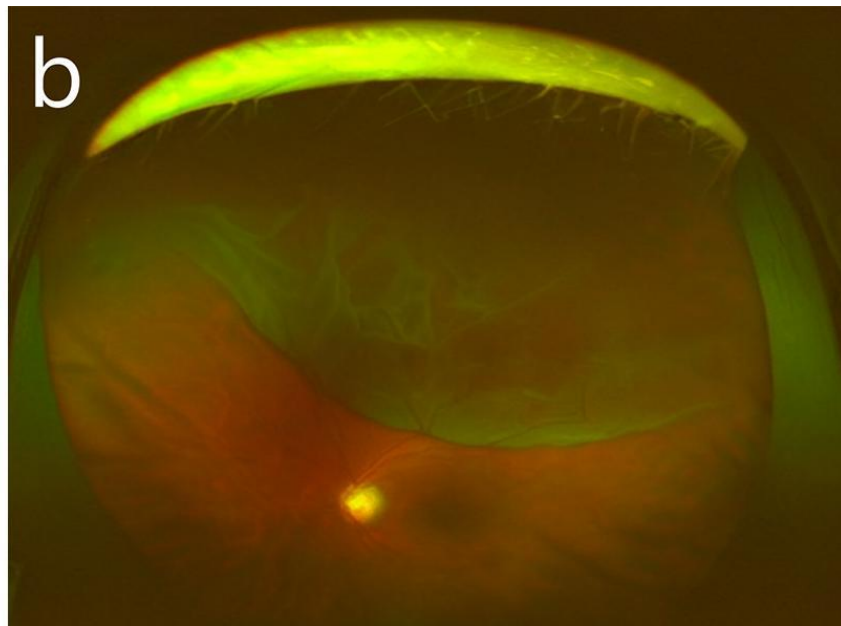
Smartphone Imaging and AI

- **Improves Access:** Enables remote diagnosis in underserved areas.
- **High-Quality Imaging:** Captures detailed views of the cornea, conjunctiva, and eyelid.
- **Fast & Accurate:** Delivers quick, reliable results for timely treatment.
- **Effective Triage:** Highlights high-risk conditions to guide clinical decisions

Smartphone Imaging and AI



| | | |
|---|--|---|
|  |  | Urgent Infectious keratitis Acute glaucoma |
|  |  | Semi-urgent Immunological keratitis Ocular surface tumor |
|  |  | Routine Corneal scar Corneal deposits Bullous keratopathy Cataract/IOL opacity |
|  |  | |
|  | | Observation Normal |



AI/ML Tech used in Ophthalmology:

1. **CNNs & Transformers/NLP** – Image classification, segmentation, and detection.
2. **GANs & Diffusion Models** – Image synthesis, augmentation, super-resolution.
3. **Transfer & Self-Supervised Learning** – Improve performance with limited labels.
4. **Multimodal Fusion** – Combining fundus, OCT, visual fields, and EHR data.
5. **Explainable AI (XAI)** – Grad-CAM, SHAP, and saliency maps for transparency.
6. **Classical ML (SVM, XGBoost)** – For structured data and risk prediction.
7. **Edge AI & Surgical Support** – On-device diagnosis and robotic guidance.

Limitations of AI:

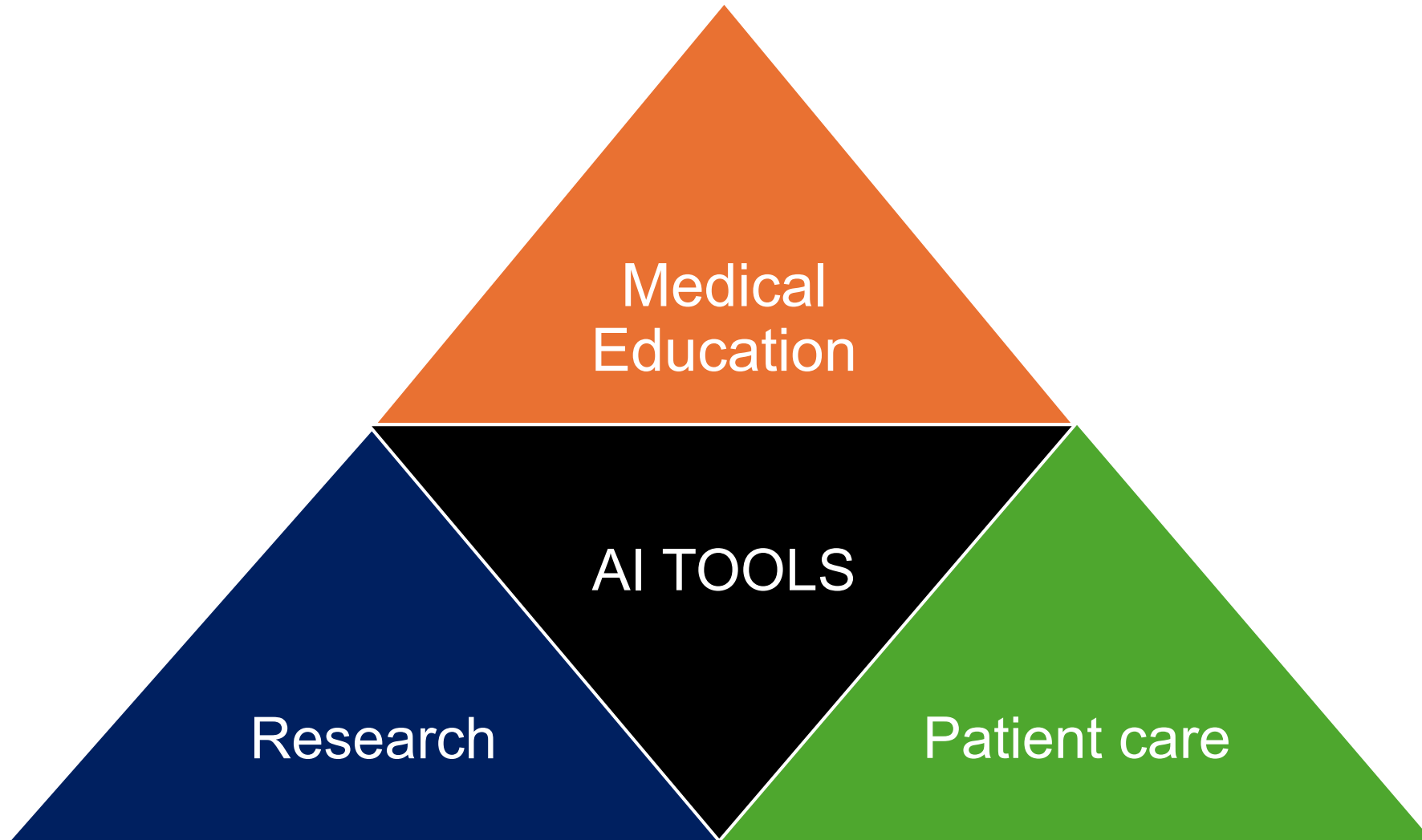
1. Data Privacy
2. Black-Box Phenomenon
3. Quality of images/ Heterogeneity of Images
4. Accessibility due to cost
5. Lack of comprehensive Regulations and Guidelines
6. Generalizability of Results/ External Validity
7. Job Loss to Humans?

References

1. Oshika T. Artificial Intelligence Applications in Ophthalmology. JMA J. 2025;8(1):66-75.
2. <https://www.aafp.org/pubs/afp/issues/2020/0301/p307.html>
3. <https://www.healthvisors.com/en/idx-dr/>
4. <https://www.healio.com/news/ophthalmology/20230404/ai-in-ophthalmology-from-code-to-clinic>
5. <https://pmc.ncbi.nlm.nih.gov/articles/PMC10793375/>
6. <https://www.eyenuk.com/en/>
7. <https://www.altris.ai/article/top-mobile-optometry-ophthalmology-apps-for-eye-care-specialists/>
8. <https://pmc.ncbi.nlm.nih.gov/articles/PMC11703125/>
9. <https://pmc.ncbi.nlm.nih.gov/articles/PMC12044197/>

AI for Eye Docs: Tools You Can't Ignore

AI Tools

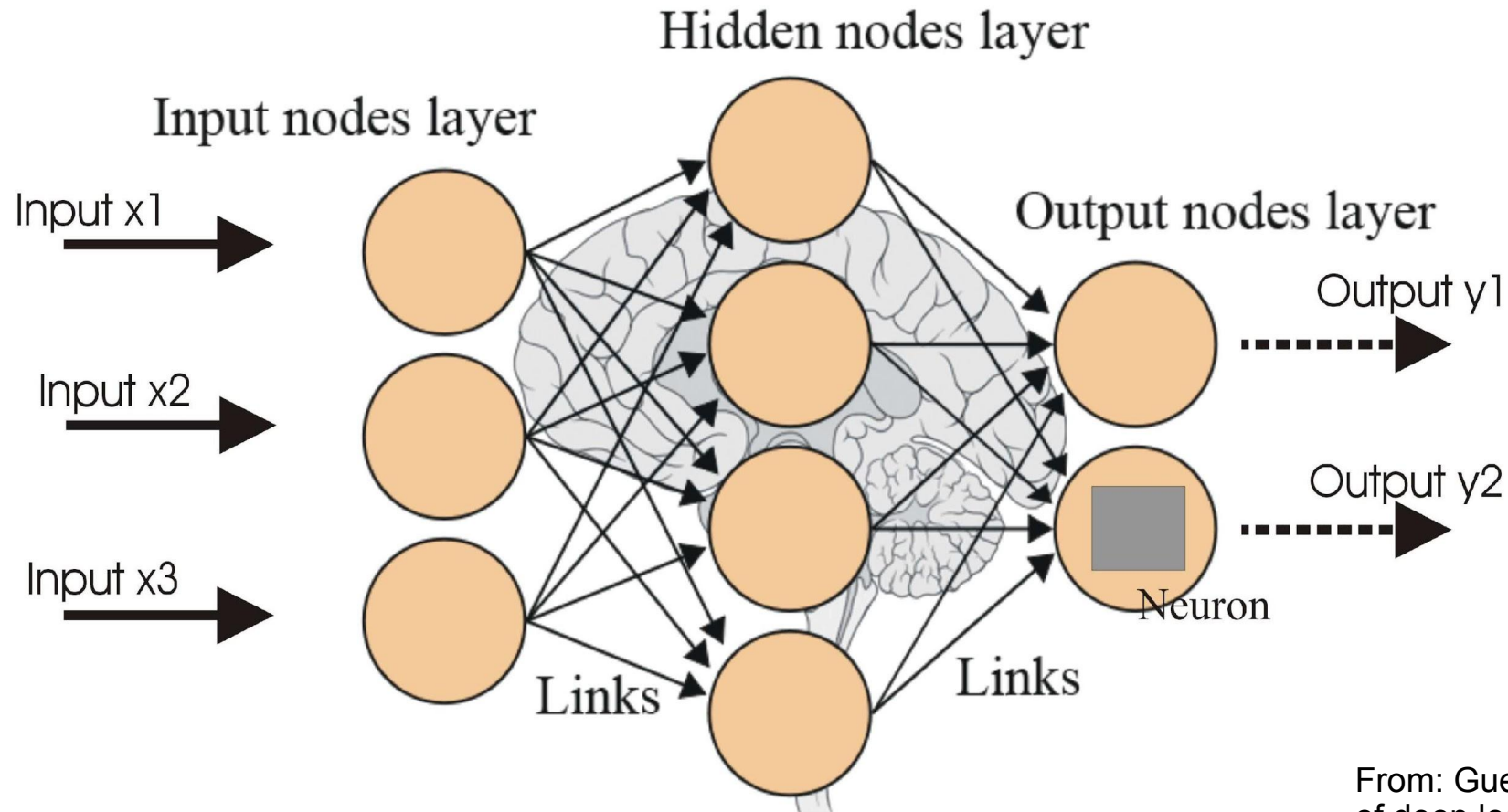


LARGE LANGUAGE MODELS

LARGE LANGUAGE MODELS

- **Language model** is built to process and understand a text input (prompt) and then generate a text output (response) accordingly.
- **Large:** Minimum of **10 billion parameters** used.
- **What are the LLMs you know?**

Neural Networks



From: Guest Blog. The evolution and core concepts of deep learning & neural networks [Internet]. Analytics Vidhya. 2020.

GPT

- **Gen AI:** Ability to generate text, images, videos etc that is creative and original & can generate human-like responses.
- **Pre-trained:** Trained on an extensive corpus of unlabeled text, to learn general linguistic patterns & acquire a wide knowledge base.
- **Transformer:** Neural Network Architecture, consists of an encoder and decoder part. They improve NLP by hardware acceleration & speeding-up AI computations.

Source:

<https://www.borealisai.com/research-blogs/a-high-level-overview-of-large-language-models/>

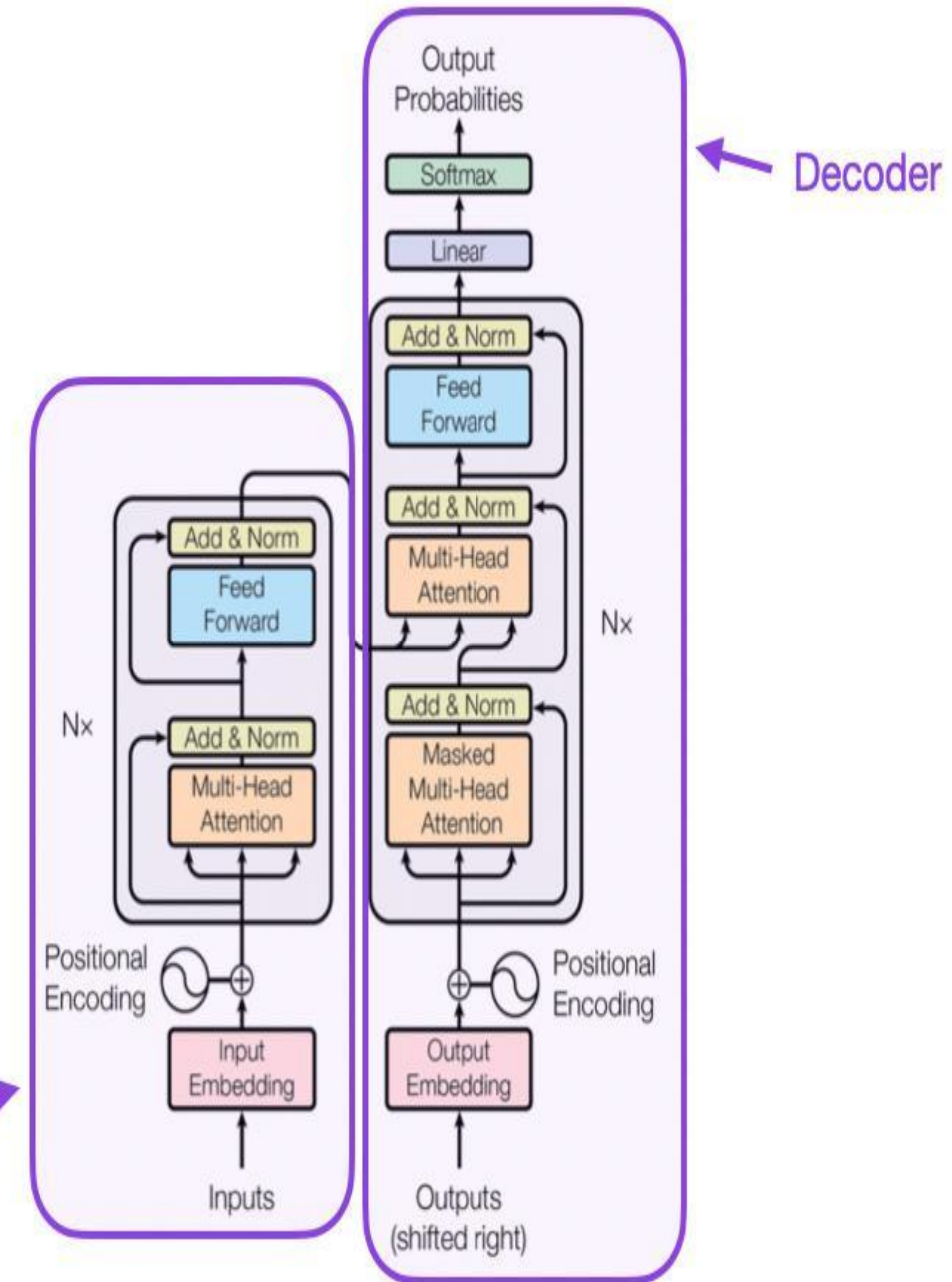
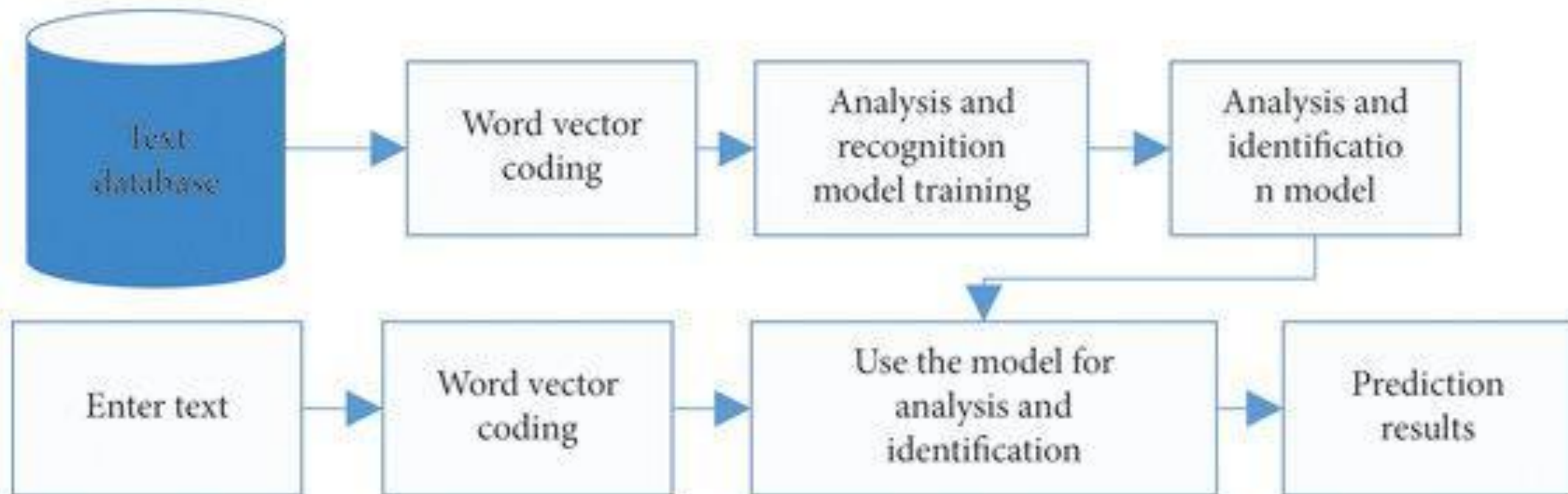


Figure 1: The Transformer - model architecture.

How do LLMs work?



AI in Research Ideation & Proposal Writing

Gemini Advanced

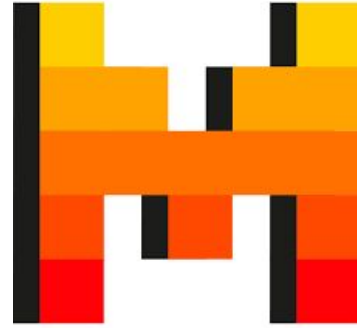


ChatGPT



Copilot

AI in Research Ideation & Proposal Writing



Grok

LLMs for Research

- ChatGPT
- Gemini
- Perplexity
- Claude
- DeepSeek
- Qwen
- Grok
- Mistral



Stand-alone AI tools

- **Elicit**
- **Consensus**
- **Research Rabbit**
- **SciSpace**
- **PaperPal**
- **Rdiscovery**



AI tools for Education

- Custom chatbots
- Tutors
- LearnLM
- NotebookLM



***AI is an effective supplement
for Doctors,
Not a substitute...***

THANK YOU...

***“English as the primary language for
programming”***

-Nvidia CEO Jensen Huang