

# WHO

World Health Organization



LASALLECUNMUN  
2026

“International regulation of  
artificial intelligence in  
healthcare: risks and benefits in  
diagnostics and treatment.”

BACKGROUND GUIDE





Distinguished delegates,

It is an honor for my chair and me to welcome you to LASALLECUNMUN2026. My name is Adrienne Cajun, and I will be your President in this year's model, alongside Diana Orozco as Moderator and America Cocom as Conference Officer, we hope you can enjoy this journey as much as we do.

In my first year, I had the opportunity to participate as a delegate of a parliamentary committee, developing skills in public speaking, negotiation, and critical thinking. I am currently in my fifth semester, majoring in the chemical-biological field, because I want to study medicine and surgery. Since I started getting involved in everything related to health, I fell in love with it. It brings a wonderful joy, a feeling that I never imagined I would experience, the kind you feel when you discover your true vocation. Little by little I am understanding the commitment and responsibility that MUN is, becoming more than just a model.

I hope that as delegates you can become more conscious about the current health issues that affect us as a society, contributing diplomatically to the future of world health. Great diplomacy begins with one voice. Speak not to be the best but to make a difference. "Success is not final, failure is not fatal: it is the courage to continue that counts." -Winston Churchill. I am really excited to see your proposals and how they unfold on the day of the model. Please feel free to contact me with any questions you may have.

Good luck,

**Adrienne Lesset Cajun**

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## **COMMITTEE DESCRIPTION**

The World Health Organization was founded in 1948. Working with countries, partners, and communities to support health and help those who need it most.

As a global leader in health, WHO works to make healthcare accessible to all, coordinate responses to health emergencies, and promote healthier lives at every stage, from pregnancy through old age. Its “Triple Billon” targets lay out an ambitious plan to improve health worldwide through science-based policies and programs.

***Topic: “International regulation of artificial intelligence in healthcare: risk, and benefits in diagnostics and treatment.”***

## **INTRODUCTION**

Medical artificial intelligence research is advancing faster thanks to the development of new technologies, reshaping how patients are diagnosed, treated, and monitored, drawing the attention of medical experts. It brings in this field extensive applications, such as risk assessment, follow-up management, and therapies. Using the AI algorithms to analyze patients’ data and identify individuals at high risk for developing specific conditions allows early prevention strategies, facilitating systematic reviews. This integration has the potential to address some supply-and-demand challenges. Although there are some significant questions, such as the data quality and access, technical infrastructure, and organizational capacity. In addition to this, any inaccurate medical algorithm could affect many patients; this may be the result of inadequate testing of such algorithms, since there are no solid rules to test their validity. AI enables intelligent video analytics, letting staff members monitor their facilities and patients, using this and smart sensors, smart hospitals can recognize objects such as medical equipment. But still, one of the biggest challenges lies in liability and accountability, as AI takes on more decision-support, the question of responsibility becomes pressing: who is accountable if an AI-enabled recommendation leads to harm-the clinician, the hospital or the developers? In one way or another, artificial intelligence has been revolutionary, transforming numerous aspects of patient care and healthcare administration.

## **HISTORICAL BACKGROUND**

The idea of artificial intelligence started as early as the 1950s, leading to a summer-long workshop. In 1956, John McCarthy and a small group of researchers are credited with founding the field and the first use of the word “artificial intelligence”, created to build machines and software that can think, learn, and solve problems in a way similar to humans,

it was until the early 2000s that AI started playing a bigger role, including the medical field. By the mid-2000s AI started assisting radiologists by highlighting potential areas of interest in imaging studies such as MRI (Magnetic Resonance Imaging) and CT (Computed Tomography) scans thanks to the capability to recognize patterns in large datasets facilitating early detection of diseases, at the end of the same year into 2010 AI's potential to analyze vast quantities of data became more evident, marking the period where the healthcare market saw it as a rapid growing segment, beyond that it enabled significant progress especially in areas such as the application of natural language processing (NLP) to electronic health records, this was used to extract structured data such as symptoms, medication and test results, as this technology matured it was incorporated into clinical decisions support systems to offer more accurate recommendations to healthcare providers. Despite these advancements, several challenges limited the full integration of AI in this field, as healthcare data were often fragmented and inconsistent.

By the time 2020 came around, artificial intelligence had already witnessed several transformative advancements, in particular the early detection and diagnosis, precision medicine, and drug development, to improve the patient's outcome, customizing the patient care, and leading to faster clinical trials. In this year, the COVID-19 pandemic accelerated the digital-health adoption, marking 2020 as a foundational year where AI moved from research labs into urgent, practical use cases, setting it for wider use from this year onwards. Overall, 2024 arrived, transforming the practice of medicine, from surgical robots that increase precision in procedures to new vaccine platforms, for instance, the BNT116 vaccine, developed by BioNTech, designed to combat non-small cell lung cancer, which accounts for 85% of all lung cancer cases. Evidently, technology is evolving at an unprecedented pace.

## **CURRENT SITUATION**

Currently, AI diagnostics has evolved from emerging technology to an essential component of modern healthcare systems, revolutionizing the healthcare field, transforming medical professionals' diagnosis, treatment, and care for patients, along with the challenges and opportunities that lie ahead. Several AI applications are already making a significant impact on patient care and diagnosis, notably in predictive analytics and disease prevention, allowing healthcare providers to anticipate health issues before they become serious problems.

Despite numerous benefits, this brings several challenges and considerations that must be addressed, like the potential for algorithm bias, which can lead to certain groups of patients receiving less accurate diagnoses or suboptimal treatments. Or the question of accountability, when AI systems make errors, it is not always clear who is responsible for it- the developer, the healthcare provider, or the organization that implemented the system. AI could serve as a great equalizer; its diagnosis could provide healthcare to remote areas. However, these results are not assured; with the absence of proactive policies, the opposite is more likely to

happen. AI systems are complex and depend on the code they are built on and on the data they are trained on. Language models often fail to reflect the diversity of human cultures, voices, and needs. In addition, AI operations use large amounts of sensitive patient data, which makes users more susceptible to data breaches and cyberattacks, and if these tools are not regularly updated, they may give inaccurate or misleading results, performing inconsistently in real-world situations.

The United Nations (UN) views AI with the potential to revolutionize clinical medicine, public health, and traditional medicine. The World Health Organization, along with some agencies, in particular the International Telecommunication Union (ITU), and the World Intellectual Property Organization (WIPO), highlight the enormous potential of artificial intelligence to address health inequities, but to guarantee this, sustainability and inclusivity must be given careful consideration. The UN emphasizes the need to control risks, fill knowledge gaps, and encourage responsible innovation that benefits everyone while acknowledging AI's potential to bridge traditional and modern practices.

## **COUNTRY BOX**

Argentine Republic

Dominion of Canada

Federal Republic of Germany

Federative Republic of Brazil

French Republic

Japan

Kingdom of the Netherlands

Kingdom of Spain

Kingdom of Sweden

New Zealand

Republic of Ecuador

Republic of India

Republic of Korea

Republic of Türkiye

Russian Federation

Swiss Confederation

The Italian Republic

United Mexican States

United States of America

United Kingdom

## **GUIDE QUESTIONS**

- I. How developed is the use of AI in healthcare in your country?
- II. What investments has your country made in the digital health infrastructure or AI research?
- III. What government programs and strategies related to AI exist in your country?
- IV. How does AI impact vulnerable populations?
- V. How often should AI tools undergo safety audits or re-certification?

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