

Artificial Intelligence Cannot Be Human, Emotional, or Spiritual

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ABSTRACT

Artificial intelligence (AI) is universally adopted in our day-to-day life, including medical science, and transforming healthcare in various ways, like scientific discovery, collecting and interpreting large data, and gaining insights that might not have been possible by traditional scientific tools. AI also helps learning by geometric understanding, leveraging knowledge, enhanced accuracy and efficiency in diagnostics, imaging, clinical decisions, predictive analysis, drug discovery, virtual assistance, administrative automation, telemedicine, and precision medicine. However, AI lacks emotional consciousness, moral understanding, spiritual insight, and human psychology. AI is a tool to help us and not a human being.

Humanity, sociality, spirituality, and emotions are difficult to define. Human emotions are internal, subjective experiences such as happiness, sadness, anger, fear, love, empathy, and sympathy, deeply rooted in our biological systems, memories, and personal experiences, and AI can simulate these emotions but cannot feel or experience them, while spirituality involves meaning, purpose, and belief in something more than oneself (e.g., God or supreme power). AI has no soul or belief and spiritual practices.

However, concerns persist, including biases ingrained in AI algorithms, lack of transparency in decision-making, potential compromises of patient data, privacy, and safety of AI implementation in clinical settings.

Artificial intelligence has enormous potential in choosing complex regimes, faster calculations, streamlining workflows, and expanding access to healthcare. Nevertheless, AI cannot experience emotions, exercise moral reasoning, or offer genuine spiritual companionship, and successful integration requires AI to function strictly as an assistant to healthcare professionals (HCPs).

"AI has vast potential, but it cannot be human, social, emotional, and spiritual."

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INTRODUCTION

Artificial intelligence (AI) is universally occupying a place in our day-to-day life, including medical science. AI is transforming healthcare in various ways, like scientific discoveries, collecting and interpreting large datasets, and gaining insights that might not have been possible by traditional scientific tools. AI helps learning by geometric understanding, leveraging knowledge to enhance accuracy and efficiency by analyzing diverse scientific data, images, sequences, diagnostics, and clinical decisions, drug discovery, administrative automation, mental health screening, and choosing the right drug with precision.¹ However, AI lacks emotional consciousness, moral and social understanding, spiritual insight, and human psychology. AI is a tool to help us and not a human being or sole decision-maker.

HUMANITY, SOCIALITY, SPIRITUALITY, AND EMOTIONS

Humanity, sociality, spirituality, and emotions are difficult to define. Still, human emotions are internal, subjective experiences such

as happiness, sadness, anger, fear, love, empathy, and sympathy, deeply rooted in our biological systems, social memories, and personal experiences.

Artificial intelligence can simulate emotions, for example, express sympathy or excitement in text, but cannot feel because AI responses are data- and pattern-based and not genuine emotional experiences. AI cannot feel but imitates emotions.

While spirituality involves meaning, purpose, connection, and belief in something more than oneself (e.g., soul, God, universe, or supreme power), which includes consciousness, self-awareness, morality, and existence beyond physical presence. AI has no self-awareness, soul, or belief, cannot seek meaning, contemplate existence, or engage in spiritual practices. AI lacks the essence of spirituality as it has no inner life or existential awareness.

MEDICAL APPLICATIONS OF ARTIFICIAL INTELLIGENCE

Artificial intelligence is useful in many areas of internal medicine and has revolutionized

the approach to patients. Here we are enumerating a few of them:

- **Diagnostics and imaging:** AI models powered by deep learning can interpret radiological, pathological, and retinal scans with high accuracy in diabetic retinopathy and oncology imaging.
- **Predictive analytics:** Machine learning evaluates large patient datasets to forecast risks of complications or disease progression.
- **Personalized medicine:** AI algorithms tailor treatment plans based on genetic, phenotypic, lifestyle, and biochemical parameters.²
- **Drug discovery:** AI accelerates identification and optimization of drugs and chemicals, and helps in precision medicine.²
- **Virtual assistants and telemedicine** by monitoring mental health through sentiment and tone analysis, offering support between clinical sessions, and helping in telemedicine.³

DISCUSSION

Literature review of 44 studies highlights that AI is enhancing healthcare delivery by more accurate diagnoses, personalized treatment, and efficient resource allocation. However, persistent concerns remain, including biases ingrained in AI algorithms, lack of transparency in decision making, potential compromises of patient data privacy, and safety of AI implementation in clinical settings.

Artificial intelligence provides the opportunity for healthcare revolution, it is imperative to address the ethical, regulatory, and safety challenges linked to its integration. Proactive measures are required to ensure that AI technologies are developed and

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deployed responsibly, striking a balance between innovation and safeguarding of patient well-being.²

National surveys of healthcare professionals (HCPs) analyzed their concerns and psychology of adopting and integrating AI in medicine, including emotions, worries, attitudes, fears, and difficulties. Addressing comprehensive education and implementation of suitable legislation related to AI may foster AI acceptance.³

Digital pathology and computer vision are enabling AI to have positive impact on pathology, including breast pathology. Research using machine learning and the development of algorithms that learn patterns from labeled digital data based on deep learning neural networks and feature-engineered approach to analyze histology have shown promising results.⁴

There is evidence showing the promise and efficiency of AI in clinical medicine both at the research and treatment levels. Many of the obstacles are technical in nature, specifically to develop a better database for optimal parameter adjustments and predictive algorithms. In clinical medicine empathy, sympathy, and emotional touch are important, which cannot be taken care of with any AI, and this justifies the necessity of human monitoring and emotional intervention in clinical medicine. AI cannot replace social, emotional, human, and spiritual behavior of a human being. For example, AI may simulate empathy *via* sentiment analysis or tone adjustment but cannot truly feel or resonate emotionally, and without emotional and motivational empathy, simulated responses seem to be superficial and manipulative.⁵

Clinicians and patient relationship and trust in medicine rely on interpersonal connection, words, gestures, presence, and mutual understanding that AI cannot reproduce. The therapeutic effect of human contact or personal touch contributes significantly, many times tremendously, to healing, which AI cannot. Moral decision-making and responsibility are lacking in AI models. Clinicians must retain control and legal responsibility while using AI. Final clinical judgments or choosing complex regimen options must remain with the clinician.⁶

Artificial intelligence should be rationally guided, transparent, respect the public interest, and impartial. Then and then AI will be fairer, more innovative, and benefit patients and society while preserving human

dignity. It can foster accuracy and precision in medicine and reduce the workload by assisting HCPs and will be considered an inspiring innovation.⁶

The potential of AI to streamline clinical work, assist in diagnostics, and enable personalized treatment poses challenges, necessitating exploration of ethical, legal, and regulatory considerations. Approved governance is imperative to accept and successfully implement AI in clinical medicine.

Cultural and contextual understanding is often struggled with by AI in social contexts. It may decontextualize patient stories, missing subtle cues about values, spiritual beliefs, or personal history.⁷

SPIRITUAL CARE AND EXISTENTIAL SUPPORT

- Integration of AI between technology, spirituality, and ethical issues like privacy and empathy calls for a debate on the responsible use of AI. Certain AI tools provide spiritual conversation, but they lack an actual spiritual presence. Digital dialogues about eternity or faith cannot capture authentic spiritual essence.⁸
- Artificial intelligence trained on unrepresentative data can perpetuate inequalities based on race, gender, or socioeconomic status.³
- Artificial intelligence has concerns regarding the potential impact on relations of trust in clinical practice. AI cannot be truly reliable and fully trusted as an independent decision-maker. AI lacks accountability for mislabeling or highlighting risks. Clinical systems are more confident even when incorrect, requiring robust oversight.⁹
- Artificial intelligence should assist and never replace clinical judgment. Education, accreditation, legal regulation, and transparent oversight are essential.^{6,7}
- Artificial intelligence tools are supposed to free up time and facilitate doctor-patient relations. However, there is little evidence to support this hypothesis. We cannot ignore the importance of empathy and compassion in patient-centered care. Literature review revealed that, besides empathy and compassion, shared decision-making and trust relations are also important. The review also suggested a positive impact on patient-centered doctor relations if AI

is used as an assistant and in adapting medical education.¹⁰

CONCLUSION

Artificial intelligence has enormous potential to enhance diagnostics, choose complex regimes, address adverse effects, perform faster calculations, streamline workflows, and expand access to healthcare. Nevertheless:

- Artificial intelligence cannot experience emotions, exercise moral reasoning, or offer genuine spiritual companionship.
- The healing dimensions of empathy, trust, cultural understanding, and moral support remain unique to humans only.
- Successful integration of AI requires it to function strictly as an assistant to HCPs, maintaining ultimate responsibility and relationship.
- Finally, "AI has vast potential to assist healthcare, but AI cannot be human, social, emotional, and spiritual," and AI cannot be truly reliable and fully trusted as an independent decision-maker.

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