

Understanding The Loss of Trust in Doctors through Artificial Intelligence Powered by Mind Genomics Thinking

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Abstract

During the last decades, patient faith in physicians has declined. Doctors are distrusted for several reasons, including incorrect conclusions that had fatal consequences for patients. Doctors may have prescribed inappropriate medications which produced negative effects or didn't benefit patients. Medical blunders have sometimes occurred due to carelessness or neglecting information. Patients feel abandoned and don't know what their doctors are doing. Customers are even less trusting of the medical industry due to excessive pricing and lack of transparency. All of these things have made people more skeptical of the medical system, which has caused the doctor-patient relationship to break down. Doctors must address these challenges and regain patient trust to improve healthcare.

Keywords: doctor-patient relationship; large language model; Mind Genomics; trust in physicians

Abbreviations

AI: Artificial Intelligence; ChatGPT: Chat Generative Pre-Trained Transformer; Large Language Model; SCAS: Socrates as a Service.

Introduction

Physicians have achieved remarkable success and continue to do good work. Thanks to the advancements in technology, pharmaceuticals, and medical procedures, physicians can do more for their patients and help improve outcomes. Innovations such as telehealth and less-invasive surgeries enable doctors to enhance and even extend their patients' lives. However, in the midst of all this triumph, physicians are also getting further away from their patients; there is a disconnect in the doctor-patient relationship. Whereas the technical aspects of healthcare are certainly improving, there remains the significant challenge to maintain the traditionally strong personal connections between the physician and the patient.

Because more people distrust physicians, the future for healthcare is uncertain. How can physicians regain patients' faith after recent errors and findings? How can we make medicine more transparent, particularly about treatment options and costs? Are there training programs or initiatives for healthcare personnel with poor manners? What information can individuals acquire about medical treatments and their risks? How does the media affect medical perception and trust? Are there regulations to hold healthcare staff accountable for their actions and decisions? How does not trusting physicians affect patient and health care system health? How can patients advocate for themselves and ensure adequate medical care? Are there more patient education initiatives to assist individuals in comprehending the medical system and making good care decisions? Can healthcare workers help patients trust and communicate to them to enhance the patient experience?

Medical professionals are perceived as profit-driven rather than as patient-focused, which has eroded trust. Physicians may be suspected regarding whether their counsel is for them or for profit. Pharma company-paid doctors advocated brand-name drugs above generics. This conflict of interest may make patients doubt their doctors and reject their treatment suggestions [1-4].

Additionally, the influence of insurance companies on treatment decisions can further exacerbate feelings of mistrust towards doctors. Patients may believe their physicians prioritize insurance company cost-cutting above quality treatment. Delays in treatment, refusal of coverage, and dissatisfaction with the healthcare system may result. Insurance companies often require pre-authorization for certain tests and treatments, which can delay care and create barriers to accessing necessary medical services. As a consequence, patients may believe their well-being is being sacrificed for financial gain, further undermining their faith in their healthcare professionals [5-10].

Medical misdiagnoses have eroded trust in the healthcare system, harming patients. Patients often seek medical aid elsewhere when they feel their health is in danger and healthcare staff don't listen. Medical errors may damage patient faith in physicians, which can have serious consequences. Studies suggest that a misdiagnosis can end up delaying treatment, giving the incorrect drugs, and administering unnecessary treatments. This may make patients sicker and damage public trust in the medical system. If people believe their physicians aren't listening or making errors, patients may be less inclined to follow their recommendations or obtain treatment. This may affect patient outcomes and satisfaction with treatment for years [11-13].

If patients don't trust their physicians, they may not follow their treatment plans or provide crucial health information, which may affect their care. Because of this, patients may self-diagnose or seek treatment from untrustworthy sources, worsening their health. Misdiagnosis and medical fraud must be addressed in healthcare for people to trust it again and for their health.

The breakdown of trust in the doctor-patient relationship can have serious consequences for patient outcomes. When patients do not feel heard or understood by their healthcare providers, they may be less likely to follow treatment plans or seek necessary medical care. This can lead to worsening health conditions, increased healthcare costs, and ultimately, poorer health outcomes. Trust is essential in healthcare because it allows patients to feel confident in the advice and care they are receiving, leading to better overall well-being. Without trust, patients may be hesitant to share important information with their doctors, leading to misdiagnosis or improper treatment.

Using LLMs (Large Language Models) Powered by Mind Genomics Thinking

Mind Genomics thinking coupled with AI technologies can help understand the diverse mind-sets of individuals who may distrust the medical system. By analyzing underlying beliefs and attitudes, they can uncover the root causes of distrust, such as past negative experiences, cultural beliefs, or misinformation. This allows for targeted solutions to address specific concerns. By integrating AI technologies, such as large language models, we can analyze vast data and develop nuanced strategies for rebuilding trust. This approach enables a more inclusive and responsive healthcare system by embracing innovative solutions and thinking outside the box.

The remainder of this paper focuses on an effort to synthesize mind-sets of patients who distrust the medical system, and in turn understand how they think, what would make them regain trust in the medical system, and what might be their “personal story” as created by AI.

Table 1 begins with the prompts given to the LLM (ChatGPT 3.5 [14]) embedded in the Mind Genomics platform. The actual program is BimiLeap.com. The user is requested to type in the background in a special screen in the program called “Idea Coach.” From there, once the material is entered, the material is returned with 15 seconds. Often the same material is returned because the LLM has “no memory.” In such cases the simple “cure” is to request that the mind-sets returned before not be returned, forcing the LLM to create new mind-sets.

Patients are losing trust in doctors. Medicine suffers. Skepticism and distrust of health practitioners is on the rise. How are doctors supposed to restore patient trust? This appeared on April 24, in the New York Times.

There are different mind-sets of patients with regard to trust versus skepticism of their personal doctors and their feelings about the medical world and the pharmaceutical world.

For each mind-set, answer these questions:

1. What does the mind-set feel about the medical professional in general?
2. What does the mind-set feel about their own physician?
3. What would restore their belief in their primary physician if they have lost it?
4. What could the medical profession do to restore the confidence of this mind-set?
5. How do they manifest their feelings about the medical profession?
6. How do they comply or not comply with their doctor’s “orders” and what would help them to comply?
7. Write a six paragraph story about this mind-set and how they interact with their doctor, using the paragraph:
The medical industry is currently facing a crisis as patients are increasingly losing trust in their doctors. This lack of trust has serious implications for the quality of healthcare being provided and the overall well-being of patients.

Table 1: The “briefing” prompt given to the LLM to synthesize mind-sets and answer questions about these mind-sets.

Tables 2-5 show the four different mind-sets emerging from the repeated set of iterations. These are the four mind-sets which emerged with all answers to the requests. Note that the request for a six-paragraph story was often honored in the breach by a short story of one paragraph. In three of the four mind-sets, the paragraph listed the topics of the story in general form. In the fourth mind-set, the story material was more personal. These are not serious issues. They show the nature of the type of information one gets from these large language models. The mind-set information synthesized by these models have to be looked at as suggestive rather than final. Even so, the four different mind-sets give a sense of problems and solutions.

At the bottom of each table is a set of innovations. These innovations come from a post-generative analysis of the information. That is, after the iteration has been completed and the results stored, the Mind Genomic system (called SCAS, Socrates as a Service) is programmed to analyze the information more deeply. There are a variety of such analyses, such as key themes, search for what is missing, etc. In the interest of space, we show only one of these analyses, “Innovations” for the mind-set. This is the most valuable outcome because it suggests potential solutions to the problems, specifically for the mind-set.

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<p>THE CRITICAL MIND-SET</p> <ol style="list-style-type: none"> 1. Feels skeptical and critical of the medical profession as a whole 2. Is highly critical of their own physician, questioning their motives and abilities 3. Would only restore belief in their primary physician through consistent evidence-based treatment and transparent communication 4. The medical profession could restore confidence by being more transparent, promoting evidence-based practices, and engaging in open dialogue with patients 5. Manifest their feelings by questioning recommendations and seeking second opinions 6. May not comply with doctor’s orders if they feel they are not evidence-based or in their best interest, could improve compliance with more thorough explanations and shared decision-making 7. <i>In a six paragraph story, a critical patient constantly questions their doctor’s recommendations, expressing doubts about the effectiveness and potential risks of treatments. They demand to see all test results and research data before agreeing to any treatment, often seeking second opinions. The doctor tries to address their concerns by providing explanations and evidence, but the patient remains skeptical. Eventually, through open communication and detailed explanations, the patient begins to trust their doctor’s judgment and follows their recommendations more willingly. This newfound trust leads to better health outcomes for the patient.</i> <p style="text-align: center;">Innovations</p> <ol style="list-style-type: none"> 1. Medically-focused transparency initiatives: Implementing programs within healthcare organizations to increase transparency in medical practices and decision-making processes to build trust with critical patients. 2. Virtual second opinion services: Offering critical patients the option to seek additional medical opinions through virtual consultations with other physicians to address their doubts and concerns. 3. Evidence-based medicine workshops: Providing education and training opportunities for healthcare professionals on the importance of evidence-based practices in patient care to improve trust and credibility with critical patients. 4. Patient advocacy programs: Establishing patient advocacy programs within healthcare settings to support critical patients in expressing their doubts and concerns, and to facilitate communication between patients and their healthcare providers.

Table 2: The CRITICAL Mind-Set.

THE INDIFFERENT MIND-SET
<ol style="list-style-type: none"> 1. The mind-set feels indifferent towards medical professionals in general. 2. They have a neutral or indifferent feeling towards their own physician. 3. Restoring their belief in their primary physician would require them to see tangible results and improvements in their health. 4. The medical profession could restore the confidence of this mind-set by providing clear and transparent communication about treatment options and outcomes. 5. They may not actively seek out medical care unless absolutely necessary and may not express strong opinions about healthcare professionals. 6. They may comply with doctor’s orders if they see direct benefits to their health, but may be easily swayed by conflicting opinions or information. 7. <i>A six paragraph story about this mind-set could involve a patient who visits their doctor for a routine check-up, expressing no strong opinions or emotions towards the healthcare system or their physician. They may follow their doctor’s advice if it aligns with their own beliefs or if they see immediate benefits but may also question or disregard recommendations if they feel indifferent or unsure. Quotes can be used to illustrate their lack of strong feelings towards their healthcare experience.</i>
Innovations
<ol style="list-style-type: none"> 1. Personalized healthcare platforms: These platforms could analyze individual health data and provide personalized recommendations and treatment plans to engage patients more actively in their healthcare journey and increase trust in healthcare professionals. 2. Gamified health apps: By gamifying healthcare practices and treatment plans, patients may be more likely to follow recommendations and actively participate in their own care, leading to improved health outcomes and a stronger relationship with their healthcare providers. 3. Virtual health consultations: Offering virtual consultations and follow-ups with healthcare professionals can make accessing medical care more convenient and comfortable for patients who may feel indifferent towards traditional in-person visits. 4. Transparent healthcare pricing models: Implementing transparent pricing models for medical services and treatments can help patients understand the costs associated with their care and make more informed decisions about their health. 5. Peer-reviewed health information platforms: Providing reliable and accurate health information on online platforms that have been peer-reviewed by medical professionals can help patients navigate conflicting information and make more informed decisions about their health.

Table 3: The INDIFFERENT Mind-Set.

THE WEARY MIND-SET
<ol style="list-style-type: none"> 1. Feels that medical professionals are overworked and underappreciated 2. Feels that their own physician may be competent but lacks the time to truly listen and understand their concerns 3. Would restore belief in their primary physician by receiving personalized attention and empathy during appointments 4. The medical profession could restore the confidence of this mind-set by implementing measures to reduce physician burnout and allowing for longer appointment times. 5. They manifest their feelings about the medical profession by expressing frustration with long wait times and rushed appointments. 6. They may struggle to comply with their doctor’s orders due to feeling unheard or rushed during appointments, but could be helped by clear explanations and personalized care plans. 7. <i>A good six paragraph story about this mind-set could involve the protagonist feeling worn down by the health-care system, struggling to find a doctor who truly listens to their concerns, ultimately finding a compassionate physician who takes the time to understand their needs, and eventually feeling more confident in following their doctor’s recommendations. Quotes could illustrate the protagonist’s frustration with rushed appointments, their relief at finally being heard, and their determination to prioritize their health despite past disappointments.</i>
Innovations
<ol style="list-style-type: none"> 1. Virtual Health Assistants: A virtual health assistant service could provide personalized attention and empathy to patients through video consultations, allowing for more time and focus on individual concerns. 2. Patient Advocacy Programs: Implementing patient advocacy programs within healthcare settings could help bridge the gap between overworked medical professionals and patients, ensuring that patients feel heard and understood during appointments. 3. Physician Wellness Programs: Healthcare organizations could offer wellness programs and resources for medical professionals to help reduce burnout and improve the quality of care provided to patients. 4. Patient Education Platforms: Developing interactive and personalized patient education platforms could help patients better understand their conditions and treatment plans, leading to improved compliance and outcomes.

Table 4: The WEARY Mind-Set.

THE QUESTIONING MIND-SET

1. The QUESTIONING Mind-Set feels that the medical professional in general may have conflicting interests and may not always have the patient’s best interests at heart.
2. The QUESTIONING Mind-Set may feel skeptical towards their own physician, questioning their motives and decisions.
3. To restore their belief in their primary physician, the QUESTIONING Mind-Set would need transparent communication, reliable information, and a genuine display of care and concern for their well-being.
4. The medical profession could restore the confidence of the QUESTIONING Mind-Set by being more transparent in their practices, providing clear explanations and justifications for treatments, and actively addressing any concerns or doubts.
5. The QUESTIONING Mind-Set may manifest their feelings about the medical profession through asking numerous questions, seeking second opinions, and doing their own research on health issues.
6. The QUESTIONING Mind-Set may comply with their doctor’s orders to a certain extent, but may be more likely to challenge or question recommendations that they feel unsure about. Building trust and open communication with their doctor would help them to comply more effectively.
7. *Sharon had always been skeptical of doctors and the medical profession in general. She had seen too many instances of misdiagnoses and over-prescription of medications to blindly trust any medical professional. When she found herself facing a health issue that required her to seek medical help, she reluctantly made an appointment with her primary physician. As the doctor began discussing treatment options, Sharon couldn’t help but question every decision, asking for explanations and alternative options. The doctor, sensing Sharon’s skepticism, took the time to explain the reasoning behind the recommended treatment plan and provided additional resources for Sharon to educate herself. Slowly, Sharon began to trust her doctor more, feeling reassured by the transparency and care shown. In the end, Sharon followed her doctor’s recommendations, feeling more confident in the process and her own health.*

Innovations

1. New product: Telemedicine platforms that provide virtual second opinions from multiple physicians for patients seeking more information and reassurance before making medical decisions.
2. New service: Patient advocacy services that help individuals navigate the healthcare system, understand their treatment options, and advocate for their needs and preferences during medical consultations.
3. New experience: Collaborative decision-making workshops where patients and healthcare providers can openly discuss treatment options, risks, and benefits to make informed decisions together.
4. New policy: Mandatory training for healthcare providers on effective communication, empathy, and building trust with patients to improve patient satisfaction and outcomes.

Table 5: The QUESTIONING Mind-Set.

Learning from the Future, Learning from the Past — Exercise in Syntheses to Understand the Problems

The synthesis of this topic across different time periods can teach us valuable lessons about the complex and multi-faceted nature of patient distrust in the medical system. By comparing and contrasting the perspectives and experiences of patients and healthcare providers over time, we can gain a more comprehensive understanding of the underlying causes and implications of this issue. Additionally, looking at how attitudes towards healthcare have evolved can help us identify patterns and trends that may inform our approach to addressing patient distrust in the future.

In 2030 (see Table 6), the synthesis of a topic like patient distrust of the medical system would be highly beneficial as it allows for the integration of cutting-edge research, data, and technology. By examining the issue from various perspectives and utilizing the latest advancements in healthcare, researchers can develop more effective strategies for addressing and mitigating patient distrust. Additionally, a synthesis of this topic in 2030 would provide valuable insights into the evolving dynamics between patients and healthcare providers, enabling the development of more patient-centered care models.

Looking Ahead to 2030

1. In 2030, the medical industry is in crisis as patients are losing trust in their doctors for a variety of reasons. One contributing factor is the rise of artificial intelligence and telemedicine, which has led to a decrease in face-to-face interactions between doctors and patients. Additionally, the increasing use of electronic health records has made it difficult for doctors to spend quality time with patients, leading to feelings of being rushed and ignored.
2. Another reason for the crisis is the pharmaceutical industry's influence on medical practices, with patients feeling that doctors are more concerned with prescribing medications than truly listening to their concerns and providing holistic care. Furthermore, there have been widespread reports of medical malpractice and unethical behavior by some doctors, eroding trust in the profession as a whole.
3. To ameliorate the crisis, it is imperative for doctors to engage in ongoing education and training to keep up with the latest advances in medicine and technology. They must also prioritize building strong relationships with their patients, actively listening to their concerns, and involving them in the decision-making process for their healthcare. Transparency and accountability in medical practices are crucial in regaining patients' trust.
4. Doctors are feeling the effects of the crisis as they struggle to maintain their credibility and reputation in the face of growing mistrust from patients. Many are frustrated by the constraints of the healthcare system, feeling pressured to prioritize profit over patient care. Some doctors are advocating for reforms in medical practice, calling for more emphasis on preventative care and holistic approaches to treatment.
5. Patients, on the other hand, are feeling disillusioned and vulnerable as they navigate a complex and often overwhelming healthcare system. They are seeking more personalized care and a greater sense of empowerment in their own health decisions. Many are turning to alternative medicine and self-care practices in search of holistic approaches to wellness.
6. Overall, the crisis in the medical industry in 2030 highlights the need for a shift towards patient-centered care, with a focus on building trust and meaningful relationships between doctors and patients. It also underscores the importance of transparency, accountability, and ethical practices in restoring faith in the healthcare system.

Table 6: AI synthesis of the patient trust in the medical system projected forward to the year 2030.

Looking back to 1950 (see Table 7), synthesizing the topic of patient distrust of the medical system would have been important in uncovering the historical roots of this issue. Understanding how healthcare practices and policies have contributed to distrust in the past can provide valuable context for addressing similar challenges in the present and future. Furthermore, synthesizing this topic from the vantage point of 1950 would highlight the progress made in healthcare over the past decades and shed light on areas that still require improvement.

Looking Backward to 1950	
1.	The crisis in the medical industry in 1950 can be attributed to several key factors. Firstly, there is a lack of transparency and accountability in the doctor-patient relationship. Patients often feel as though they are not being fully informed about their treatment options or the potential risks involved. Additionally, there have been numerous reports of doctors accepting kickbacks from pharmaceutical companies in exchange for prescribing certain medications, leading to concerns about conflicts of interest.
2.	Furthermore, the medical industry has become increasingly corporatized, with large hospitals and healthcare systems prioritizing profits over patient care. This has led to a reduction in the amount of time doctors are able to spend with each patient, resulting in rushed appointments and a lack of personalized care. Additionally, the rising cost of healthcare has put pressure on doctors to prioritize treatments that are profitable rather than what is in the best interest of the patient.
3.	To address this crisis, it is crucial for doctors to prioritize ethical practices and put the needs of their patients first. This may involve implementing stricter guidelines on interactions with pharmaceutical companies, as well as improving communication with patients to ensure they are fully informed about their treatment options. Hospitals and healthcare systems should also prioritize quality of care over profits, investing in resources that allow doctors to spend more time with each patient.
4.	Doctors are facing a moral dilemma as they navigate the pressure to prioritize profits over patient care. Many healthcare providers entered the field with the intention of helping others and feel conflicted about the current state of the industry. Patients, on the other hand, are increasingly skeptical and distrustful of the healthcare system. They are demanding more transparency and accountability from their doctors, and are seeking alternative forms of healthcare such as naturopathic medicine and holistic treatments.

Table 7: AI synthesis of the patient trust in the medical system projected backward to the year 1950.

In 1900 (see Table 8), it would have been just as useful to summarize the subject of patient fear because it would have shown how social and cultural factors affected healthcare views at the time. Researchers could learn more about the historical background of patient fear by looking at the medical views and practices of the early 20th century. Today’s attempts to build trust between customers and healthcare workers could be influenced by this information. It could also help shape future healthcare policies and procedures.

Looking Backwards to 1900

1. The year is 1900, and the medical industry is facing a crisis as patients are losing trust in their doctors. This crisis has been brewing for years, with several factors contributing to the growing distrust. Firstly, medical practices in the 19th century were often rudimentary and lacked the scientific knowledge and advancements we have today. Doctors relied heavily on outdated methods and treatments, leading to questionable outcomes and patient dissatisfaction.
2. Secondly, the lack of regulation and oversight in the medical field allowed for unqualified individuals to practice medicine, further eroding trust in the profession. Many patients were treated by quacks and charlatans who had no formal training or experience, resulting in tragic consequences for many.
3. Additionally, the high costs associated with medical care in the 1900s meant that only the wealthy could afford proper treatment. This led to a perception that doctors were only interested in profit, rather than the well-being of their patients. As a result, many people avoided seeking medical help altogether, leading to a decline in overall health and well-being.
4. To ameliorate this crisis, steps must be taken to improve the education and training of medical professionals. Establishing rigorous standards and licensing requirements will help ensure that only qualified individuals are allowed to practice medicine. Increased government oversight and regulation can also help weed out fraudulent practitioners and hold doctors accountable for their actions.
5. Doctors themselves must also work to rebuild trust with their patients by demonstrating compassion, empathy, and a commitment to providing evidence-based care. Open communication, transparency, and honesty are essential in fostering a strong doctor-patient relationship built on mutual respect and trust.
6. Patients, on the other hand, must be willing to advocate for their own health and ask questions about their treatment options. By being informed and actively involved in their care, patients can empower themselves and hold their doctors accountable for providing high-quality, ethical care.

Table 8: AI synthesis of the patient trust in the medical system projected backward to the year 1900.

Conclusions

To sum up, the problem of trust in the medical field is complex and needs a relationship between doctors and patients. Healthcare practitioners may rebuild patient confidence and enhance treatment by creating solid connections, increasing communication, and emphasizing patient well-being. People no longer trust doctors, which is causing chaos in the medical field. Misconduct in medicine, wrong diagnoses, and bad communication between doctors and patients are to blame for this crisis. Due to fear and skepticism, people are seeking second views, using internet medical resources, and postponing critical medical care. To end the medical disaster, doctors and patients must trust each other again. This might be possible with more open conversation, better training for medical professionals, and care that is focused on the patient. Doctors must listen to patients, answer their concerns, and include them in healthcare decisions. This problem in the medical field is harming both doctors and patients. As doctors try to win back their patients' trust, they may feel angry and let down. Patients, on the other hand, who are seeking medical care may feel fear and doubt. To get past these problems and rebuild medical trust, both sides must work together.

The approach presented here provides an easy-to-develop corpus of knowledge for use in exploring the topic. The information presented comes from the integration of Mind Genomics thinking about people's viewpoints with information about a societal system, the medical field. The combination of Mind Genomics to sensitize thinking about real individual differences at the level of daily life with the synthesizing power of LLMs such as ChatGPT 3.5 may be one of the tools needed to stimulate critical thinking and applied problem

solving. The name “Socrates as a Service” has been chosen to emblemize this effort. The results in this paper present some of the first fruits of that effort.

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