

Neurosymbolic AI for scaling Computational Medical XR



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DE GENÈVE



Overview

- From VR and AI to Computational Medical XR
- Neurosymbolic AI for XR?
- Our approach

Midjourney prompt:

"a there and back again hobbit house looking from inside towards outside through the open door, cinematic, atmospheric lighting"

From computer graphics **systems** to virtual human **algorithms** to geometric computational **models**



VHDE++ Development Framework: Towards Extendible, Component Based VR/AR Simulation Engine Featuring Advanced Virtual Character Technologies

Michal Ponder^(*), George I. Koutsopoulos
Nadia Magnenat-Thalmann

estimated, midwives' salaries that will be established in other IT districts are just coming to life in the interactive real-time audio-video simulation field.

Significant investments combined with innovative research and development in the coming years will lead to the introduction of new medical laboratories and government based institutions, now widely available. We are reaching the point where the cost of these technologies will be within easy access to similar technologies providing comparable performance rates.

It seems that in the near future the success of a particular medical product or medical service will usually be a function of any certain quality or the number of individual qualities involved. Instead it will be based on the way or rather the art of combining these qualities in such a manner that they may reside in one consistent and灿烂的 framework. The complexity and the technologies that will let handle it will distinguish the stand-alone products and services in the medical field.

1. Introduction: The Demand

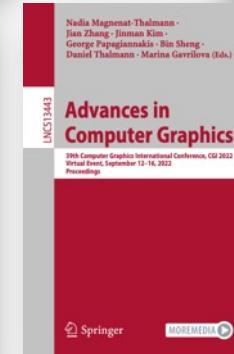
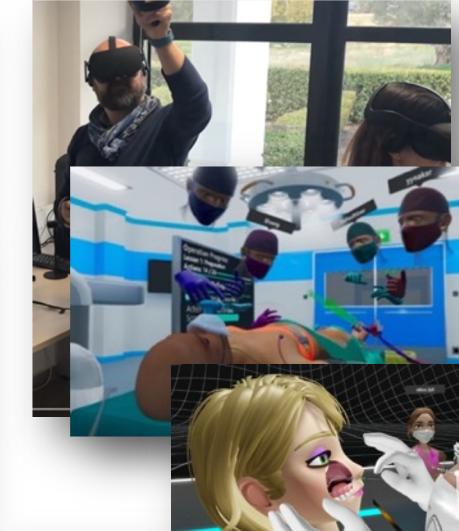
The very recent revolutionary advancements in computer graphics and in real-time virtual character animation have opened up new opportunities for VR/VAR systems and as particular on their sealed doors concern interactive video games. In the extremely short time since the first VR system was developed, it always seems, always faster and always more advanced. The VR technology has been developed to the point where it is now possible to create a virtual environment in systems to complete complexly using exponentially with the number of components involved. This brings up a whole new set of problems, such as: single input, multi-user, multi-threaded, multi-sensor, multi-camera, multi-time, multi-resolution application code. This explains the need for a common language for VR/VAR systems.

20 years was not far apart in time of performance, so it
was the question of complexity".

2. Motivation: Curbing Complexity

2.1. Common Experience: Facing Complexity

Carrying on proprietary research activities while being at the same time involved in demanding, tightly time development projects targeting concrete applications is a daily reality of many research groups. Overall complexity of the resulting applications reaches the levels that one can barely handle with the methodologies currently in hand.



Augmenting Human intellect?



Republished in abridged form in *Vistas in Information Handling*, Howerton and Weeks [Editors], Spartan Books, Washington, D.C., 1963, pp. 1-29, titled "A Conceptual Framework for the Augmentation of Man's Intellect."

October 1962

Let us consider an "augmented" architect at work. He sits at a working station that has a visual display screen some three feet on a side; this is his working surface, and is controlled by a computer (his "clerk") with which he can communicate by means of a small keyboard and various other devices.

He is designing a building. He has already dreamed up several basic layouts and structural forms, and is trying them out on the screen. The surveying data for the layout he is working on now have already been entered, and he has just coaxed the "clerk" to show him a perspective view of the steep hillside building site with the roadway above, symbolic representations of the various trees that are to remain on the lot, and the service tie points for the different utilities. The view occupies the left two-thirds of the screen. With a "pointer," he indicates two points of interest, moves his left hand rapidly over the keyboard, and the distance and elevation between the points indicated appear on the right-hand third of the screen.

AFOSR-3223

Summary Report

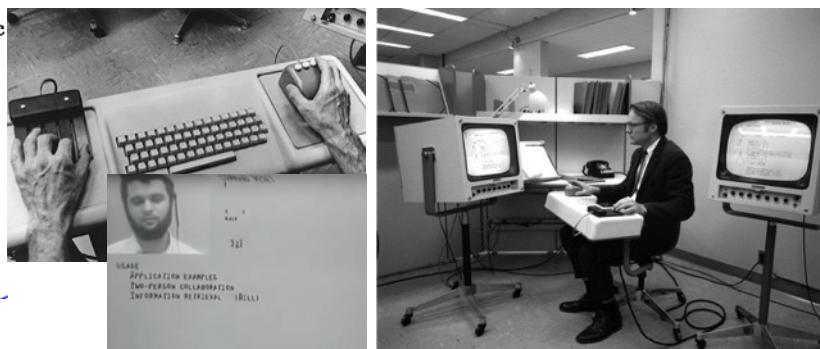
AUGMENTING HUMAN INTELLECT: A CONCEPTUAL FRAMEWORK

Prepared for:

DIRECTOR OF INFORMATION SCIENCES
AIR FORCE OFFICE OF SCIENTIFIC RESEARCH
WASHINGTON 25, D.C.

CONTRACT AF 49(638)-1024

By: D. C. Engelbart
SRI Project No. 3578



Engelbart, Douglas. "Augmenting human intellect: A conceptual framework. Summary report." *Stanford Research Institute*, on Contract AF 49, no. 638 (1962): 1024.

"Mother of all demos": <https://youtu.be/B6rKUf9DWRI>, 1968

Simulating the human brain?

Establishment of a new research program at Cornell Aeronautical Laboratory, Inc. is proposed, with the objective of designing, fabricating, and evaluating an electronic brain model, the photoperceptron. The proposed pilot model will be capable of "learning" responses to ordinary visual patterns, or forms. The system will employ a new theory of memory storage, (the theory of statistical separability), which permits the recognition of complex patterns with an efficiency far greater than that attainable by existing computers. Devices of this sort are expected ultimately to be capable of concept formation, language translation, collation of military intelligence, and the solution of problems through inductive logic.

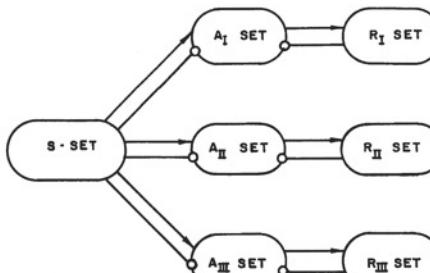
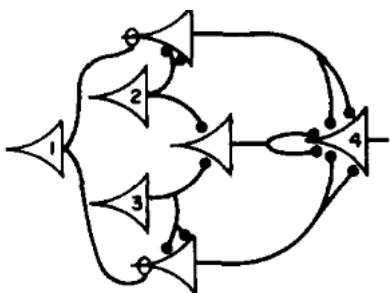


FIGURE 2
ORGANIZATION OF A PERCEPTRON WITH
THREE INDEPENDENT OUTPUT-SETS

CORNELL AERONAUTICAL LABORATORY, INC.
BUFFALO, N. Y.

REPORT NO. 85-460-1

THE PERCEPTRON
A PERCEIVING AND RECOGNIZING AUTOMATON
(PROJECT PARA)

January, 1957

Prepared by: Frank Rosenblatt

Frank Rosenblatt,
Project Engineer

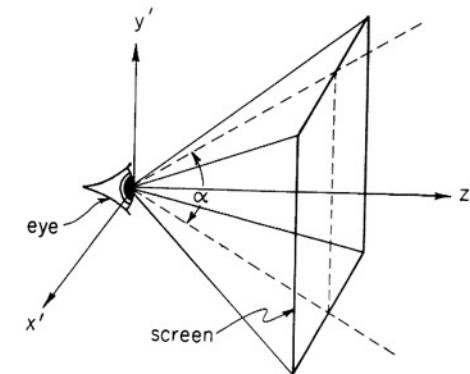
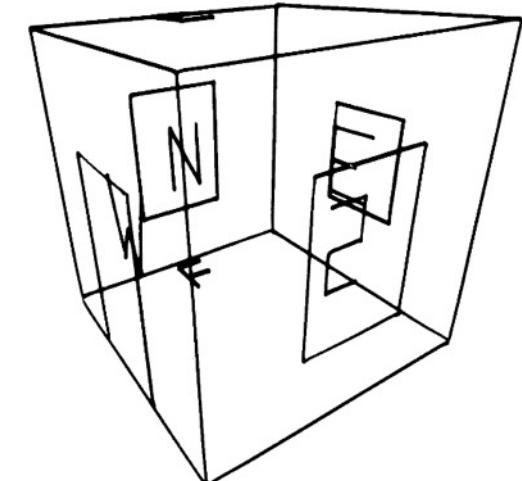
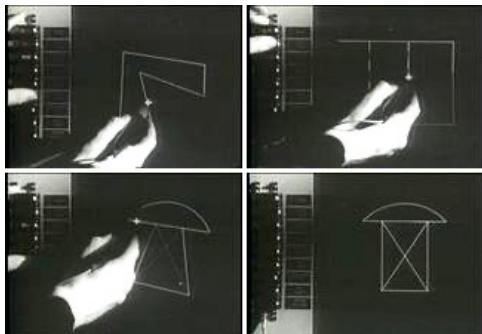
Approved by: Alexander Stieber

Alexander Stieber
Head, Air Defense Section
Systems Research Dept.

Approved by: Robert H. Shatz

Robert H. Shatz, Head
Systems Research Dept.

Head Mounted Displays and natural user interaction?

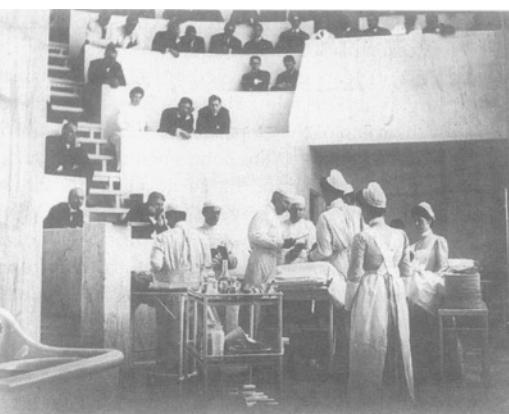


The sketchpad demo: https://youtu.be/6orsmFndx_o, 1963

Sutherland, I. E. A head-mounted three dimensional display. *AFIPS Fall Joint Computing Conference* 757–764 (1968)

doi:10.1145/1476589.1476686. <https://youtu.be/eVUgfUvP4uk>

Modern medical training apprenticeship era (residency model)



1878

Dr. W. Halsted, after finishing medical school in Yale, went to Europe to study with the finest doctors of his time, including Dr. Kölliker in Switzerland and Dr. Braun in Germany

1890

Halsted introduces staggering contributions to surgery while at J. Hopkins and a new formal training model

**See one, do
one, teach
one**

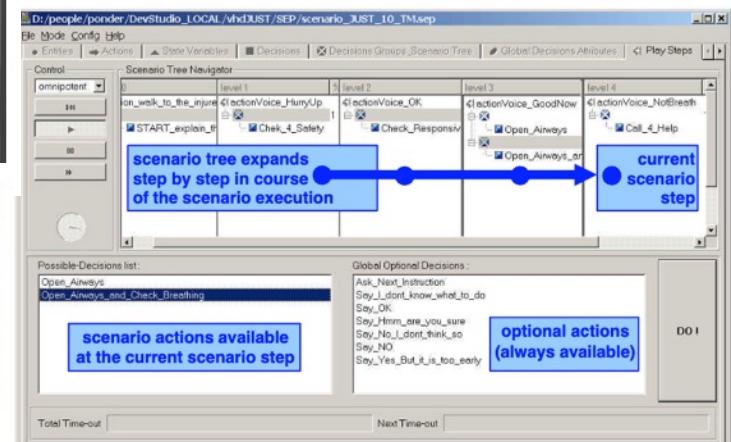
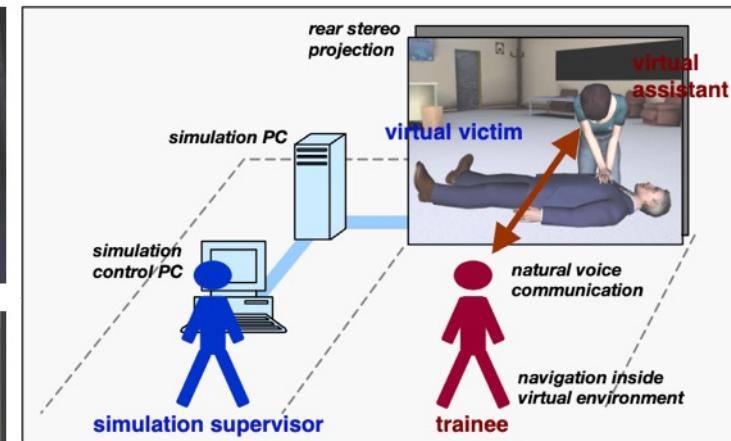
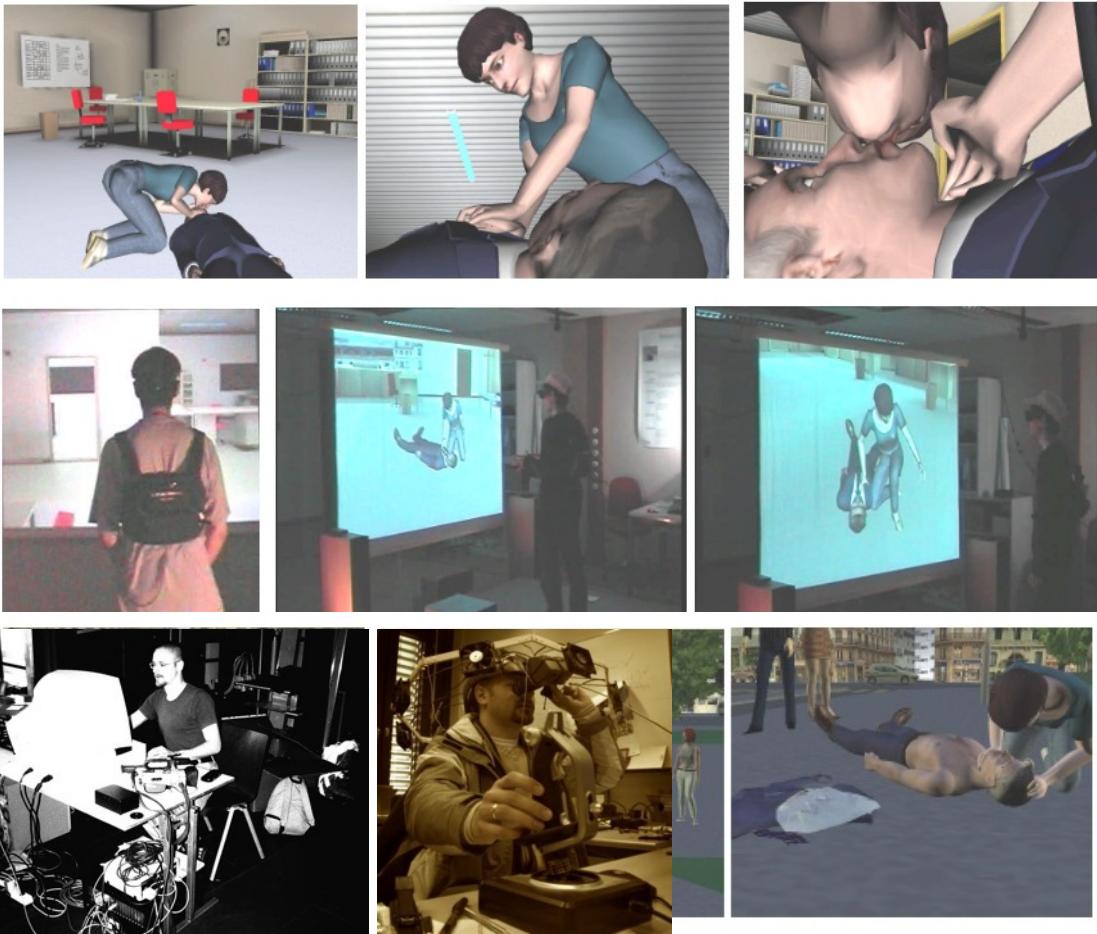
Medical residency model:
master – apprentice training
program till today

Augmented Reality for education?



Papagiannakis, G. et al. Mixing Virtual and Real scenes in the site of ancient Pompeii. *Computer Animation and Virtual Worlds*, John Wiley and Sons Ltd 16, 11–24 (2005)

Virtual Reality for medical training?



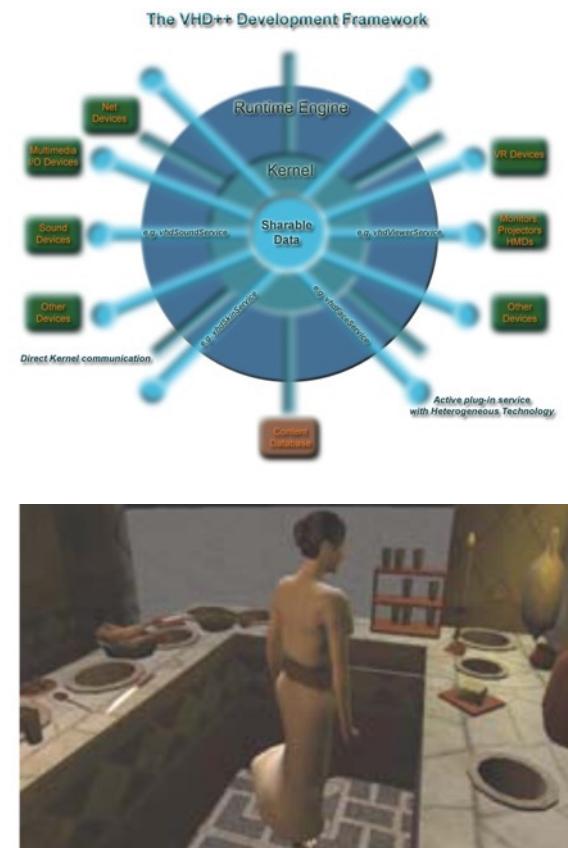
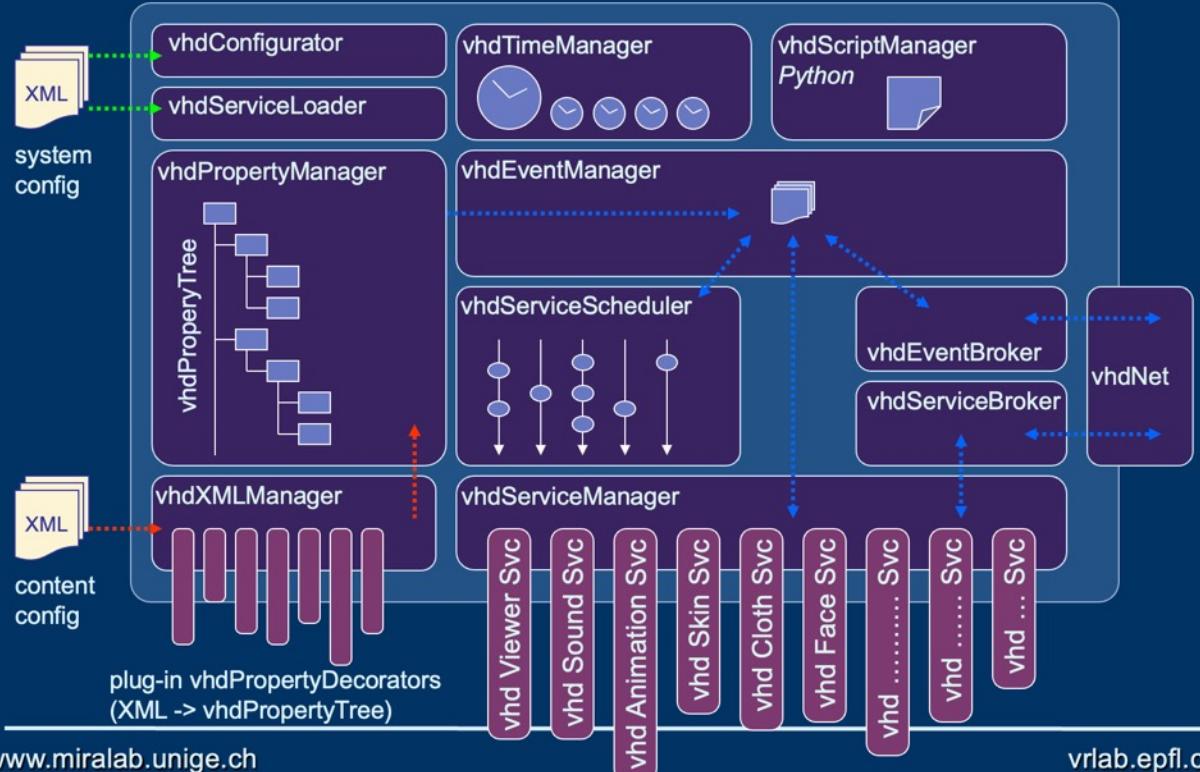
Michal Ponder, Bruno Herbelin, Tom Molet, Sébastien Schertenlieb, Branislav Ulicny, **George Papagiannakis**, Nadia Magnenat-Thalmann, and Daniel Thalmann. 2003. Immersive VR decision training: telling interactive stories featuring advanced virtual human simulation technologies.
DOI:<https://doi.org/10.1145/769953.769965>

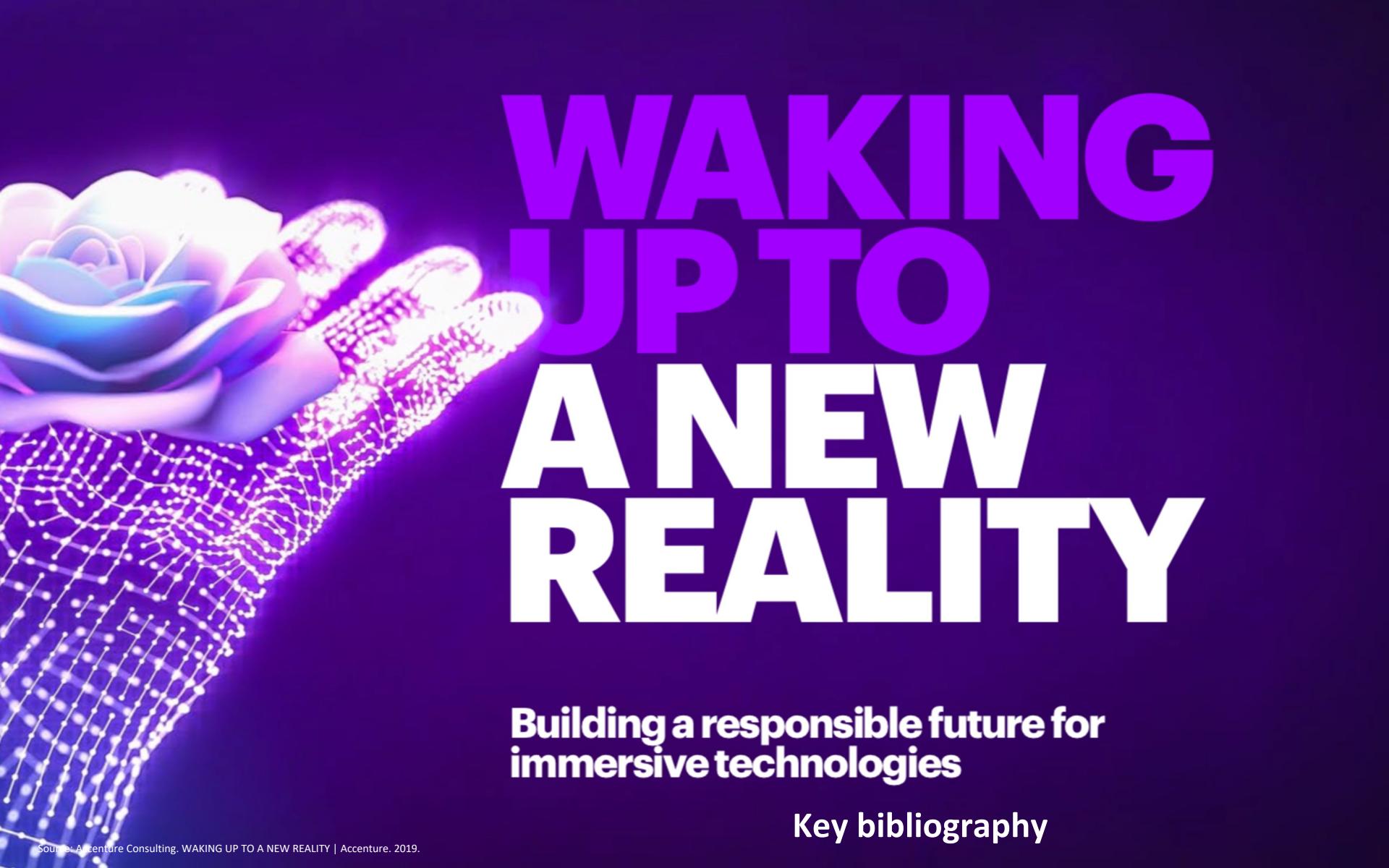
Authoring systems for VR/AR virtual human simulations?

MIRALab
Where Research means Creativity



vhdRuntimeEngine





WAKING UP TO A NEW REALITY

**Building a responsible future for
immersive technologies**

Key bibliography

"A deeply human, highly personal, and beautifully told story."

—DAVE EGGERS

JARON LANIER

Author of the *New York Times* bestseller *You Are Not a Gadget*

Dawn of the New Everything

ENCOUNTERS
with REALITY
and VIRTUAL
REALITY



PICADOR

OCULUS, FACEBOOK,
AND THE REVOLUTION
THAT SWEPT
VIRTUAL REALITY

THE HISTORY OF THE FUTURE



WITH A FOREWORD
BY ERNEST CLINE,
AUTHOR OF
READY PLAYER ONE

BLAKE J. HARRIS

AUTHOR OF *CONSOLE WARS*

Computer Science Workbench

Editor: Tosiya L. Kunii

Nadia Magnenat Thalmann

Daniel Thalmann

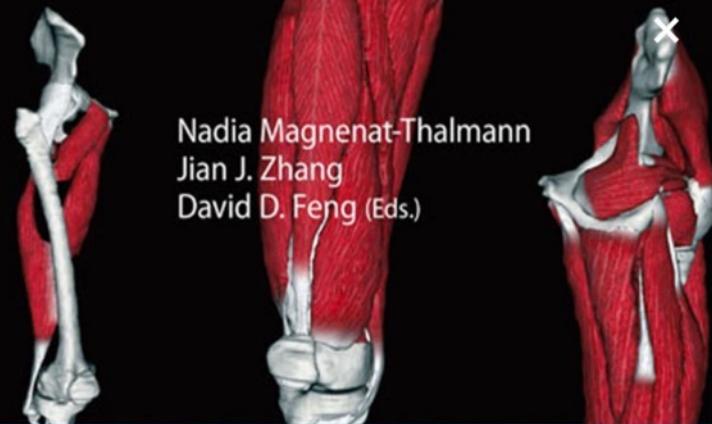
Computer Animation

Theory and Practice

Second Revised Edition



Springer-Verlag



Nadia Magnenat-Thalmann
Jian J. Zhang
David D. Feng (Eds.)

Recent Advances in the 3D Physiological Human

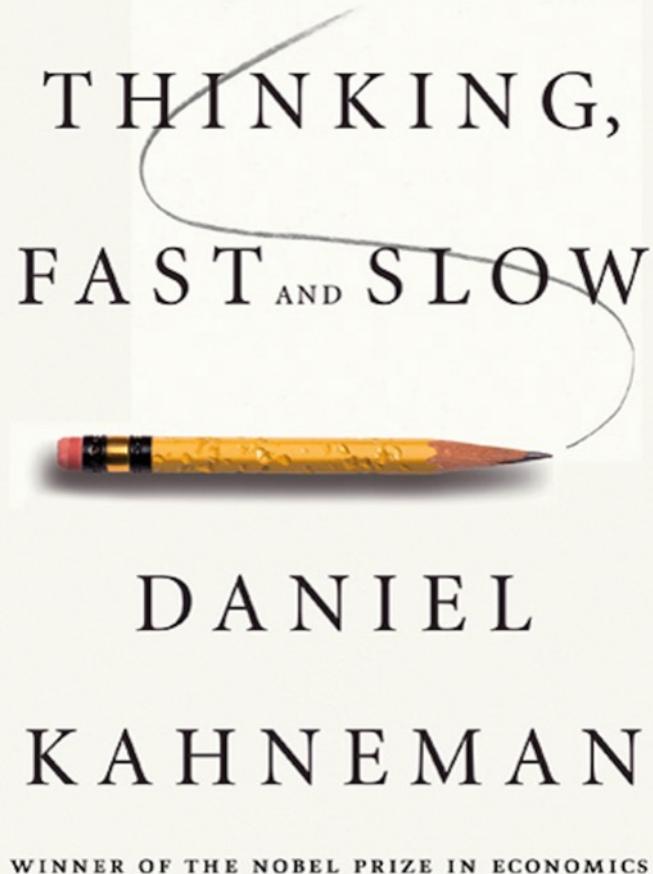
 Springer

Virtual Human Research

Prof. Nadia Magnenat-Thalmann established the field of virtual human research in 1977



System 1 and System 2



“...as far as I’m concerned, **System 1** certainly knows language...

System 2 does involve certain **manipulation of symbols**”. *D. Kahneman, AAAI-2020*

which would in principle be modelled by deep learning and symbolic reasoning, respectively! [Sheth et al 2023]

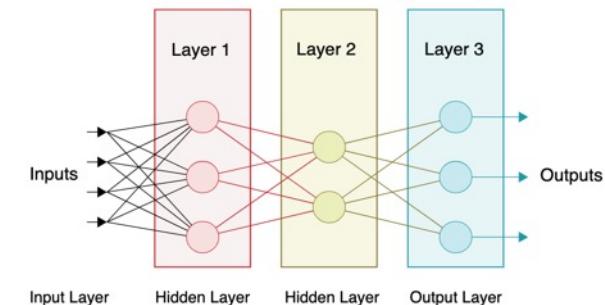
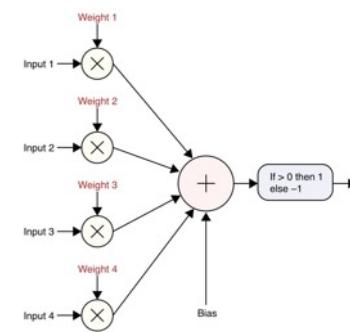
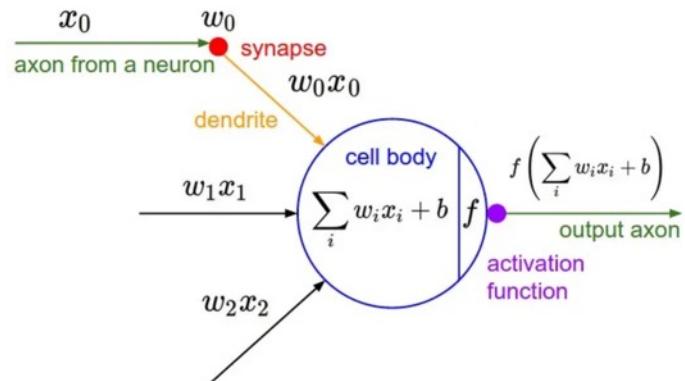
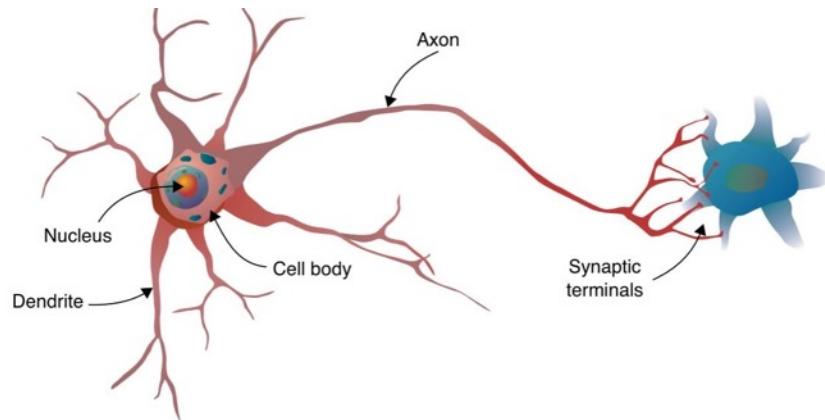
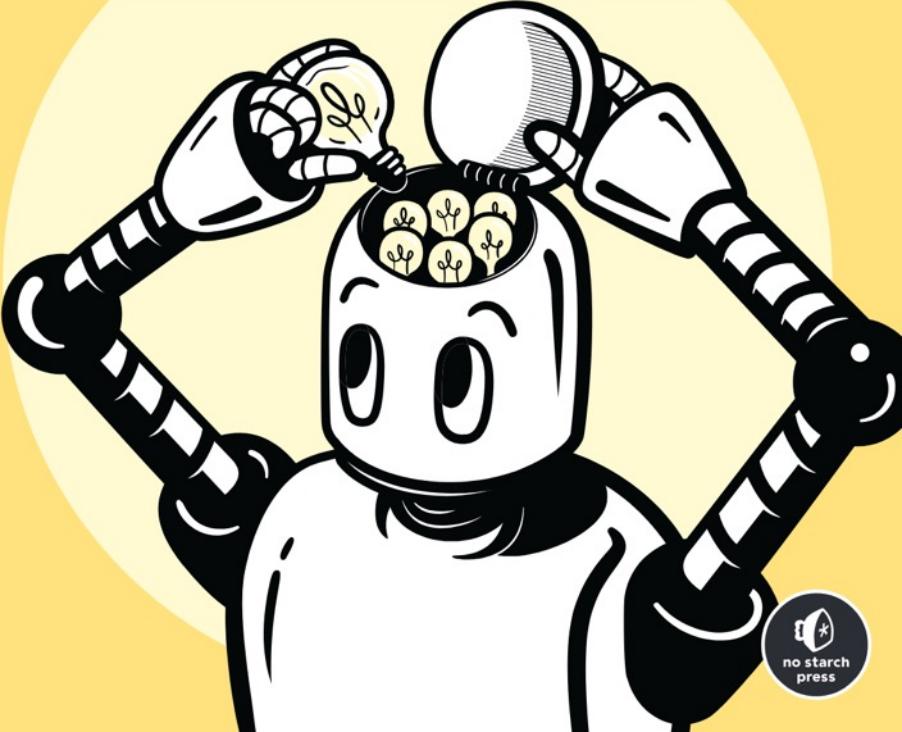
Sheth, A., Roy, K. & Gaur, M.
Neurosymbolic AI - Why, What, and How. *arXiv* (2023)
doi:10.48550/arxiv.2305.00813.

FULL COLOR

DEEP LEARNING

A VISUAL APPROACH

ANDREW GLASSNER



DEEP MEDICINE

HOW ARTIFICIAL
INTELLIGENCE
CAN MAKE
HEALTHCARE
HUMAN AGAIN

ERIC TOPOL

With a foreword by
ABRAHAM VERGHESE,
author of *Cutting for Stone*



Three components of the deep medicine model



About ▾ Committees ▾ Program ▾ Venue/Travel ▾ Sponsors & Exhibitors ▾ Registration Access Accepted Papers



Conference Theme

Deep Medicine and AI for Health

Important Information

- **Inception of 8-page papers in IEEE JBHI format:** 8-page J-BHI format papers will be evaluated by JBHI (IF: 7.7) EiC and a selected subset of the accepted papers will be published in JBHI Special Issue.
- **Opportunities for regular conference papers (4-8 pages) and 1-page abstracts**
- **Open Access:** BHI 2024 proudly features Open-Access publishing for accepted regular papers.
- **Accepted regular conference papers for publishing in IEEE Xplore**
- **Open Double-Blind Review for high quality:** BHI 2024 will use openreview for establishing open review processes. [Learn more!](#)
- **Best paper awards for recognizing innovative and excellence research**
- **Continuing Medicine Education (CME) credits for clinicians**
- **Travel Awards:** for undergraduate and graduate students from US Institutions are available through a National Science Foundation (NSF) grant.
- **Data competition and awards for students**

A close-up profile of a woman's face, colored in shades of purple and blue. Superimposed on her head is a wireframe model of a human brain, showing the internal structure and pathways. The background is a dark, solid purple.

COMING TO OUR SENSES

**The world of immersive technology
is no longer hype—we're living it.**

AI needs XR and XR needs AI

Metaverse* = Internet(3D)^{AI} ←→ XR

The Rules

Rule #1. There is only one Metaverse.

Rule #2: The Metaverse is for everyone.

Rule #3: Nobody controls the Metaverse.

Rule #4: The Metaverse is open.

Rule #5: The Metaverse is hardware-independent.

Rule #6: The Metaverse is a Network.

Rule #7: The Metaverse is the Internet.

* A. Graylin, HarvardXR, April 2023

** Tony Parisi, <https://medium.com/meta-verses/the-seven-rules-of-the-metaverse-7d4e06fa864c>

Stable Diffusion prompt:
“a girl in VR glasses experiencing metaverse worlds”



What about ‘Spatial Computing’?



START

WIRED 31.09

EXPIRED

TIRED

WIRED

“Virtual reality”

“The metaverse”

“Spatial computing”

*“human interaction with a machine in which the **machine** retains and manipulates referents to **real** objects and spaces” [Greenwald 2003]*

The European Commission has adopted a strategy on Web 4.0 and virtual worlds to steer the next technological transition and ensure an open, secure, trustworthy, fair and inclusive digital environment for EU citizens and businesses and public administrations.

4 PILLARS

- 1 Empowering people and reinforcing skills** to foster awareness, access to trustworthy information and build a talent pool of virtual world specialists.
- 2 Business: supporting a European Web 4.0 industrial ecosystem** to scale up excellence and address fragmentation.
- 3 Government: supporting societal progress and virtual public services** to leverage the opportunities virtual worlds can offer.
- 4 Governance:** to set up the structures for the EU to steer the openness of virtual worlds.

23 RECOMMENDATIONS

The Commission hosted a European Citizens' Panel on Virtual Worlds. A representative group of citizens made 23 recommendations on citizens' expectations for the future, principles and actions to ensure that virtual worlds in the EU are fair and citizen-friendly.

*Virtual worlds: persistent, immersive environments based on 3D and extended reality (XR) technologies.
*Web 4.0: digital and real objects and environments integrated and communicating between each other, enabling immersive experiences.

Virtual Worlds and Web 4.0 *

Virtual Worlds:

Persistent, immersive environments based on 3D and extended reality (XR) technologies

Web 4.0:

Digital and real objects and environments integrated and communicating between each other, enabling immersive experiences

* Source:
<https://digital-strategy.ec.europa.eu/en/library/virtual-worlds-and-web-40-factsheet>

Jack Soslow ✅ 📺 @JackSoslow · Apr 25

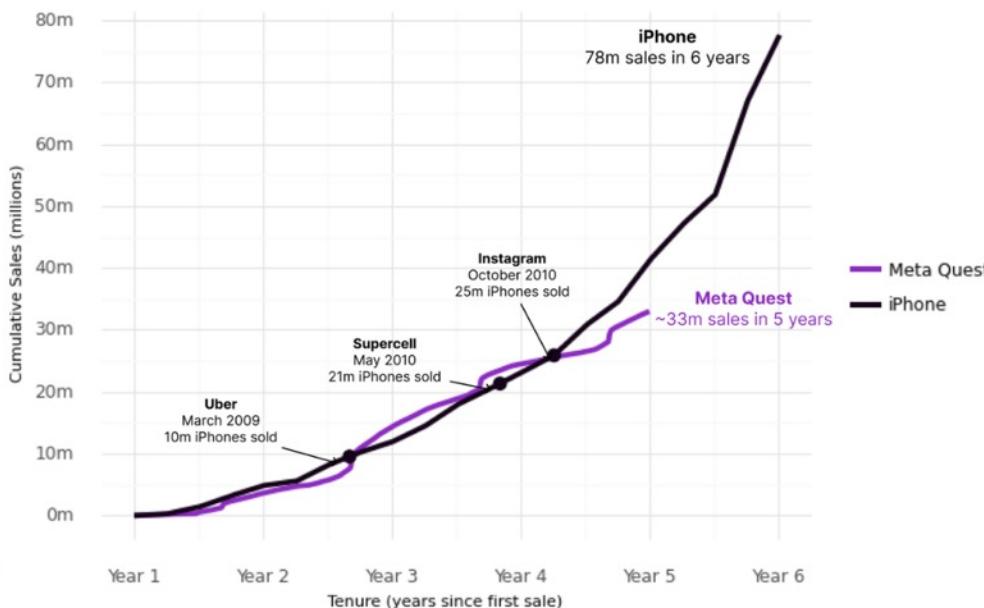
13) We believe the moment is ripe for ARVR apps.

Reflecting on the iPhone's impact, consider:

- Uber launched when 10m iPhones were sold
- Supercell at the 21m mark
- Instagram at 25m

Who will be the equivalent defining companies of ARVR?

Who is building the Supercell, Instagram, and Uber of VR?



* Meta Quest sales are estimated based on app downloads. The Meta Quest app is only useful if you buy a headset, and app download is a required part of NUX. Undercounts repeat purchasers, overcounts multi-account headsets.

** iPhone sales are US only from Business Insider, who received their data from an Apple Patent Trial. <https://shorturl.at/alsyP>



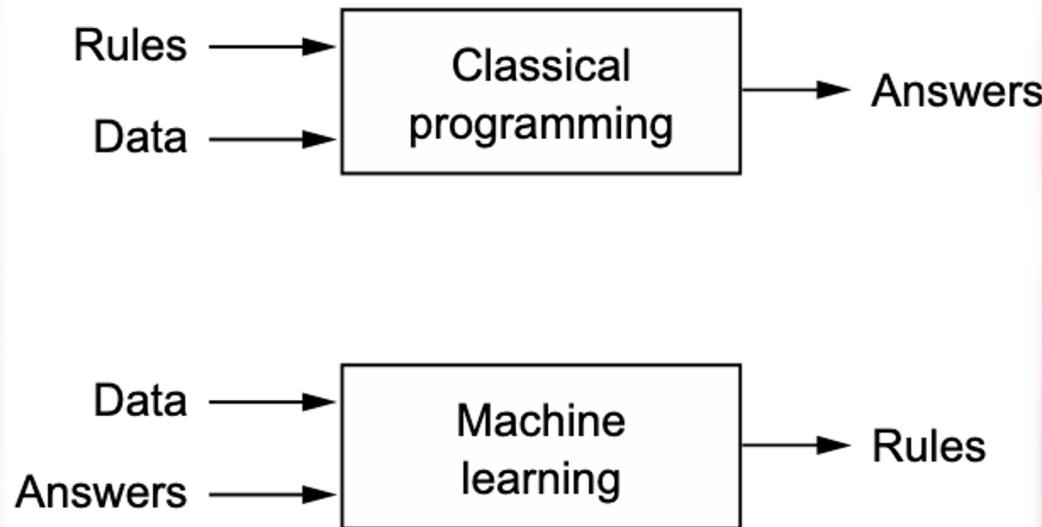
Is now the right moment for VR/AR?

The 3 Stages of XR



<https://x.com/jacksoslow/status/1783297751629123860?s=46&t=iEbjN9skT-JfsYUDKLznVw>

<https://analyticsindiamag.com/smartphones-will-be-obsolete-in-10-years-says-metas-ai-chief/>



Machine/Deep learning and intelligence

"Machine/Deep learning takes **data points** and turns them into a **queryable structure** that enables **retrieval** and **interpolation** between the points."

You could think of it as a continuous **generalization** of **database** technology."

"It is categorically **different** from even the simplest of **embodied biological agents**. As in, it's an entirely different category, with no shared characteristics."

Analogies to the brain are just as misleading as when people used the same analogies to describe computers in the 1950s."

F. Chollet, Deep learning with Python, Second Edition

Stable Diffusion prompt:
"an explosion of colorful powder"

AI's greatest impact? healthcare

Healthcare as an industry has been slow to **adopt** technology, reluctant to burden **overwhelmed** IT teams, and **train** burned-out staff on **new** systems.

We believe that any new technology has to be **10 times better** to successfully **displace** the last one—marginal improvements aren't worth the effort. Enterprise software struggled to clear that 10x bar in healthcare; **AI clears** it easily.

With AI, healthtech companies no longer need to fight the uphill battle of **training people on software**. Instead, they can sell AI that **acts like a person** and takes more and more of the work off healthcare professionals' plates, **enabling them to work on more interesting problems and practice at the top of their licenses.**"



Stable Diffusion prompt:

"doctors and nurses with 3D VR and AR glasses in digital and real objects and environments integrated and communicating between each other based on immersive experiences"

Daisy Wolf and Vijay Pande, <https://a16z.com/2023/08/02/where-will-ai-have-the-biggest-impact-healthcare/>

Virtual Reality Technology For Medicine



- Current technologies and concepts are founded on more than *30 years of research and development*
- Recent changes in cost and access make VR affordable
- VR tech is currently used for prevention, evaluation, treatment and chronic disease management
- After years of validation and use by early adopters - VR technology is poised to move to the mainstream
- On the horizon: enhanced, ubiquitous, informative and integrated



“

The scene is set for massive change

Computational Medical XR

Science, Computational Science and Computer Science?

Science, Computational Science, and Computer Science: At a Crossroads

The U.S. Congress passed the High Performance Computing and Communications Act, commonly known as the HPCC, in December 1991. This act focuses on several aspects of computing technology, but two have received the most attention: computational science embodied in the Grand Challenges (Table 1) and the National Research and Educational Network (NREN). The Grand Challenges are engineering and scientific problems considered vital to the economic well-being of the U.S. Many of these problems, such as drug design and global climate modeling, have worldwide impact. The NREN is to be an extremely high speed network, capable of transmitting in the terabit-per-second range—approximately ten times faster than we can currently transmit data. The exact goals of the HPCC are published in a pamphlet and updated annually [7].

The science and engineering components of the HPCC require an interdisciplinary approach to solving very difficult problems. The solutions require the concerted actions of physical scientists, engineers, mathematical scientists, and computer scientists. Computational science embraces this collaborative effort among many diverse disciplines. In the final analysis, the "answer" may have to be pieced together from the many viewpoints.

Our purpose is to ask whether today's computer scientists are able to take up the challenge of computational science. Some might argue that computational science is not an interest of computer science; that current areas of interest comprise the total domain. Indeed, it is strange that one has to argue for scientific applications as a part of computer science, since, after all, modern computing's roots are in scientific and engineering applications.

An exact definition of *computational science* is open to debate. There are many programs in the U.S. and elsewhere that use the term, and each program probably has its own view of computational science. We outline the Clemson University view of computational science as one possible approach. That view recognizes three components to computational science: applications, algorithms, and architectures. We visualize this as a pyramid supporting the science and engineering. Applications need not be restricted to the traditional science and engineering applications; for example, complex econometric models can also benefit from computational science.

The conduct of computational science, in the Clemson view, is interdisciplinary. This interdisciplinary thinking demands that the constituent disciplines (physical sciences, engineering, mathematics, computer science) maintain their autonomy. Within computational science, a computer scientist retains expertise in computer science, but emphasizes applications in science or engineering.

Although computational science is not for every computer scientist, computational science is an idea whose time has come—again. Our premises:

1. Computational science is addressing problems that have important implications for humankind. These problems are complex and their

D. E. Stevenson. 1994. Science, computational science, and computer science: at a crossroads. *Commun. ACM* 37, 12 (Dec. 1994), 85–96. DOI:<https://doi.org/10.1145/198366.198386>

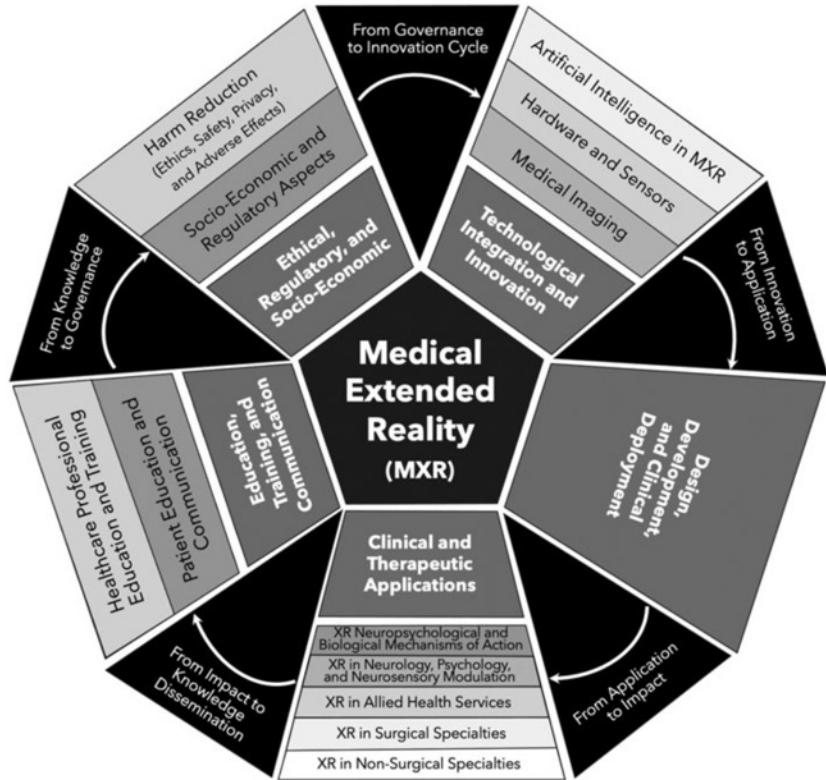
Why Computational Science?

An interdisciplinary field (physical sciences, life sciences, engineering, mathematics, computer science) whose time has come – again:

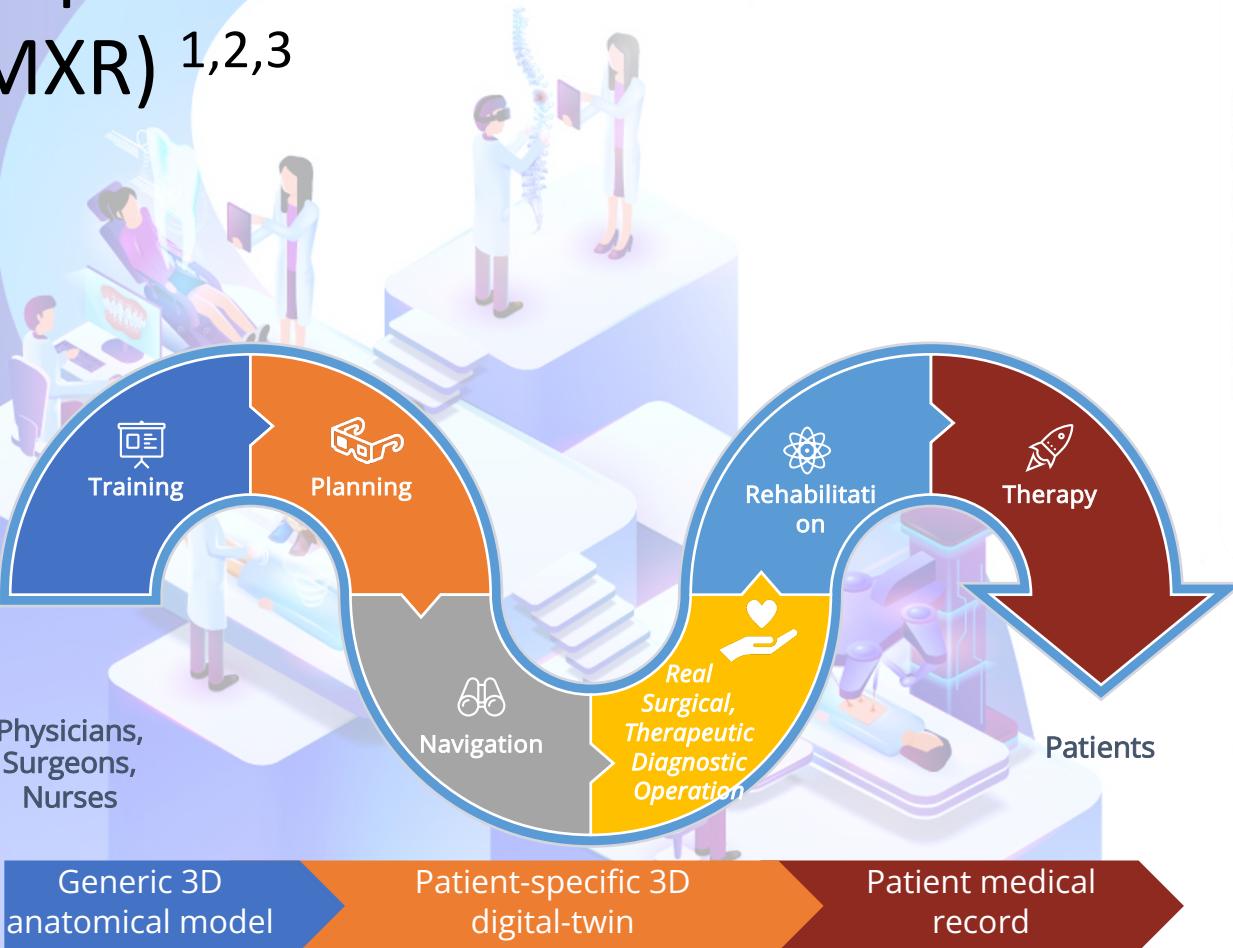
- Addressing **complex** problems that have **important** implications to **humankind**
- Unlikely to succeed in near term without further **advances** in **software** and **hardware**
- Computer science has been **generally not** participating in science or engineering applications or preparing students to do so – except very recently (Nobel Physics & Chemistry 2024)

Definition of medical XR?

Journal of Medical Extended Reality



Computational Medical XR (CMXR) ^{1,2,3}



arXiv:2108.04136v6 [cs.GR] 1 Jul 2024

A Computational Medical XR Discipline

George Papagiannakis, FORTH - ICS Greece, University of Crete Greece, ORamaVR Switzerland	Walter Greenleaf Stanford University USA	Michael Cole University of Michigan Medical School USA
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Philippe Billelja Geneva University Hospitals Switzerland	Nadia Magnenat Thalmann University of Geneva & MIRALab SARL Switzerland	Eleftherios Tsiridis Aristotle University of Thessaloniki Greece, Imperial College London UK
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Oliver A Kannape Geneva University Hospitals & MindMaze S.A. Switzerland		

ABSTRACT

Computational Medical Extended Reality (CMXR), brings together life sciences and neuroscience with mathematics, engineering, and computer science. It unifies the medical science (science) community with the extended reality sub-communities (engineering) for the medical field. It significantly differs from previous "Clinical XR" and "Medical XR" terms, as it is focusing on how to integrate computational methods from neural simulation to computational game engines, machine learning, and deep learning models with deep learning models to solve hard problems in medicine and neuroscience: from low-code/no-code/gml authoring platforms to learning life sciences for training, planning, real-time operative navigation, therapeutics, and rehabilitation.

medical XR field, based on its definition (see figure 1), using state-of-the-art examples of research on simulation protocols, immersive and embodied research approaches, and steps towards more effective, efficient, and empowered therapy, rehabilitation, planning, navigation, upskilling and reskilling in the post-pandemic world.

2 CMXR MOTIVATION AND PROGRESS BEYOND THE STATE OF THE ART

Recent CMXR related articles [1][2][3] and case study review articles [35] in industry [1] as well as dedicated academic special issues [36] and books [37] have emerged. The state of the art in VR, AR, and MR technologies (grouped by the industry [38] to transform and modernize the medical training model. An increasing number of published clinical trials [17][18][19][20] now demonstrate the potential of new technologies for improving skills transfer from virtual to real. In that frame, another recent policy paper [29] highlights that XR technologies can offer significant boost in experiential and collaborative learning of healthcare professionals.

Virtual environments provide the means for remote qualitative education (knowledge and training skills), using affordable technology with personalized, on-demand and smooth learning curves. Based on recent major advances in the fields of 3D edge computing [28], neurorehabilitation [30], VR/AR/MR technologies [31], and spatial computing [32]

"VR/AR shares with our brain the same basic mechanism: embodied simulation" [30]

Such innovative technologies can facilitate continuous learning, provide curriculum programs and self-improvement opportunities.

Increase convergence healthcare step up enhancement oldnesses, aging processes peripheries one program continuous learning

immersionality [33][34][35] more smooths

virtual worlds immersion in age groups in age groups [36][37]

immersionality [38][39][40] more smooths

virtual worlds immersion in age groups in age groups [41][42]

immersionality [43][44][45] more smooths

virtual worlds immersion in age groups in age groups [46][47]

immersionality [48][49][50] more smooths

virtual worlds immersion in age groups in age groups [51][52]

immersionality [53][54][55] more smooths

virtual worlds immersion in age groups in age groups [56][57]

immersionality [58][59][60] more smooths

virtual worlds immersion in age groups in age groups [61][62]

immersionality [63][64][65] more smooths

virtual worlds immersion in age groups in age groups [66][67]

immersionality [68][69][70] more smooths

virtual worlds immersion in age groups in age groups [71][72]

immersionality [73][74][75] more smooths

virtual worlds immersion in age groups in age groups [76][77]

immersionality [78][79][80] more smooths

virtual worlds immersion in age groups in age groups [81][82]

immersionality [83][84][85] more smooths

virtual worlds immersion in age groups in age groups [86][87]

immersionality [88][89][90] more smooths

virtual worlds immersion in age groups in age groups [91][92]

immersionality [93][94][95] more smooths

virtual worlds immersion in age groups in age groups [96][97]

immersionality [98][99][100] more smooths

virtual worlds immersion in age groups in age groups [101][102]

immersionality [103][104][105] more smooths

virtual worlds immersion in age groups in age groups [106][107]

immersionality [108][109][110] more smooths

virtual worlds immersion in age groups in age groups [101][102]

immersionality [103][104][105] more smooths

virtual worlds immersion in age groups in age groups [106][107]

immersionality [108][109][110] more smooths



¹ https://s2023.siggraph.org/presentation/?id=ftalk_101&sess=sess408

² [https://s2023.siggraph.org/presentation/?id=fwork_109&sess=sess287, 2023](https://s2023.siggraph.org/presentation/?id=fwork_109&sess=sess287)

³ Papagiannakis, G., et al "A computational medical XR discipline", 2024, <https://arxiv.org/abs/2108.04136>, Springer LNCS

Who are the leading hospitals in this field?



NEUROCENTRE » Centre for virtual medicine

CENTRE DE MÉDECINE VIRTUELLE

Un centre pionnier dans l'intégration des nouvelles technologies de réalité virtuelle et de l'Internet des objets à la recherche clinique et aux pratiques médicales.

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[The Centre](#)

[Research & innovation](#)

[Centre for virtual medicine](#)

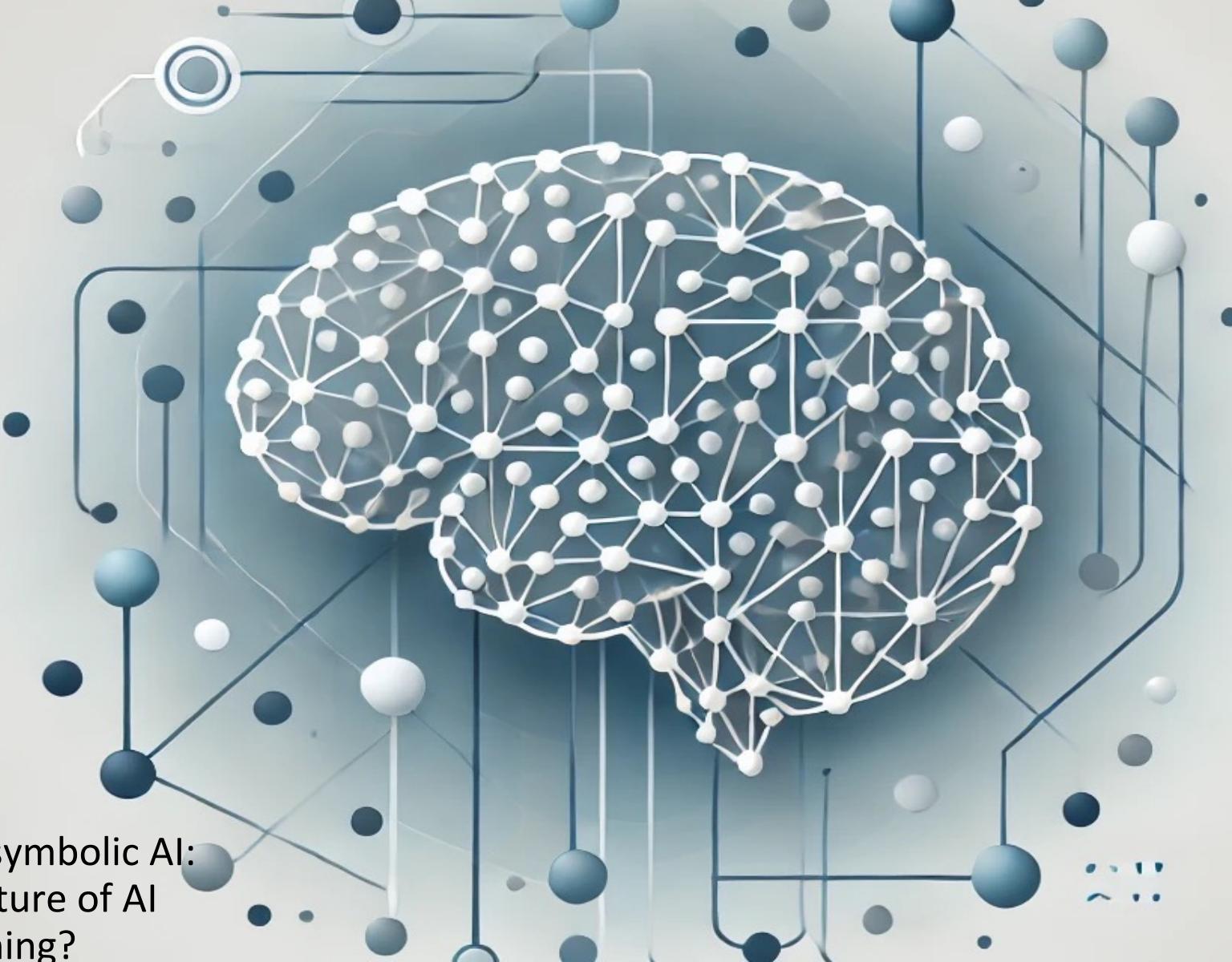
CENTRE FOR VIRTUAL MEDICINE

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[CONTACT](#)

Dr. Oliver Kannape,
Mindmaze &
University Hospital of
Geneva





Neurosymbolic AI:
The Future of AI
Reasoning?

What is Neurosymbolic AI?

- Neurosymbolic AI combines neural networks (perception) with symbolic reasoning (cognition).
- What is the role of symbols and programs?
- Build them or let them emerge?
- What's the best way to integrate them with DL?

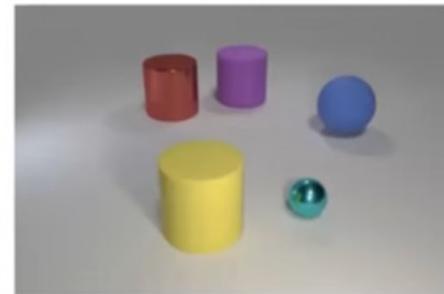
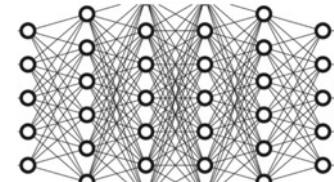
Kautz, H. A. The third AI summer: AAAI Robert S. Engelmore Memorial Lecture. *AI Mag.* 43, 105–125 (2022).

What is the shape of the red object left of the sphere?

$$[\lambda z. \exists x \exists y. \text{shape}(y, z) \wedge \text{color}(y, \text{red}) \wedge \text{leftOf}(y, x) \wedge \text{sphere}(x)]$$

Query(Shape, Filter(Red, Relate(Left, Filter(Sphere))))

Artificial Neural Networks





Explainability



Explainability



Flexibility

Why Neurosymbolic AI Matters

- Neural networks (& most ML models) are **correlation engines**
- They have **weak inductive bias**
 - Structure is considerably learned from **massive amounts of training data**
- They often do not work well when doing transfer to a **dissimilar runtime domain** or doing **few-shot learning**
- They often don't demonstrate **systematic generalization** or **compositionality**
- **Neuro-symbolic machines might help fix these problems?**



Scalability



NO



Scanning
Networks

- **Explainability:** Provides clear decision-making steps.
- **Flexibility:** Adapts to various tasks and improves learning.
- **Scalability:** Large-scale data processing and reasoning.

Sheth, A., Roy, K. & Gaur, M.
Neurosymbolic AI - Why, What, and
How. *arXiv* (2023)
doi:10.48550/arxiv.2305.00813.



“

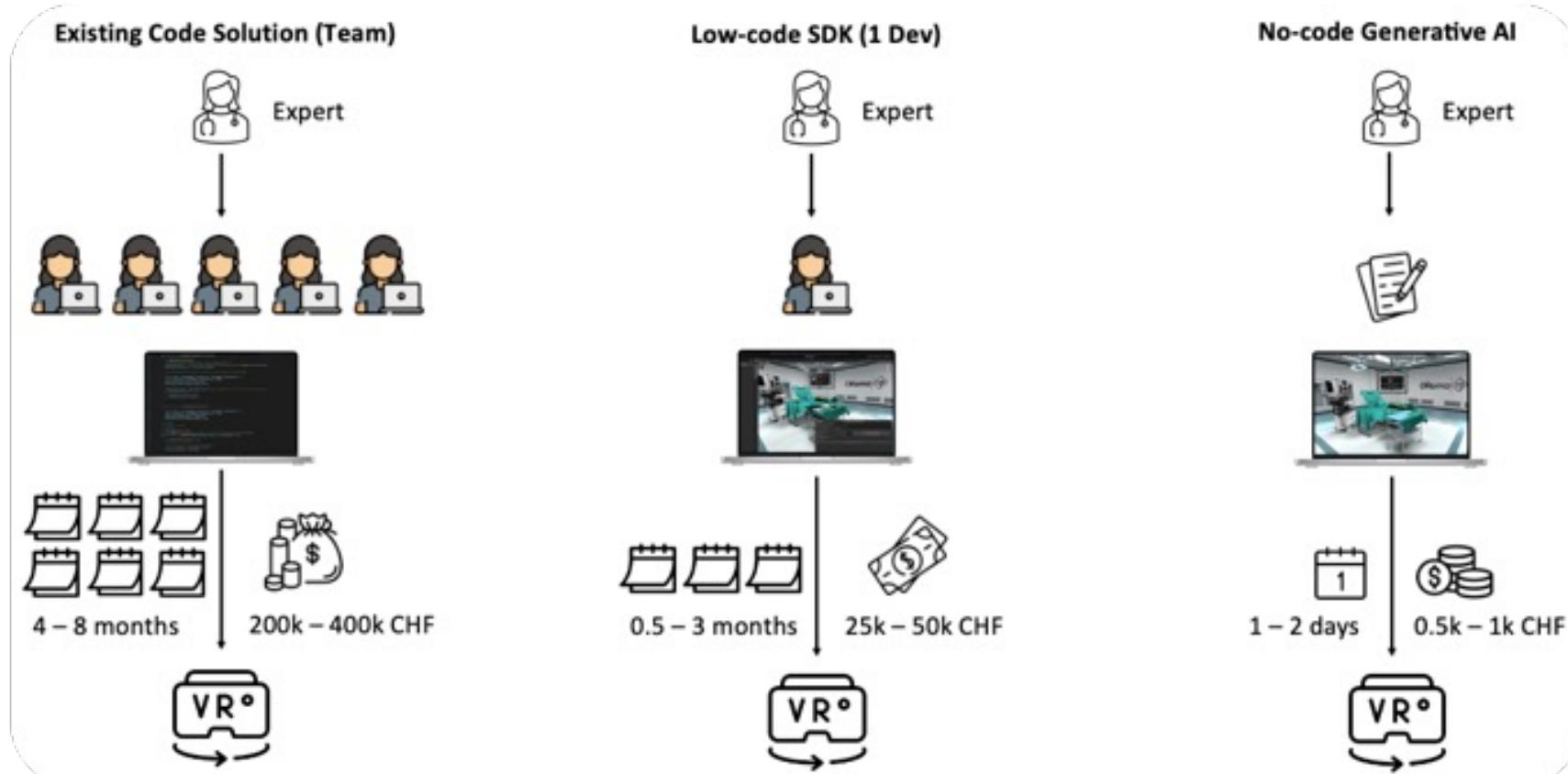
The scene is set for massive change

**State-of-the-art in
medical XR training**

METAVERSE GENERATION (VIRTUAL WORLDS): CODE -> LOW-CODE -> NO-CODE (GENERATIVE AI)

"For most of the technology's history, however, virtual experiences have been hard to build and maintain. This has been one of V.R.'s biggest problems."

Jaron Lanier, <https://www.newyorker.com/tech/annals-of-technology/where-will-virtual-reality-take-us>, Feb, 2024



State-of-the-art in computational medical XR training: Applications*

The increase of virtual hospitals



The gamification of healthcare



AR/VR-powered surgeries



- Surgical/ Diagnostic/ Therapeutic training
- Anatomy education
- Disaster Preparedness
- Patient Education
- Patient Counselling

Education & Training

Health & Nutrition

Teleconsultation

Collaborative Surgeries

From VR training simulators to XR simulations: 5 Generations of training



- **1.0** high-fidelity, haptic-based 3D and (VR) simulators (*non true-VR*)
- **2.0** 360-VR simulations or mobile-3D interactive (*non true-VR*)
- **3.0** true-VR simulators (*APIE: agency, presence, immersion, embodiment*) + off-the-shelf haptics
- **4.0** CMXR, Low/no-code SDK-based, fully customizable and extensible simulations (*today*)
- **5.0** CMXR genAI-based with human-in-the-loop simulations (*forthcoming*)



MEDICAL XR FIELD IS GROWING!

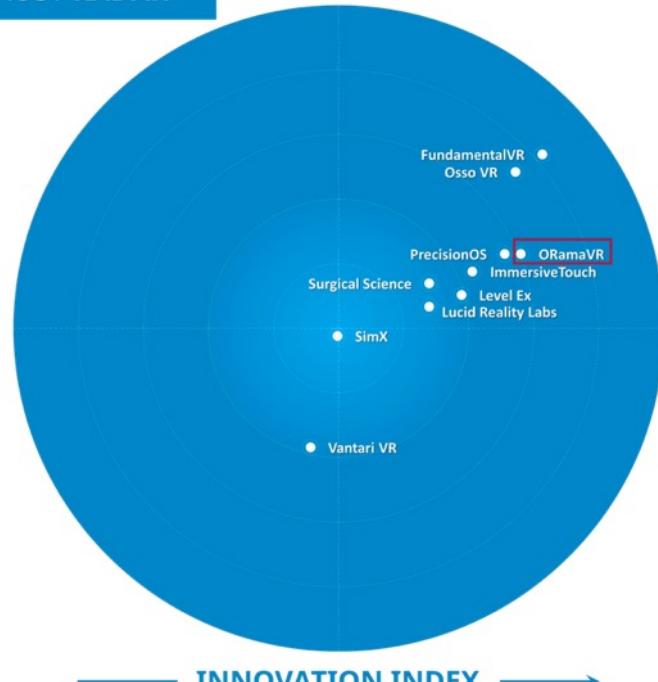
FROST & SULLIVAN

Medical VR for Training and Education, 2023

Frost Radar™

FROST RADAR™

GROWTH INDEX ↑



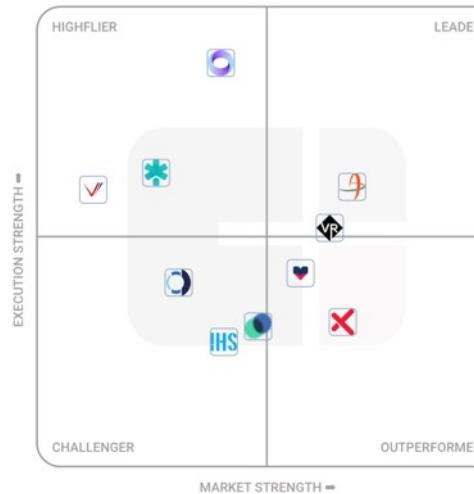
Source: Frost & Sullivan

Virtual reality (VR) surgical training

Healthcare & Life Sciences / Care Delivery & Navigation Tech

Market ranking updated: 12/19/23

Overview ESP Ranking Scorecard Market Data All Companies



Market Overview

The virtual reality (VR) surgical training market refers to the segment of the healthcare industry that simulates surgical procedures for medical training purposes. VR simulations have been scientifically proven to be as effective in hard and soft skill knowledge transfer as traditional methods. The market provides medical device companies with new technology to train and assess surgeons on advanced surgical innovations like robotics and improving patient outcomes. It also addresses the problem of inadequate training for healthcare providers (HCPs) by providing a flight simulator for HCPs to practice and perfect procedures in a safe, scalable environment to a high baseline standard. The market offers procedure-specific medical education modules for medical device companies, drastically reducing cost and training time while improving surgical competency and safety.

ESP Ranked Companies

Leader

ImmersiveTouch ORamaVR

Highflier

Osso VR FundamentalVR Virtual Incision

Outperformer

Vantari VR SimX

Challenger

Immertec Oxford Medical Simulation IHS

"High performers in the innovation index that have achieved a score greater than 4.0 out of 5.0 include FundamentalVR (4.90), ORamaVR (4.70), Osso VR (4.65)..."

..Growth Leaders—include FundamentalVR (4.55) and Osso VR (4.40), ORamaVR (3.70)..."

Frost & Sullivan Medical VR for Training and Education report 2023

CB INSIGHTS

- https://www.linkedin.com/posts/fundamentalvr_frost-radar-leader-in-medical-vr-training-activity-7141463504510750720-7uRX?utm_source=share&utm_medium=member_desktop
- [https://www.cbinsights.com/esp/healthcare-&-life-sciences/care-delivery-&-navigation-tech/virtual-reality-\(vr\)-surgical-training](https://www.cbinsights.com/esp/healthcare-&-life-sciences/care-delivery-&-navigation-tech/virtual-reality-(vr)-surgical-training)
- <https://metaverseinside.tech/2024/02/19/top-7-vr-training-companies-in-2024-revolutionizing-learning/>, <https://tryspecter.com/report/fastest-growing-vr-ar-companies>

From no-code to neurosymbolicAI

for CMXR training simulations



The solution



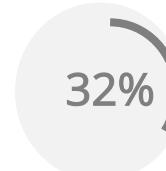
Neurosymbolic AI-powered medical XR platform that automates training reducing costs, time 10X



Clear Benefits in 9+ published high-impact peer-reviewed journal studies by our partners



error
reduction



skill
improvement

MAGES SUITE



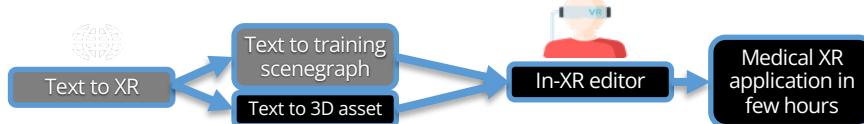
MAGES SDK - Software Development Kit- SaaS, proprietary deep-tech (*patent pending*)
 (USP: no-code AI-based CMXR simulation creation/authoring platform, *available today*)



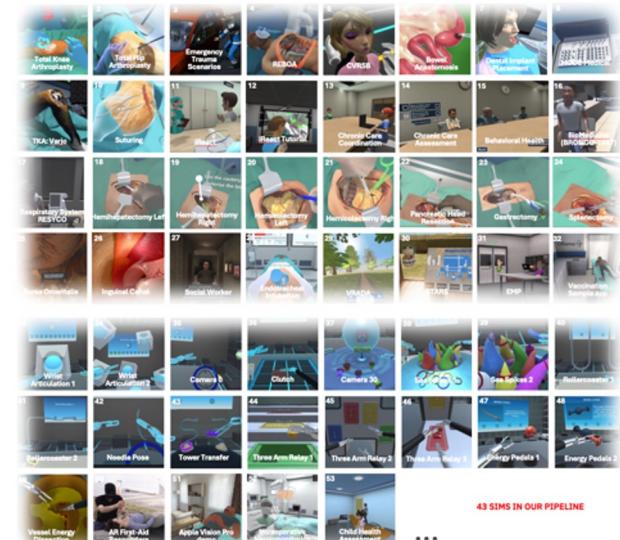
- **M** Multiplayer with GA Interpolation
Networking
Hardware Agnostic Device Manager
- **A** Analytics
Competency and Performance Analytics
Session and User Data Container
- **G** GA Deformable Animation, Cutting, and Tearing
Realistic User Interaction System
- **E** Editor With Action Prototypes
No-code SceneGraph Editor
JARIA, Just Another ARtificial Intelligent Assistant
- **S** Semantically Annotated Deformable, Soft, and Rigid Bodies



MAGES OMEN-E text2XR SaaS, (Proprietary Gen-AI based, '*ChatGPT for CMXR*', forthcoming)



MAGES SIM Service, 66 fully customizable, open medical XR training simulations authored so far



Unique proprietary dataset used to train OMEN-E & future CMXR app-store for revenue share with partners

DOES IT WORK?

We have proven that medical XR training facilitates

- a) skills transfer from the virtual world to the real
 - b) reduction of medical errors
- 9+ published medical XR clinical trials & pilot studies:
 - <https://oramavr.com/case-studies-testimonials/>
 - 60+ scientific publications on computational medical XR:
 - <https://oramavr.com/publications/>

International Orthopaedics
<https://doi.org/10.1007/s00264-023-06038-8>

ORIGINAL PAPER

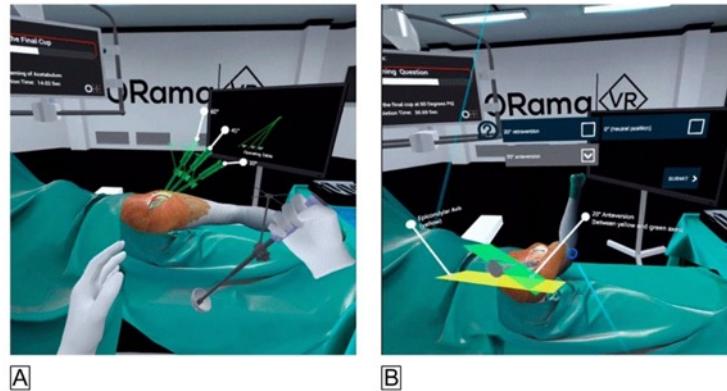


Effectiveness of virtual reality compared to video training on acetabular cup and femoral stem implantation accuracy in total hip arthroplasty among medical students: a randomised controlled trial

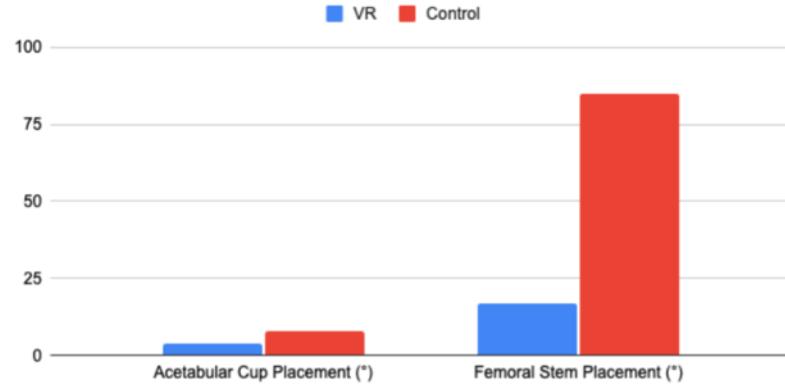
Eustathios Kenanidis^{1,2} · Panagiotis Boutos² · Grigoris Voulgaris² · Alkaterini Zgouridou² · Eleni Gkoura² · Zakareya Gamie² · George Papagiannakis^{3,4} · Eleftherios Tsiridis^{1,2}

Received: 3 October 2023 / Accepted: 10 November 2023
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VR and Control groups in Kenanidis et al 2023



e.g. Kenanidis et al 2023, Aristotle University, (N=101), Journal of International Orthopedics, 80% reduction on errors for Femoral Stem Placement and 50% for Acetabular Cup Placement after VR training

DOES IT WORK II?

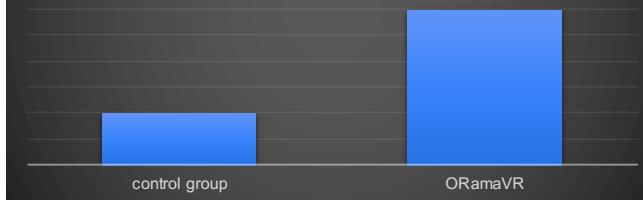
Real clinical-trial based evidence published in high-impact medical journals in our field

Hooper et al 2019, NYU, USA (N=14),
Journal of Arthroplasty*¹,
32% improvement in procedural skills



Virtual Reality Simulation Facilitates Resident Training in Total Hip Arthroplasty: A Randomized Controlled Trial
Jessica Hooper, MD ^{a,*}, Eleftherios Tsiridis, MD, PhD ^{b,c}, James E. Feng, MD ^d, Ran Schwarzkopf, MD, MSc ^e, Daniel Warren, MS ^f, William J. Long, MD, FRCS(C) ^a, Lazaros Poutsides, MD, PhD ^c, William Macadull, MD ^c, the NYU Virtual Consortium^c
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^e Department of Orthopaedic Surgery, New York University Langone Health, New York, NY
^f Department of Orthopaedic Surgery, New York University Langone Health, New York, NY

ORamaVR psychomotor training (procedural steps, technical performance, visuospatial skills, efficiency, and flow)

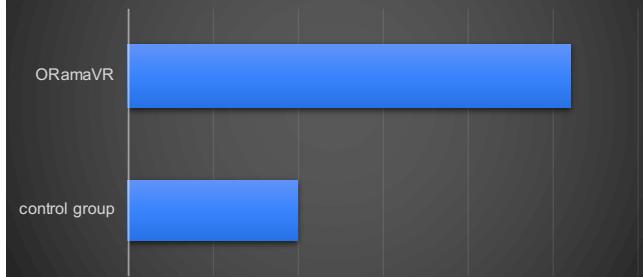


Birrenbach et al 2021, Inselspital,
Switzerland (N=29),
Journal of Medical Internet Research *²,
16% increased user satisfaction

JMIR SERIOUS GAMES Birrenbach et al
Original Paper
Effectiveness and Utility of Virtual Reality Simulation as an Educational Tool for Safe Performance of COVID-19 Diagnostics: Prospective, Randomized Pilot Trial

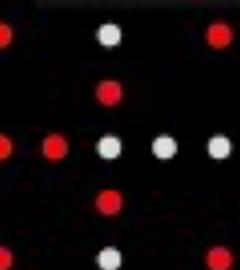
Tanja Birrenbach^{1,2}, MMSc, MD; Jossa Zbinden¹; George Papagiannakis^{3,4}, PhD; Aristotelis K. Exadaktylos¹, MD, PhD; Martin Müller¹, MD, PhD; Wolf E Haatz¹, MMSc, MD; Thomas Christian Sauter¹, MMSc, MD
¹Department of Emergency Medicine, Inselspital, University Hospital Bern, Bern, Switzerland
²Centre for Health Sciences Education, Faculty of Medicine, University of Oslo, Oslo, Norway
³ORamaVR SA, Geneva, Switzerland
⁴Department of Computer Science, Foundation for Research and Technology-Hellas, Heraklion, Greece

ORamaVR psychomotor training (user satisfaction)



*1 <https://www.sciencedirect.com/science/article/pii/S0883540319303341>
*2 <https://games.jmir.org/2021/4/e29586/>

MAGES 4.0



[VIDEO → MAGES SDK 4.0](#)

P. Zikas et al., "MAGES 4.0: Accelerating the World's Transition to VR Training and Democratizing the Authoring of the Medical Metaverse," in *IEEE Computer Graphics and Applications*, vol. 43, no. 2, pp. 43-56, 1 March-April 2023, doi: 10.1109/MCG.2023.3242686.

MAGES SDK NXT

MAGES No-Code NXT 5.0 Software Development Kit



D. Angelis, P. Kolyvakis, M. Kamarianakis, G. Papagiannakis, Geometric Algebra Meets Large Language Models:
Instruction-Based Transformations of Separate Meshes in 3D, Interactive and Controllable Scenes,
<https://doi.org/10.48550/arXiv.2408.02275>, 2024

[VIDEO → MAGES SDK OMEN-E](#)

Conclusions

**ARE YOU READY TO
TRANSFORM
LEARNING IN YOUR
ORGANIZATION?**



- Neurosymbolic AI and computational XR tools have arrived and are transforming medicine and healthcare – CMXR
- Questions on how to scale creation, adoption, deployment remain
- AI and XR technologies will not replace humans in healthcare!



Swiss Accelerator innovation project supported by



Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra
Swiss Confederation
Innosuisse – Swiss Innovation Agency



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Greece 2.0
NATIONAL RECOVERY AND RESILIENCE PLAN

fidal
field trials
beyond 5G.



INDUX-R



Dr. George Papagiannakis
Prof. University of Crete,
Affiliated Researcher at FORTH
Visiting Prof. University of Geneva
&
ORamaVR co-founder, CEO
george@oramavr.com



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*Let's accelerate world's transition to
Deep Medicine & CMXR!*