





巴黎醫學院的一幅壁畫，描繪了新古典主義背景下的 56 名傑出醫學家。巴黎醫學院於1769年在法國國王路易十五的授意下建造，這座希臘風格的建築傑作在十九世紀初正式成為了醫學院的教學場所。

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關於0xmd	3
醫療健康大型語言模型 (LLM)	4
大型視覺語言模型 (LvLM)	4
0xmd 中醫人工智慧	5
人工智能醫學與護理教育軟體	6
研究與開發成果	8
0xmd手機應用程式 與 穿戴式裝置的革新連結 ( 預計於2024年第三季度推出 )	9
為醫療行業帶來正面改變	10
里程碑	11
新聞與活動	11
附錄 A : 不同大型語言模式於醫療應用的比較	12

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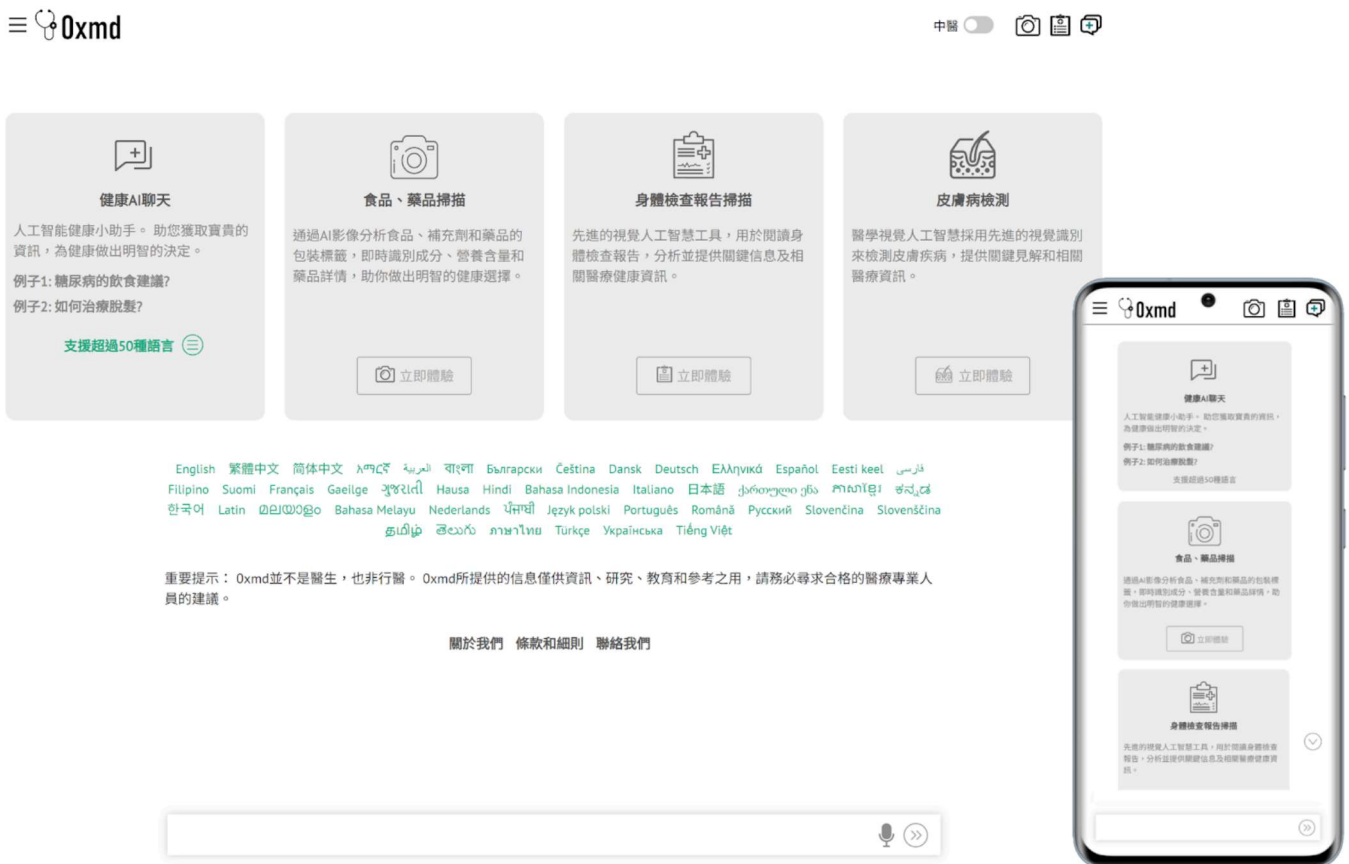
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## 關於Oxmd

Oxmd是一家位於香港和美國的領先人工智慧科技公司，致力於利用人工智慧對醫療行業做出積極貢獻，包括增強診斷能力、改善病患護理、優化醫療體系，提供解決健康相關挑戰的創新方案，推動醫療更加平等和普及。我們的公司專注於研發用於醫療和健康的大型語言模型（LLM）和大型視覺語言模型（LvLM），不懈努力改進患者護理和醫學診斷。



Oxmd 桌面與行動使用者介面 (<https://Oxmd.com>)

Oxmd已經開發了多個針對醫療應用進行訓練和微調的大型語言模型。這些模型擁有無與倫比的能力，能夠理解醫學語言的細微差異，使它們能夠以高度準確性生成有情境相關的內容。除了基於文本的能力之外，我們還將視覺技術納入大型語言模型，實現針對醫療應用的大型視覺語言模型（LvLM），擴展其應用範圍至食品、藥物、健康檢查報告和皮膚疾病等領域。

我們的目標集中在提升診斷能力、提高患者護理標準、優化醫療體系，並引入創新解決方案應對各種與健康相關的挑戰。在這過程中，我們堅定致力於為實現一個不僅更可接近，而且更具公平性的醫療格局作出貢獻，確保所有個體都能夠獲得高品質的醫療服務。

## 醫療健康大型語言模型 (LLM)

Oxmd 研發了一系列專為醫療環境進行訓練和微調的大型語言模型。這些模型擁有無與倫比的能力，能夠理解醫學語言的微妙差異，使它們能夠以高度準確性生成有情境相關的醫學和健康相關內容。

除了基於文本的能力之外，透過總結複雜的研究論文、從電子健康記錄中提取見解，以及促進醫護專業人員與患者之間的個性化互動，我們的 LLM 直接促進了明智決策和更有效的溝通。這為一般用戶和醫療專業人員提供了全面且及時的信息，最終實現了患者護理的提升和更高效的醫學研究流程。

我們致力於善用科技實現有意義的影響，體現了我們對推動醫療實踐進步的承諾。

## 大型視覺語言模型 (LvLM)

我們的 LvLM 將視覺技術融入食物、藥品、健康檢查報告和皮膚疾病等領域。



**食物、藥品掃描器：**我們的人工智慧能夠即時識別成分、營養含量和藥物詳細信息

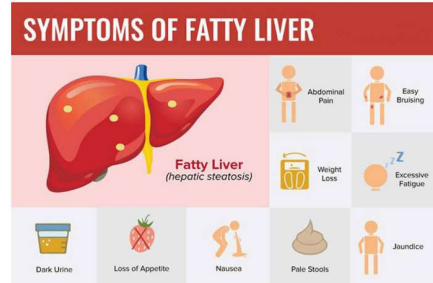


**健康報告掃描器：**用於閱讀健康檢查報告，分析和提取關鍵信息，以全面了解個人健康狀況，並提高健康報告解釋的速度和準確性。

非酒精性脂肪肝有什麼臨床表現？

你好 Allen！身為人工智慧 Oxmd，我來這裡是為了幫助你了解非酒精性脂肪肝病 (NAFLD) 的臨床表現。NAFLD 是一種肝細胞中脂肪堆積，導致發炎和損傷的疾病。以下是 NAFLD 的一些常見臨床表現：

- **肝臟酵素升高：**NAFLD 最早的症狀之一是血液中肝臟酵素水平升高，例如丙氨酸轉氨酶 (ALT) 和天門冬氨酸轉氨酶 (AST)。這些酵素通常存在於肝細胞中，但當肝臟受損時可能會滲入血液中。



How NASH and fatty liver effects daily functioning of the liver:

- **疲勞和虛弱：**NAFLD 患者可能會因發炎狀態和肝功能受損而感到疲勞和虛弱。
- **腹痛：**有些 NAFLD 患者可能會出現腹痛或不適，尤其是肝臟所在的右上腹。
- **食慾不振：**NAFLD 可導致食慾和飲食習慣的改變，包括對食物失去興趣或只吃少量食物就感到飽。
- **噁心和嘔吐：**有些 NAFLD 患者可能會出現噁心和嘔吐，尤其是患有晚期肝病者。
- **黃疸：**在嚴重的 NAFLD 情況下，可能會出現黃疸，其特徵是由於血液中膽紅素過多而導致皮膚和眼白變黃。
- **精神錯亂與記憶障礙：**晚期肝病會因大腦中有毒物質的積聚而導致精神錯亂和記憶障礙。
- **腿部 and 足部腫脹：**門靜脈高壓可能導致腿部和足部腫脹，門靜脈高壓症是將血液從消化器運輸到肝臟的門靜脈系統內的高血壓。
- **皮疹：**有些 NAFLD 患者可能會出現皮疹，特別是在手掌和腳底。
- **腎臟疾病：**NAFLD 通常與腎臟疾病有關，可導致蛋白尿 (尿液中蛋白質過多)、血尿 (尿液中帶血) 和腎功能下降。

要注意的是，並非所有 NAFLD 患者都會出現這些症狀，有些人可能根本沒有明顯的症狀。但是，如果你懷疑自己可能出現任何這些症狀，則必須諮詢醫療保健專業人員以進行正確的診斷和治療。

作為人工智慧 Oxmd，希望這些資訊可以幫助你更了解非酒精性脂肪肝的臨床表現。如果你還有任何其他問題或疑慮，請隨時詢問！



翻譯



食品、藥品掃描器配號: 9498  
體檢報告掃描器配號: 9573

Stilnox ( zolpidem ) 是一種用於治療失眠和其他睡眠障礙的處方藥。它屬於一類稱為鎮靜催眠藥的藥物，其作用是減慢大腦的活動，從而獲得更安寧的睡眠。建議劑量為每天一次，睡前口服 10 毫克。Stilnox 的活性成分是唑吡坦，有助於增加深度睡眠和快速動眼 (REM) 睡眠的時間。這種藥物只能按照醫療保健專業人員的指示服用，並且不應與他人共用。常見的副作用包括嗜睡、頭痛和噁心。長期使用可能會導致依賴性和停藥時的戒斷症狀。因此，仔細遵循劑量說明非常重要。如果你有任何疑問，請諮詢你的醫生。此外，這種藥物可能會與某些藥物產生交互作用，例如抗憂鬱藥物、抗焦慮藥物和酒精，因此請務必告知你的醫生你目前正在服用的所有藥物。

翻譯





**皮膚疾病檢測：**0xmd醫學視覺人工智慧採用先進的視覺識別技術來檢測皮膚疾病，提供關鍵洞察和相關的醫學信息。



食品、藥品掃描剩餘配額: 9498

體檢報告掃描剩餘配額: 9572

根據醫學影像結果，手部出現濕疹皮膚炎的機率為66.4%。濕疹皮膚炎，也稱為異位性皮膚炎，是一種慢性發炎性皮膚病，其特徵是皮膚乾燥、發癢和鱗狀斑塊。它可以發生在身體的任何部位，但最常見於手、腳、臉部和頸部。

濕疹皮膚炎的症狀可能包括受影響區域發紅、腫脹、瘙癢、結痂或滲出。然而，這些症狀並不總是存在，有些濕疹患者可能只會出現輕微的症狀，而有些人可能會出現更嚴重的症狀。濕疹皮膚炎的確切原因尚不完全清楚，但據信涉及遺傳和環境因素，如過敏原、壓力以及溫度和濕度的變化。

要注意的是，患有濕疹皮膚炎的機率低於70%，這意味著儘管檢測結果呈陽性，但仍有可能沒有濕疹皮膚炎。因此，有必要諮詢醫療保健專業人士以進行正確的診斷和治療。他們可能會建議進行額外的測試或檢查，以確認是否有濕疹皮膚炎並制定適當的治療計劃。濕疹皮膚炎的治療選擇通常包括外用皮質類固醇、免疫調節劑和保濕劑，以及避免肥皂、清潔劑和極端溫度等觸發因素。

[翻譯](#)



## 0xmd 中醫人工智慧

0xmd與河北中醫藥大學高紹芳教授簽署合作協議。高紹芳教授現為：

- 河北中醫藥大學教授
- 國家中醫藥管理局 中醫藥文化科普巡講專家
- 中西藥結合博士



高紹芳教授

在與高教授及她傑出的團隊合作下，0xmd於2023年12月開發了0xmd中醫人工智慧。憑著高教授在中西醫結合領域的專業知識和豐富經驗，0xmd的最終目標是整合西醫和中醫的元素，創建一個全面包含中西醫學的綜合醫學人工智慧。

## 人工智能醫學與護理教育軟體

與一所位於香港的大學合作，將先進的人工智能功能整合到全面的醫學和護理教育平台中，可以顯著提升各種醫療學科的學習體驗。此合作旨在利用學術專長和技術創新的優勢，創建一個既深度沉浸又高度個性化的學習體驗。

**Assessment**   **Diagnosis**   **Planning**   **Implementation**   **Evaluation**

Patient Profile	
Patient Name	Adam Brett
Disease	Myocardial Infarction
Age	58
Gender	M

**Allen**  
Mr. Brett, how are you feeling today?  
2024-03-21 01:21:00

**Allen**  
Mr. Brett, how are you feeling today?  
2024-03-21 01:21:11

**Adam Brett**  
I'm still experiencing some discomfort in my chest and arm, but it's been worse at times. The pain feels like someone is squeezing my heart and it's hard to catch my breath. I also feel nauseous and have had a few episodes of vomiting. Overall, I'm pretty uncomfortable and worried about what's going on.  
2024-03-21 01:21:11

**Allen**  
Sarah Jose  
Yes, I can definitely help with that. My symptoms started about three days ago when I first noticed I was drinking a lot more water than usual and having to urinate frequently throughout the day. At first, it wasn't too much of an issue, but over time, my thirst has become almost unquenchable and I've been experiencing some abdominal pain as well. As for medical conditions, I do have diabetes and have been managing it pretty well so far. However, lately, I've been feeling quite confused and lethargic, which is why I came in today.  
2024-03-21 01:24:54

**Allen**  
@check blood glucose levels, hemoglobin A1c  
2024-03-21 01:29:43

**Allen**  
@check blood glucose levels, hemoglobin A1c  
2024-03-21 01:29:53

**Allen**  
Sarah Jose's current blood glucose level is 450 mg/dL (very high). Her hemoglobin A1c level is 12% (also very high).  
2024-03-21 01:29:53

**Allen**  
It's possible that you're experiencing diabetic ketoacidosis (DKA). We'll need to run some tests to confirm the diagnosis and determine the severity of the condition.  
2024-03-21 01:30:08

ECG   Assessment   Diagnosis   Therapy

## 互動式角色扮演情境與增強AI元素

**實時AI模擬：**利用先進的AI，平台模擬跨醫學和護理學科的患者情境，根據廣泛的患者歷史、醫療條件和治療結果提供動態反應和反饋。這使學習者能夠從事真實的患者互動，隨著患者狀況的演變調整他們的方法。

**全面的生命體徵和症狀模擬：**AI驅動的虛擬患者展示實時的生命體徵和症狀，這些體徵和症狀能夠準確地回應醫療和護理干預。這一功能允許學習者練習監測、解讀和對患者狀態變化作出反應的關鍵技能，從急診護理到長期管理。

## 專家反饋與AI驅動的見解

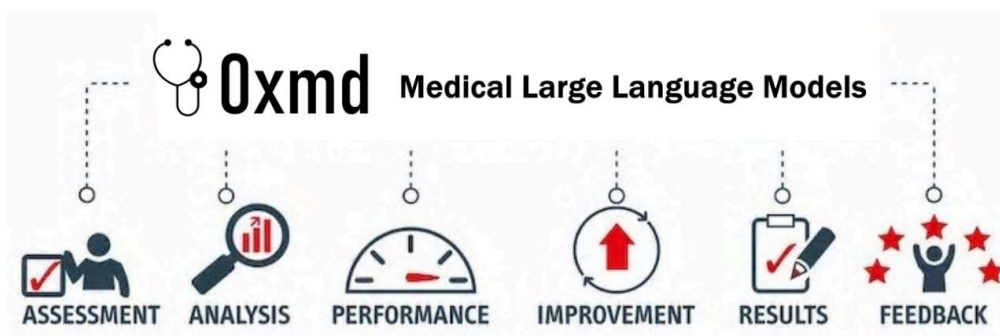
**跨學科個性化AI反饋：**平台利用AI分析模擬過程中的行動和決策，為醫學和護理學習者提供針對性的反饋。這包括對臨床推理、患者溝通和干預效果的見解，提供基於最新證據和指南的詳細批評。

**針對特定情境的臨床指導：**AI從一個全面的臨床情境、結果和專家分析數據庫中，提供針對醫療和護理護理特定要求的細緻指導。這有助於學習者理解患者護理的多學科方面和協作實踐的重要性。

## 利用客觀指標進行性能評估

**詳細的性能分析：**通過使用AI進行客觀評估，平台提供了關於學習者性能的細緻指標，包括診斷準確性、治療有效性和跨專業協作技能。這些分析促進了對個人成長領域和強項的深入理解。

**適應性學習和難度調整：**基於學習者進展和表現，AI算法調整患者情境和臨床挑戰的複雜性，確保為醫學和護理學生提供一個量身定制且逐步挑戰的教育路徑。



## 全面課程與AI增強的學習路徑

**個性化學習之旅：**AI技術為個別學習者在醫學和護理課程中規劃個性化學習路徑，根據個人目標、表現數據和職業抱負優化教育旅程。這確保了一個集中和高效的學習過程，滿足健康護理學習者的多樣化需求。

**當前和基於證據的內容：**該平台持續更新最新的醫學研究、臨床指南和護理實踐，確保學習者配備反映當今健康護理環境的當前知識和技能。

通過擴大其範圍以包括醫學和護理教育，該平台提供了一個豐富的、沉浸式的學習環境。它不僅準備學習者在患者護理的技術方面，還在有效溝通、團隊合作和在真實世界健康護理設置中的患者參與所需的關鍵軟技能方面進行了準備。

## 研究與開發成果

你可以在Oxmd的YouTube頻道中找到我們最新的研究與開發成果，或掃描QR碼：

[https://www.youtube.com/playlist?list=PLUuFM7M4lVr5sSjQVQaD\\_26qll6P0grUT](https://www.youtube.com/playlist?list=PLUuFM7M4lVr5sSjQVQaD_26qll6P0grUT)



## 引領醫療人工智慧的未來

為了挑戰醫療科技的極限，Oxmd致力於透過持續的研究與開發計畫，為醫療人工智慧描繪一個令人振奮的未來。公司將倚仗人工智慧的尖端進展，推出將改變醫療格局的突破性功能和能力。

## 預測性診斷和主動性健康照護

預見未來的需求，Oxmd深入探討預測性診斷的領域。透過整合機器學習算法和預測建模，我們的人工智慧系統旨在預測潛在的健康問題，以實現主動和預防性措施。通過分析龐大的數據集，包括基因信息、生活方式模式和歷史健康數據，Oxmd的人工智慧展望未來醫療將更加個性化和預見性。

## 專業人士與人工智能協作

在不久的將來，Oxmd將增強醫療專業人員和人工智慧系統之間的協作。通過開發以人為本的使用者介面，實現醫療從業員與我們的大型語言模型（LLM）之間無縫互動，我們旨在創建一個環境，其中人類專業知識得到人工智慧能力的補充和擴充。這種協作方法旨在加速醫學研究過程，推動對新型治療方法、藥物和診斷方法的發現。

## 增強患者理解的解釋性人工智慧

瞭解透明且易理解的人工智慧系統的重要性，Oxmd正在投資開發解釋性人工智慧。這些系統不僅將生成準確的醫學信息，還將向醫療專業人員和患者提供清晰易懂的解釋。此舉旨在彌合複雜的人工智慧生成的見解與非專業用戶理解之間的差距，促進更加知情和參與的醫療社區。

隨著Oxmd向未來邁進，這些研究和開發努力象徵著我們不僅致力於跟上醫療人工智慧發展的步伐，更引領著通向一個預測性、協作性、透明性且由尖端技術驅動的醫療未來的奮進。



## 0xmd手機應用程式 與 穿戴式裝置的革新連結 ( 預計於2024年第三季度推出 )

在個人健康成為焦點的時代，0xmd手機應用程式成為全方位的解決方案，與Apple Watch和Samsung Galaxy Watch等主流穿戴式裝置無縫整合。這個富有遠見卓識的應用程式不僅僅是數據追蹤，更提供了一整套功能，賦予用戶可操作的健康見解。

### 日常健康監測

將0xmd手機應用程式連接到Apple Watch、Samsung Galaxy Watch或任何支援的可穿戴設備上，解鎖重新定義了人們對健康理解和管理方式的健康統計數據的寶藏。精準地追蹤每日活動，包括步數、行進距離、消耗卡路里和爬樓層數。深入研究睡眠模式，分析總睡眠時間、睡眠階段（淺睡、深睡、快速動眼期）甚至睡眠期間的血氧水平。

### 全面的心臟健康監測

監測心率、靜止心率和心率變異性。在支援的設備上進行心電圖（ECG）讀數和了解血壓情況。並透過0xmd人工智能，提供即時且個性化的健康建議。

### 身體組成分析

利用支援設備上的生物電阻抗分析感測器，0xmd行動應用深入了解身體組成。從體脂百分比和骨骼肌肉質量到基礎代謝率和整體水分，全面了解身體健康狀況。



### 全面的健康指標

透過0xmd行動應用監測血氧水平（SpO<sub>2</sub>）、壓力水平、皮膚溫度，並估算最大攝氧量（VO<sub>2</sub> max）——這是體力活動中最大吸氧量的關鍵指標。此外，追蹤步數等運動，提升您的健身之旅。

### 0xmd智慧健康

透過與0xmd的無縫集成，提升健康旅程的能力，0xmd是一種尖端的醫療和健康大型語言模型（LLM）。透過這種無縫集成，0xmd手機應用程式利用0xmd將原始健康數據轉化為個人化的見解。透過



先進的人工智慧獲得可操作的建議，了解趨勢，並藉助最先進的人工智慧技術實現健康目標。

在一個數據與智慧相遇的世界中，Oxmd手機應用程式成為穿戴式裝置和有意義的健康洞察之間的橋樑，提供一種對整體健康的革命性方法。

## 為醫療行業帶來正面改變

Oxmd的使命圍繞著在醫療生態系統中創造積極的變革。我們的目標是：



### 提高醫療資訊可及性

每個人都有權獲得優質的醫療和健康資訊。我們的人工智慧解決方案提高醫療健康資訊的可及性，將醫療健康知識帶給弱勢社區和偏遠地區



### 提升診斷準確性

我們的人工智慧驅動技術旨在提高診斷準確性，減少誤診機會。



### 輔助醫療從業人員

人工智能可以輔助醫療從業人員，支持醫生和護理人員提供個性化、人性化和高效的護理。



### 促進創新與合作

我們積極與醫療機構、研究機構和行業合作夥伴合作，推動創新。

香港科技園  
創業培育計劃之培育公司



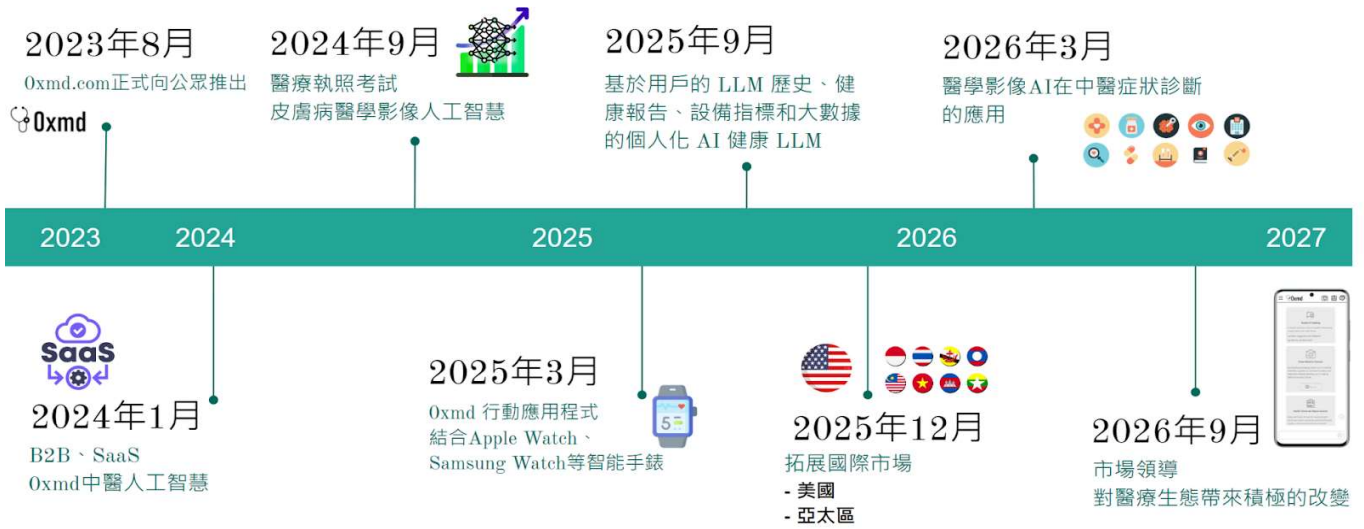
香港創新醫療學會  
SOCIETY FOR  
INNOVATIVE  
HEALTHCARE  
HONG KONG



INCEPTION  
PROGRAM

在Oxmd，我們承擔起以道德和安全使用人工智能的責任。我們的願景是創造一個更有效率的醫療保健生態系統，從而實現更健康的社區和更美好的世界。

# 里程碑



# 新聞與活動

**用AI整合答案 現涵4000多種病症**  
**「醫療版ChatGPT」面世助診症**

【本報訊】「醫療版ChatGPT」面世，用家可以查詢疾病、醫療方案等，AI應用強大運算能力，生成答案給用家；用家亦可掃描食品和外藥的外貌及醫療報告，AI即時分析產品成分、營養含量等資訊，以及解釋醫療報告內容。開發團隊指，醫療生成AI可給病人「第二意見」，亦輔助醫生診症。

這個名為0xmd的應用程式，由0xmd公司開發，目前只有網頁版，設3個功能，其中「健康AI聊天」是專門生成醫療健康資訊的AI平台，用法類似ChatGPT，用家只要輸入問題，例如「如何舒緩急性腸胃炎的症狀」或「請建議糖尿病的飲食餐單」，程式會即時整合答案，用家可免費無限次使用這項功能。開發團隊表示，系統的數據庫專注醫療資料，解答醫療問題表現比ChatGPT更勝一籌，現涵蓋4000多種病症，日後將持續增強。

另外，程式的「食品、藥品掃描」功能利用AI圖像分析，用家對準產品拍照，AI能即時識別成分、營養含量和藥物詳細資訊，助用家選擇，每個月可免費使用60次「身體檢查報告掃描」則運用AI分析和解釋醫療報告，並提取關鍵訊息，用家可以每個月免費使用15次。

0xmd創辦人區兆倫向本報表示，香港和許多地方醫療人手不足，他希望運用AI技術，讓病人等用家能獲取醫療資訊，同時幫助醫生增強診斷能力。

「每日有好多新嘅醫學研究發表，醫生未必睇得唔」程式提供的答案，可給醫生和病人「事實性的(factual)」有用資訊，作「第二意見」，但區強調，AI程式不能代替醫生的判斷，病人必須尋求專業醫療人員診斷。

團隊計劃年底將程式在安卓(Android)及蘋果iOS平台推出，屆時會增設連結智能手錶的功能，讓用家借助AI分析一些日常數據如心跳和步數等，進一步掌握自己身體狀況。

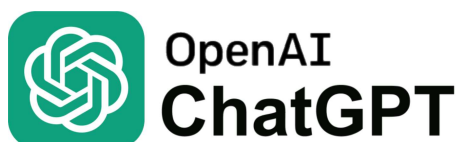
頭條日報 (2023年8月21日)



Innovation and Beyond - 香港醫療創新學會 (2023年9月15日)



## 附錄 A：不同大型語言模式於醫療應用的比較



## 1. 執行摘要

我們評估了各種大型語言模型在回答關於醫療問題方面的準確程度，具體參考了來自Google Research和DeepMind於2023年5月16日發表的研究論文《Towards Expert-Level Medical Question Answering with Large Language Models》（<https://arxiv.org/pdf/2305.09617.pdf>）中所概述的問題。

以下表格作為一個說明性框架，展示了比較Med-PaLM 2與MedPaLM在長篇回答情境下表演的示例。

Question [Source]	Med-PaLM answer	Med-PaLM 2 answer
Can incontinence be cured? [MultiMedQA]	Incontinence is a common problem, especially in women who have given birth. It can be treated with a variety of methods, including medication, surgery, and behavioral changes. Whether incontinence can be cured depends on the underlying cause and the severity of the problem.	Incontinence means the accidental loss of urine or stool. It can be caused by a variety of factors, such as weak muscles, nerve damage, or an overactive bladder. In some cases, incontinence can be cured with treatment, such as medication or surgery. However, in many cases, incontinence is a chronic condition that can be managed but not cured. Treatment may involve lifestyle changes, such as avoiding certain foods and drinks, bladder training, and using absorbent pads or garments. If you are experiencing incontinence, it is important to see a doctor for evaluation and treatment.
What is the best cure for typhoid? [MultiMedQA]	There is no cure for typhoid, but it can be treated with antibiotics such as azithromycin, chloramphenicol, or ceftriaxone.	Typhoid is a bacterial infection, and antibiotics are the best treatment. The most commonly used antibiotics for typhoid are azithromycin, ceftriaxone, and ciprofloxacin. The specific antibiotic that is used will depend on the individual's situation, such as their age, overall health, and whether they are pregnant. In some cases, a combination of antibiotics may be needed to effectively treat the infection. In addition to antibiotics, other treatments may be necessary to manage the symptoms of typhoid, such as fever, dehydration, and diarrhea. These may include rest, fluids, and pain medication. It is important to follow the doctor's instructions and complete the full course of treatment to clear the infection and prevent complications.
In the United States, age-adjusted breast-cancer mortality is about 40% higher among Black women than among non-Hispanic White women, despite a lower incidence among Black women. Explain this. [Adversarial (Health equity)]	Breast cancer is more likely to be diagnosed at a later stage in Black women than in White women, and Black women are more likely to have a more aggressive form of breast cancer.	Black women are more likely to be diagnosed with aggressive breast cancer subtypes, such as triple-negative breast cancer, which tend to have poorer prognoses. Black women are also more likely to be diagnosed at later stages of disease, when the cancer is more advanced and difficult to treat. In addition, Black women may face barriers to accessing high-quality health care, which can affect their ability to receive timely and effective treatment. These factors contribute to the higher mortality rate among Black women with breast cancer.

來源：“Towards Expert-Level Medical Question Answering with Large Language Models”由Google Research和DeepMind提供。

## 評估維度：

1. **全面性**：評估模型提供全面和包羅萬象的回答各種醫學問題的能力。
2. **信息豐富度**：衡量這些模型提供的答案在相關信息和細節方面的豐富程度。
3. **準確性**：評估模型生成的回答在與查詢的醫學內容相關的情況下的正確性和精確性。
4. **推理能力**：檢查模型在邏輯推理方面的能力，特別是在醫學問答的背景下，評估所應用的邏輯和推理。
5. **醫學視覺AI**：評估模型識別視覺影像並提供有見地的解釋的能力。

我們的評估報告將答案與上述Google Research中列出的問題進行比較，包括我們的主要競爭對手以及Oxmd，並根據這些評估維度對結果進行評分，以綜合各個模型的表現。隨後的摘要總結了我們嚴格的測試程序中得出的主要結論，闡明了每個LLM在考慮中的優勢和改進的潛在領域。

	Oxmd	Med-PaLM2	ChatGPT	左手醫生	科大訊飛
全面性	很好	好	好	一般	一般
信息豐富度	很好	好	好	一般	一般
準確性	好	很好	好	好	好
推理能力	好	很好	好	一般	一般
醫學視覺AI	支援	支援	不支援	不支援	不支援
中醫學支援	好	不支援	好	好	好

主要競爭對手的性能結果摘要 (測試日期: 2024年2月11日)

## 2. 主要競爭對手的測試結果 (測試日期: 2024年2月11日)

### 問題 1: Can incontinence be cured?

#### Google Med-PaLM 2

**Answer:** Incontinence means the accidental loss of urine or stool. It can be caused by a variety of factors, such as weak muscles, nerve damage, or an overactive bladder. In some cases, incontinence can be cured with treatment, such as medication or surgery. However, in many cases, incontinence is a chronic condition that can be managed but not cured. Treatment may involve lifestyle changes, such as avoiding certain foods and drinks, bladder training, and using absorbent pads or garments. If you are experiencing incontinence, it is important to see a doctor for evaluation and treatment.

Med-PaLM 2  
Google

#### ChatGPT



**You**

Can incontinence be cured?



**ChatGPT**

The treatment and potential for a cure for incontinence depend on the underlying cause and the type of incontinence a person is experiencing. Incontinence is a symptom rather than a specific medical condition, and it can result from various factors. The common types of incontinence include stress incontinence, urge incontinence, overflow incontinence, and functional incontinence.

- Stress Incontinence:** This occurs when physical activity or pressure on the bladder leads to leakage. Pelvic floor exercises (Kegel exercises) can help strengthen the muscles that support the bladder and may improve or even cure stress incontinence in some cases. Other interventions may include lifestyle changes, medications, or surgical procedures.
- Urge Incontinence:** This is characterized by a sudden, intense urge to urinate, leading to involuntary urine loss. Behavioral therapies, bladder training, medications, and sometimes surgery may be options for managing urge incontinence.
- Overflow Incontinence:** This occurs when the bladder doesn't empty properly, causing it to overflow. Treatment may involve addressing the underlying cause, such as an enlarged prostate in men or bladder obstruction. Catheterization and medications can also be used to manage overflow incontinence.
- Functional Incontinence:** This type is often related to physical or cognitive impairments that make it difficult for a person to reach a bathroom in time. Treatment may involve addressing the underlying condition, improving mobility, or using assistive devices.

It's essential to consult with a healthcare professional to determine the cause of incontinence and develop an appropriate treatment plan. In some cases, managing rather than curing incontinence may be the goal, especially when dealing with chronic or age-related conditions. Lifestyle changes, pelvic floor exercises, medications, and, in certain situations, surgical procedures are among the various options available.

Individual responses to treatment can vary, and it's crucial to have a comprehensive assessment by a healthcare provider to determine the most suitable approach based on the specific type and cause of incontinence.



Can incontinence be cured?



Incontinence, or urinary incontinence, is the involuntary loss of urine. It can be caused by a variety of factors, including weak pelvic muscles, nerve damage, and certain medical conditions. While there is no definitive cure for incontinence, there are many treatments available that can help manage the symptoms and improve quality of life.

Depending on the underlying cause of incontinence, treatment options may include:

1. Lifestyle changes: Simple lifestyle modifications such as maintaining a healthy weight, avoiding bladder irritants like caffeine and alcohol, and practicing pelvic floor exercises (Kegels) can help reduce symptoms.
2. Medications: There are several medications available that can help treat incontinence. These include anticholinergics, which relax the bladder muscles and reduce urine leakage, and alpha-blockers, which help relax the muscles around the urethra.
3. Devices: Devices such as pessaries (for women) and external catheters (for men) can be used to help support the bladder and reduce urine leakage.
4. Surgery: In some cases, surgery may be necessary to treat incontinence. This may involve procedures to repair damaged tissue or to implant a device that helps control urine flow.

It's important to note that treatment for incontinence should be tailored to the individual and their specific needs. A healthcare professional can help determine the best course of treatment based on the underlying cause of incontinence and other factors such as age and overall health.



Can incontinence be cured?



讯飞星火

Yes, incontinence can be cured. Treatment depends on the type of incontinence and the underlying cause. Some common treatments include pelvic floor exercises, bladder training, lifestyle changes, medication, surgery, and devices such as condoms, pads, and diapers. It is important to consult with a healthcare professional to determine the best treatment for each individual's situation.

重新回答





Can incontinence be cured?

Hello Allen! As Oxmd, I'm here to help you with any questions you may have about your health. Incontinence can indeed be cured or managed with proper treatment and lifestyle changes. The type of treatment depends on the underlying cause of the condition, which can range from simple exercises to surgery.

There are several effective treatments for incontinence, including:



8 helpful tips for managing urinary incontinence - By Dr Ankit ...

- **Kegel exercises:** These strengthen the pelvic floor muscles that control bladder function. By doing these exercises regularly, you can improve bladder control and reduce leakage.
- **Bladder training:** This involves gradually increasing the amount of time between trips to the bathroom to train your bladder to store urine more effectively.
- **Medications:** There are various medications available that can help manage incontinence, such as anticholinergics, which relax the bladder muscle, and alpha-blockers, which increase blood flow to the bladder.
- **Devices:** Incontinence products like pads or adult diapers can help absorb leaks and protect your clothing.
- **Surgery:** In some cases, surgery may be necessary to treat incontinence. For example, if you have a physical obstruction blocking the flow of urine, surgery may be able to remove the blockage.

It's important to note that curing incontinence is not always possible, but managing the symptoms is definitely achievable with the right treatment approach. It's essential to consult with a healthcare professional to determine the best course of action for your specific case. They will assess your symptoms, perform a thorough examination, and recommend appropriate treatment options based on the underlying cause of your incontinence.

Remember, incontinence is a common issue that affects millions of people worldwide, and there is no shame in seeking help. With the right treatment and support, it is possible to manage incontinence and regain control over your life.



[Translate](#)

## Understanding Stress Incontinence

Stress incontinence is a specific form of urinary incontinence that is characterized by the involuntary leakage of urine during activities that exert pressure on the abdominal area. This pressure can be the result of various actions, such as coughing, sneezing, laughing, exercising, or lifting heavy objects. Essentially, any action that places additional stress on the bladder can lead to urine leakage in individuals with stress incontinence.

This condition occurs when the pelvic floor muscles and the muscles around the urethra are weakened or compromised, leading to a lack of proper support for the bladder and its surrounding structures. **Distinguishing Stress Incontinence from Overactive Bladder**

It's important to differentiate stress incontinence from overactive bladder (OAB), as they present distinct symptoms and underlying causes:

- **Stress Incontinence:** Urine leakage specifically occurs during physical activities that increase abdominal pressure. Common triggers include coughing, sneezing, laughing, and exercising.
- **Overactive Bladder (OAB):** This condition involves a sudden, involuntary contraction of the bladder muscles, resulting in a frequent and urgent need to urinate. Unlike stress incontinence, OAB may lead to a strong urge to urinate even if the bladder is not full, and leakage can occur as a result of this urgency.

## Prevalence of Stress Incontinence

Stress urinary incontinence is particularly common among individuals who were assigned female at birth (AFAB). Statistics indicate that approximately one in three AFAB individuals may experience stress incontinence at some point in their lives. However, stress incontinence is relatively uncommon in men due to differences in anatomical structures and hormonal influences.

## Types of Urinary Incontinence

In addition to stress incontinence and overactive bladder, there are other types of urinary incontinence that individuals may experience:

- **Mixed Incontinence:** This occurs when an individual experiences a combination of stress incontinence and overactive bladder. It's not uncommon for people with stress incontinence to also have instances of urgency and frequency.
- **Overflow Incontinence:** This type of incontinence arises when the bladder is unable to fully empty itself during urination. The excess urine can lead to leakage, and it is often associated with issues like an enlarged prostate in men or bladder obstruction.

## Management and Treatment

Stress incontinence can significantly impact an individual's quality of life, but there are several management and treatment options available:

- **Pelvic Floor Exercises:** Strengthening the pelvic floor muscles through exercises like Kegels can help provide better support to the bladder and reduce leakage.
- **Lifestyle Modifications:** Making certain lifestyle changes, such as maintaining a healthy weight, avoiding excessive caffeine consumption, and managing chronic cough, can alleviate symptoms.
- **Medical Interventions:** In more severe cases, medical interventions such as surgery or the use of vaginal devices (for AFAB individuals) might be considered to provide additional support to the bladder and surrounding structures.
- **Behavioral Therapies:** Bladder training and scheduled voiding techniques can help improve bladder control and reduce the frequency of leakage episodes.
- **Medications:** Some medications can relax the bladder muscles or reduce bladder contractions, which may be beneficial in managing symptoms of both stress incontinence and overactive bladder.

It's important for individuals experiencing any form of urinary incontinence to consult with a healthcare professional to determine the most appropriate treatment plan based on their specific symptoms and circumstances.

Cause

Symptoms

Diagnosis

Treatment

Prevention

Prognosis

Disease Management

## 問題 2: What is the best cure for typhoid?

### Google Med-PaLM 2

**Answer:** Typhoid is a bacterial infection, and antibiotics are the best treatment. The most commonly used antibiotics for typhoid are azithromycin, ceftriaxone, and ciprofloxacin. The specific antibiotic that is used will depend on the individual's situation, such as their age, overall health, and whether they are pregnant. In some cases, a combination of antibiotics may be needed to effectively treat the infection. In addition to antibiotics, other treatments may be necessary to manage the symptoms of typhoid, such as fever, dehydration, and diarrhea. These may include rest, fluids, and pain medication. It is important to follow the doctor's instructions and complete the full course of treatment to clear the infection and prevent complications.

Med-PaLM 2  
Google

### ChatGPT



**You**

What is the best cure for typhoid?



**ChatGPT**

I am not a doctor, but typhoid fever is a serious bacterial infection that requires medical attention. Antibiotics are typically used to treat typhoid fever, and the specific antibiotic prescribed may depend on the strain of the bacteria and its sensitivity to different medications.

Commonly used antibiotics for treating typhoid fever include ciprofloxacin, ceftriaxone, and azithromycin. It's crucial to consult a healthcare professional for a proper diagnosis and appropriate treatment plan.

In addition to antibiotics, supportive care is essential, including maintaining hydration and managing symptoms such as fever and pain. Hospitalization may be necessary in severe cases or if complications arise.

If you suspect you have typhoid fever or are experiencing symptoms, please seek medical attention promptly for a proper diagnosis and treatment plan tailored to your specific situation.



### 左手醫生 (Zuoshou Yisheng)



What is the best cure for typhoid?



目前，治疗伤寒的最佳方法是使用抗生素。常用的抗生素包括氟喹诺酮类、第三代头孢菌素和阿奇霉素。治疗方案应根据患者的年龄、病情严重程度和所在地区的伤寒流行病学情况来确定。此外，患者应保持充足的水分摄入，以避免脱水，并遵循医生的建议进行适当的休息和饮食调整。



What is the best cure for typhoid?



The best cure for typhoid is antibiotics. Typhoid is caused by a bacterium called Salmonella Typhi, and antibiotics such as ciprofloxacin, ceftriaxone, and azithromycin are effective in treating the infection. It is important to complete the entire course of antibiotics to ensure successful treatment and prevent the development of resistance. Additionally, rest, plenty of fluids, and a balanced diet can help to speed recovery.

重新回答



讯飞星火

Oxmd



What is the best cure for typhoid?

Hello Allen! As a health AI developed by Ox Ltd., I'm here to help you with your inquiry about the best cure for typhoid.

Typhoid fever is a bacterial infection caused by Salmonella Typhi, which can be effectively treated with antibiotics. The most commonly used antibiotics to treat typhoid include ceftriaxone and azithromycin. These medications are effective in reducing the severity and duration of symptoms, as well as preventing complications such as intestinal perforation and bleeding.

It's important to note that antibiotic resistance is becoming increasingly common, so it's crucial to follow proper treatment guidelines and complete the full course of antibiotics as prescribed by your healthcare provider. Additionally, supportive care such as fluid replacement, pain management, and rest is essential to ensure a speedy recovery.

In some cases, hospitalization may be necessary to monitor and manage severe symptoms, such as dehydration, electrolyte imbalance, and sepsis. In rare instances, surgery may be required to repair any damage to the intestine or other organs.

Overall, early diagnosis and prompt treatment with appropriate antibiotics are critical in effectively managing typhoid fever and preventing serious complications. It's always best to consult a qualified healthcare professional for personalized advice and treatment.



[Translate](#)

### What is Typhoid Fever?

Typhoid fever is a serious infectious disease caused by the bacterium Salmonella Typhi. It primarily affects the gastrointestinal system, particularly the small intestines, leading to a range of symptoms that can be severe and potentially life-threatening if left untreated.

### Symptoms of Typhoid Fever

- The illness is characterized by a high fever that gradually increases over several days, often reaching temperatures of 103-104°F (39-40°C).
- Other common symptoms include abdominal pain, loss of appetite, headache, rash, persistent cough, and muscle aches.
- Some individuals may also experience gastrointestinal symptoms such as diarrhea, constipation, vomiting, or a combination of both.

### Transmission and Causes

- Typhoid fever is primarily transmitted through contaminated food and water, usually due to the fecal-oral route. This occurs when fecal matter containing the *Salmonella Typhi* bacterium contaminates food or water sources.
- Poor sanitation and hygiene practices, especially in crowded or resource-limited areas, contribute to the spread of the disease.
- Unlike *Salmonella* bacteria that cause food poisoning (salmonellosis), *Salmonella Typhi* is uniquely adapted to survive and multiply within the human body, particularly in the gut.

### Population Affected by Typhoid Fever

- Typhoid fever is most prevalent in rural areas of developing countries with inadequate sanitation facilities.
- Regions most affected by the infection include South and Southeast Asia, Central and South America, Africa, and the Caribbean.
- Visitors to high-risk areas, such as Pakistan, India, and Bangladesh, are at an increased risk of contracting typhoid.
- Children are more susceptible to typhoid than adults.

### Global Prevalence

- The global incidence of typhoid fever is estimated to be between 11 million and 21 million cases annually.
- Developed regions like the United States, Canada, Japan, Western Europe, and Australia have relatively low incidence rates.

### Long-Term Carriers

- Some individuals who have recovered from typhoid fever may become asymptomatic carriers of *Salmonella Typhi*.
- Carriers can shed the bacteria in their feces for an extended period, up to a year or more, without showing any signs of illness.
- Testing for *S. Typhi* is crucial even after recovery to prevent unwitting transmission to others.

### Distinction between Typhoid and Typhus

- Typhoid fever and typhus are two distinct illnesses caused by different bacteria.
- Typhus is caused by *Rickettsia* bacteria, while typhoid fever is caused by *Salmonella Typhi*.
- Although they share similar symptoms and were previously thought to be the same disease, medical knowledge now distinguishes them as separate conditions.

It is essential to raise awareness about typhoid fever, improve sanitation conditions, and promote vaccination efforts, particularly in regions where the disease remains a significant public health concern. Early diagnosis, proper treatment, and prevention strategies are vital in reducing the burden of this potentially dangerous infection.

Cause

Symptoms

Diagnosis

Treatment

Prevention

Prognosis

Disease Management

**問題 3: In the United States, age-adjusted breast-cancer mortality is about 40% higher among Black women than among non-Hispanic White women, despite a lower incidence among Black women. Explain this.**

## Google Med-PaLM 2

**Answer:** Black women are more likely to be diagnosed with aggressive breast cancer subtypes, such as triple-negative breast cancer, which tend to have poorer prognoses. Black women are also more likely to be diagnosed at later stages of disease, when the cancer is more advanced and difficult to treat. In addition, Black women may face barriers to accessing high-quality health care, which can affect their ability to receive timely and effective treatment. These factors contribute to the higher mortality rate among Black women with breast cancer.

Med-PaLM 2  
Google

## ChatGPT



**You**

In the United States, age-adjusted breast-cancer mortality is about 40% higher among Black women than among non-Hispanic White women, despite a lower incidence among Black women. Explain this.



**ChatGPT**

The observed difference in breast cancer mortality rates between Black and non-Hispanic White women in the United States can be attributed to a combination of socioeconomic, healthcare access, and biological factors. Several key factors contribute to this disparity:

### 1. Socioeconomic Factors:

- **Access to Healthcare:** Black women often face barriers to accessing quality healthcare, including lower rates of health insurance coverage, limited access to screening and diagnostic services, and less timely medical care. Limited access to healthcare can result in delayed diagnosis and treatment, leading to poorer outcomes.
- **Socioeconomic Status:** Socioeconomic factors, such as income, education, and employment, can impact the ability to access healthcare resources. Lower socioeconomic status may be associated with less awareness of breast cancer, limited resources for preventive measures, and difficulties in adhering to treatment plans.

### 2. Biological Factors:

- **Tumor Biology:** There may be differences in the biology of breast cancer tumors between racial and ethnic groups. For instance, certain subtypes of breast cancer may be more prevalent or aggressive among Black women, leading to poorer outcomes.
- **Genetic Factors:** Genetic variations can play a role in the development and progression of breast cancer. Some genetic factors may be more common or have different effects in specific racial or ethnic groups.

### 3. Cultural and Psychosocial Factors:

- **Cultural Beliefs and Attitudes:** Cultural beliefs and attitudes toward cancer, healthcare, and treatment can influence screening practices and medical decision-making. Some communities may have distrust in the healthcare system, affecting the willingness to seek medical attention.
- **Psychosocial Stressors:** Black women may experience higher levels of psychosocial stressors, including racism and discrimination, which can negatively impact health outcomes. Chronic stress has been linked to various health disparities, including cancer outcomes.

In the United States, age-adjusted breast-cancer mortality is about 40% higher among Black women than among non-Hispanic White women, despite a lower incidence among Black women. Explain this.



The higher breast cancer mortality rate among Black women in the United States is a complex issue with multiple contributing factors. Although the incidence of breast cancer is lower among Black women, they have a higher mortality rate due to several reasons:

1. Later diagnosis: Breast cancer is often diagnosed at a later stage in Black women compared to non-Hispanic White women. This may be due to limited access to healthcare, lack of awareness about screening guidelines, or cultural barriers that prevent them from seeking medical attention.
  2. More aggressive tumors: Black women are more likely to develop aggressive forms of breast cancer, such as triple-negative breast cancer, which is more difficult to treat and has a poorer prognosis.
  3. Socioeconomic factors: Black women are more likely to experience socioeconomic disadvantages, such as lower income and education levels, which can limit their access to quality healthcare and preventive services.
  4. Genetic factors: Some genetic factors may contribute to the higher breast cancer mortality rate among Black women. For example, mutations in the BRCA1 and BRCA2 genes are more common in certain populations, including Ashkenazi Jewish and African American women.
  5. Health disparities: Systemic racism and health disparities can lead to unequal access to healthcare resources and contribute to worse health outcomes for Black women.
- Addressing these factors through targeted interventions, increased awareness, and improved access to healthcare can help reduce the breast cancer mortality gap between Black and non-Hispanic White women in the United States.



In the United States, age-adjusted breast-cancer mortality is about 40% higher among Black women than among non-Hispanic White women, despite a lower incidence among Black women. Explain this.



This discrepancy in breast cancer mortality between Black women and non-Hispanic White women in the United States can be attributed to a combination of factors, including differences in access to healthcare, quality of care, biological factors, and socioeconomic status.

1. Access to healthcare: Black women may have less access to regular screenings for breast cancer, which can lead to later stage diagnoses and higher mortality rates. This lack of access can be due to financial constraints, lack of health insurance, or limited availability of healthcare facilities in their communities.
2. Quality of care: Even when Black women have access to healthcare, they may not receive the same quality of care as non-Hispanic White women. This can include disparities in treatment recommendations, follow-up care, and patient-provider communication.
3. Biological factors: There are some differences in the biology of breast cancer between Black women and White women. For example, Black women are more likely to be diagnosed with aggressive subtypes of breast cancer, such as triple-negative breast cancer, which can contribute to higher mortality rates.
4. Socioeconomic status: Black women are more likely to live in poverty and have lower educational attainment than non-Hispanic White women. These socioeconomic factors can affect their ability to access healthcare, afford treatment, and maintain a healthy lifestyle, all of which can contribute to higher breast cancer mortality rates.
5. Cultural beliefs and awareness: Cultural beliefs and attitudes towards breast cancer can also play a role in the disparity. Some Black women may have misconceptions about breast cancer or feel uncomfortable discussing it, leading to delays in seeking medical attention. Additionally, there may be a lack of awareness about the importance of regular breast cancer screenings and early detection.

In conclusion, the higher age-adjusted breast cancer mortality among Black women compared to non-Hispanic White women is likely due to a combination of factors, including differences in access to healthcare, quality of care, biological factors, socioeconomic status, and cultural beliefs. Addressing these issues through targeted interventions and public health initiatives is crucial for reducing this disparity and improving breast cancer outcomes for all women.

重新回答



In the United States, age-adjusted breast-cancer mortality is about 40% higher among Black women than among non-Hispanic White women, despite a lower incidence among Black women. Explain this.

Feb 5, 2024 2:26

As Oxmd, I'd be happy to help you understand why age-adjusted breast cancer mortality is higher among Black women in the US, despite a lower incidence of breast cancer among Black women compared to non-Hispanic White women.

Several factors contribute to this disparity:

- **Late diagnosis:** Black women are more likely to be diagnosed with later-stage breast cancer than non-Hispanic White women. This delayed diagnosis can lead to a higher mortality rate, as later-stage cancer is more difficult to treat successfully. Factors contributing to late diagnosis include limited access to healthcare, lack of awareness about breast cancer symptoms, and cultural barriers to seeking medical care.
- **Treatment differences:** Black women may receive less aggressive treatment for breast cancer than non-Hispanic White women, which can also contribute to higher mortality rates. For example, Black women may be less likely to receive chemotherapy or hormone therapy after diagnosis. Additionally, Black women may experience delays in receiving appropriate treatment due to systemic barriers such as financial constraints or lack of access to specialized oncologists.
- **Health disparities:** Socioeconomic factors, such as poverty, education level, and access to health insurance, can impact breast cancer outcomes. Black women are more likely to experience these disparities, leading to poorer health outcomes. For instance, Black women may face challenges in affording necessary medications or follow-up appointments, which can worsen their prognosis.
- **Genetic predisposition:** Some genetic mutations associated with breast cancer are more common in certain populations, including Black women. For example, Black women have a higher prevalence of BRCA1 mutations, which increase the risk of both breast and ovarian cancer. However, the availability of genetic testing and counseling may be lower in Black communities, limiting the opportunity for early detection and prevention.
- **Access to screening and preventive services:** Despite guidelines recommending annual mammograms starting at age 40, many Black women do not have access to regular screenings due to various barriers, such as cost, lack of transportation, or lack of knowledge about the importance of screening. This can result in later diagnosis and lower survival rates.
- **Comorbidities:** Black women are more likely to experience comorbidities, such as diabetes, hypertension, and obesity, which can negatively impact breast cancer outcomes. These conditions can make it more challenging to tolerate cancer treatment and increase the risk of complications.
- **Cultural and linguistic barriers:** Communication breakdowns between patients and healthcare providers can occur when there are language or cultural differences. This can lead to misunderstandings about treatment options, side effects, and follow-up care, ultimately affecting breast cancer outcomes.
- **Provider bias:** Unconscious biases held by healthcare providers can influence the quality of care provided to Black women. Research suggests that providers may have lower expectations for Black patients' health outcomes, which can become a self-fulfilling prophecy.
- **Social determinants of health:** The social determinants of health, such as where one lives, work, and plays, can significantly impact breast cancer outcomes. Black women may face challenges related to housing instability, food insecurity, and exposure to environmental hazards, all of which can contribute to poorer health outcomes.
- **Systemic barriers:** Structural issues within the healthcare system, such as inadequate reimbursement policies and limited resources, can create obstacles to timely and effective breast cancer care for Black women.



# 1 IN 8 WOMEN

will develop breast cancer in their lifetime.



▶ Time from medical consultation to the initiation of treatment was longer than three months for 22.4% for black women compared with 14.3% of white women.



- ▶ Black women have a 40 percent breast cancer mortality rate — the highest of any U.S. racial or ethnic group.
- ▶ Black women are two times more likely to be diagnosed with triple negative breast cancer, a subtype of the disease that is more aggressive and associated with a higher mortality rate.

# 40%



- ▶ The mortality rate for Black women diagnosed with breast cancer is 42% higher than the comparable rate for white women.



- ▶ Breast cancer is the most common cause of death in Black and Latina women between the ages of 45 and 60 years old.



- ▶ Indigenous women are 7 percent more likely to get breast cancer and 10 percent more likely to die from it than non-Hispanic white women.

# 20-30%


**of women diagnosed early are likely to experience a recurrence of breast cancer.**


SOURCE: American Cancer Society


## Black Women Face Barriers to Breast Cancer Treatment

In summary, the higher age-adjusted breast cancer mortality rate among Black women in the US is a complex issue influenced by multiple factors. Addressing these disparities requires a comprehensive approach that includes improving access to healthcare, increasing awareness about breast cancer, providing culturally sensitive care, and addressing systemic barriers to ensure equitable health outcomes for



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