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Towards Autonomous Precision Oncology: AI Agents, Digital Twins, and Multimodal Clinical Intelligence for Personalized Cancer Care

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ABSTRACT

Cancer remains one of the leading causes of morbidity and mortality worldwide despite remarkable advances in molecular diagnostics, targeted therapeutics, immunotherapy, and precision medicine. The extraordinary biological complexity of malignant diseases, combined with rapidly expanding volumes of radiological imaging, digital pathology, genomic sequencing, multi-omics, laboratory investigations, wearable technologies, and longitudinal clinical data, has created an urgent need for intelligent computational systems capable of supporting personalized oncology. Recent advances in artificial intelligence (AI) have introduced the concept of autonomous precision oncology, where AI agents, digital twins, multimodal foundation models, and real-time clinical intelligence operate together within integrated healthcare ecosystems. Unlike conventional AI systems designed for isolated prediction tasks, autonomous oncology platforms continuously perceive, reason, plan, execute, monitor, and learn from dynamic clinical environments while maintaining physician oversight. AI agents coordinate diagnostic workflows, digital twins simulate disease evolution and therapeutic response, and multimodal clinical intelligence integrates imaging, pathology, multi-omics, electronic health records, and real-world clinical outcomes into comprehensive patient-specific computational representations. Advances in transformer architectures, graph neural networks, reinforcement learning, retrieval-augmented generation, agentic AI, federated learning, and generative AI have significantly accelerated development of these intelligent oncology ecosystems. Despite remarkable progress, important challenges remain regarding explainability, interoperability, computational scalability, cybersecurity, regulatory validation, ethical governance, clinician acceptance, and equitable implementation. This review presents a comprehensive overview of autonomous precision oncology, highlighting computational principles, clinical applications, implementation challenges, and future perspectives for personalized cancer care driven by intelligent computational ecosystems.[1]

Keywords: Autonomous precision oncology, AI agents, Digital twins, Multimodal clinical intelligence, Precision medicine, Artificial intelligence, Computational oncology, Foundation models, Clinical decision support, Personalized cancer care.

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1. Introduction

Cancer is a biologically heterogeneous disease characterized by genomic instability, epigenetic alterations, immune dysregulation, metabolic reprogramming, and dynamic interactions within the tumor microenvironment. Although advances in precision medicine have significantly improved cancer treatment, patients with apparently similar pathological diagnoses frequently demonstrate markedly different therapeutic responses and long-term clinical outcomes because of complex biological diversity that extends beyond individual molecular biomarkers.[2]

Modern oncology continuously generates enormous quantities of heterogeneous biomedical information through computed tomography, magnetic resonance imaging, positron emission tomography, digital pathology, genomic sequencing, transcriptomics, proteomics, metabolomics, laboratory biomarkers, wearable biosensors, electronic health records, and patient-reported outcomes. Integrating these multidimensional datasets into timely and individualized clinical decisions has become increasingly difficult using conventional analytical methods.[3]

Artificial intelligence has emerged as one of the most transformative technologies in cancer medicine by enabling automated interpretation of complex biomedical information. More recently, advances in agentic AI, digital twins, multimodal foundation models, and autonomous computational reasoning have expanded these capabilities beyond isolated prediction tasks toward continuously learning intelligent clinical ecosystems.[4]

Autonomous precision oncology therefore represents a major paradigm shift in cancer care by combining AI agents, digital twins, and multimodal clinical intelligence into unified computational systems capable of supporting diagnosis, prognostic prediction, treatment planning, adaptive therapeutics, and long-term patient management while preserving clinician oversight and patient safety.[5]

2. Evolution Toward Autonomous Oncology

Early artificial intelligence systems within oncology primarily consisted of rule-based expert systems designed to assist clinicians through predefined decision rules. Although these systems improved standardization of certain clinical workflows, they lacked adaptability and were unable to continuously learn from expanding biomedical datasets.[6]

Machine learning subsequently introduced statistical prediction models capable of identifying nonlinear relationships among imaging findings, molecular biomarkers, pathological characteristics, and clinical outcomes. Deep learning further revolutionized computational oncology through automated feature extraction from radiological imaging, digital pathology, genomic sequencing, and longitudinal clinical records.[7]

The emergence of transformer architectures, multimodal foundation models, large language models, graph neural networks, reinforcement learning, and retrieval-augmented generation has fundamentally transformed artificial intelligence into increasingly autonomous computational systems capable of complex reasoning across multiple biomedical domains.

Today, autonomous oncology platforms integrate intelligent agents, digital twins, multimodal learning, cloud computing, wearable technologies, and real-time clinical information into continuously evolving computational ecosystems that support precision medicine throughout the cancer care continuum.[8]

3. Principles of Autonomous Precision Oncology

Autonomous precision oncology extends beyond conventional predictive artificial intelligence by integrating perception, reasoning, planning, execution, monitoring, and continuous learning into

coordinated computational workflows. Rather than performing isolated diagnostic or predictive tasks, autonomous systems coordinate multiple clinical processes while adapting to evolving patient conditions.[9]

These intelligent ecosystems continuously acquire multimodal biomedical information from imaging, pathology, genomics, laboratory investigations, electronic health records, wearable biosensors, and patient-reported outcomes. Advanced computational reasoning integrates these diverse datasets with biomedical knowledge, clinical guidelines, therapeutic evidence, and longitudinal patient trajectories.

Artificial intelligence subsequently generates personalized diagnostic hypotheses, therapeutic recommendations, treatment simulations, toxicity predictions, and follow-up strategies while continuously incorporating newly acquired clinical information into adaptive computational models.

Importantly, autonomous precision oncology is designed to augment rather than replace physician expertise, ensuring that clinicians maintain responsibility for final diagnostic and therapeutic decisions.[10]

4. AI Agents in Clinical Oncology

AI agents represent one of the defining technologies underlying autonomous precision oncology. Unlike conventional machine learning models that perform isolated computational tasks, AI agents autonomously perceive clinical environments, formulate objectives, coordinate computational tools, retrieve biomedical knowledge, execute workflows, evaluate outcomes, and continuously refine future decision-making.[11]

Within oncology, AI agents integrate radiological imaging, pathology reports, genomic sequencing, laboratory investigations, clinical guidelines, electronic health records, scientific literature, and longitudinal patient information into coordinated diagnostic and therapeutic workflows.

Large language models, multimodal foundation models, reinforcement learning, retrieval-augmented generation, and knowledge graphs collectively enable AI agents to perform complex biomedical reasoning while supporting multidisciplinary clinical decision-making.

These intelligent agents substantially reduce administrative workload while improving efficiency, consistency, and evidence-based oncology practice.

5. Digital Twins as Virtual Patients

Digital twins provide continuously evolving computational representations of individual cancer patients that synchronize with biological patients throughout diagnosis, treatment, and survivorship. Unlike static predictive models, digital twins continuously integrate radiological imaging, digital pathology, genomic sequencing, transcriptomics, proteomics, metabolomics, laboratory biomarkers, wearable technologies, medication history, and longitudinal clinical information into adaptive virtual patient models.[12]

Artificial intelligence continuously updates these computational representations as new biomedical information becomes available, enabling simulation of disease progression, therapeutic response, toxicity, recurrence, and survival before clinical intervention.

Digital twins therefore provide individualized computational environments within which clinicians can compare multiple treatment strategies while minimizing unnecessary patient risk and supporting adaptive precision therapeutics.

6. Multimodal Clinical Intelligence

The effectiveness of autonomous precision oncology depends upon comprehensive multimodal clinical intelligence capable of integrating heterogeneous biomedical information into unified patient-specific representations. Radiological imaging contributes anatomical and functional information regarding tumor morphology, vascularity, metabolism, and disease progression, whereas digital pathology provides microscopic characterization of tissue architecture, immune infiltration, stromal remodeling, and cellular heterogeneity.[13]

Genomic sequencing, transcriptomics, proteomics, metabolomics, laboratory biomarkers, wearable biosensors, medication history, and longitudinal electronic health records further describe molecular biology, physiological status, therapeutic response, and disease evolution.

Multimodal transformer architectures and graph neural networks harmonize these complementary information sources into unified computational embeddings that support diagnosis, prognostic prediction, treatment planning, toxicity estimation, recurrence assessment, and long-term survivorship management.

Continuous integration of these diverse biomedical modalities enables autonomous systems to generate comprehensive patient-level reasoning rather than isolated predictive outputs.[14]

7. Computational Architecture of Autonomous Oncology Systems

Autonomous precision oncology platforms consist of multiple interconnected computational layers responsible for multimodal data acquisition, representation learning, reasoning, simulation, decision support, and continuous learning.[15]

The perception layer acquires biomedical information from imaging systems, pathology laboratories, genomic sequencing platforms, wearable devices, laboratory information systems, and electronic health records. Advanced preprocessing pipelines subsequently normalize imaging data, harmonize molecular profiles, encode clinical narratives, and align longitudinal patient information.

Reasoning modules integrate multimodal foundation models, large language models, graph neural networks, probabilistic inference, and biomedical knowledge graphs to generate comprehensive patient-specific clinical intelligence.

Simulation modules incorporate digital twins capable of modeling tumor growth, metastatic dissemination, immune interactions, therapeutic response, toxicity, recurrence, and disease evolution. Interactive visualization platforms subsequently provide clinicians with transparent decision support while continuous feedback loops enable autonomous learning from new clinical information.[16]

8. Autonomous Cancer Diagnosis

Accurate diagnosis represents the foundation of effective precision oncology, and autonomous computational systems significantly improve diagnostic workflows through coordinated analysis of imaging, pathology, molecular biology, laboratory investigations, and clinical documentation.[17]

Deep learning algorithms automatically identify suspicious lesions across computed tomography, magnetic resonance imaging, positron emission tomography, mammography, ultrasound, and digital pathology while AI agents coordinate additional investigations, retrieve clinical guidelines, summarize diagnostic evidence, and generate structured multidisciplinary reports.

Integration of radiological imaging, histopathology, genomics, laboratory biomarkers, and longitudinal clinical information enables autonomous systems to continuously refine diagnostic hypotheses as additional patient information becomes available.

These intelligent diagnostic ecosystems improve accuracy, consistency, efficiency, and personalized clinical decision-making while preserving physician oversight throughout the diagnostic process.[18]

9. Autonomous Therapeutic Planning and Precision Medicine

One of the most significant advantages of autonomous precision oncology is the ability to generate individualized therapeutic strategies through continuous integration of multimodal biomedical information. AI agents combine radiological imaging, digital pathology, genomic sequencing, transcriptomics, proteomics, laboratory biomarkers, treatment history, comorbidities, and longitudinal clinical data to evaluate multiple therapeutic options before clinical implementation.[19]

Artificial intelligence predicts treatment response, recurrence probability, progression-free survival, overall survival, treatment-related toxicity, and mechanisms of therapeutic resistance across chemotherapy, targeted therapy, endocrine therapy, immunotherapy, radiation therapy, surgery, and multimodal treatment combinations.

Because autonomous systems continuously learn from newly acquired patient information, therapeutic recommendations dynamically evolve throughout the treatment course, enabling adaptive precision medicine tailored to changing tumor biology and patient physiology.

10. Autonomous Immunotherapy and Tumor Microenvironment Intelligence

The tumor microenvironment plays a central role in determining responsiveness to immunotherapy, yet its complexity presents major challenges for conventional computational approaches. Autonomous AI systems integrate immunomics, transcriptomics, radiological imaging, digital pathology, laboratory biomarkers, and clinical outcomes into comprehensive computational immune models.[20]

Artificial intelligence continuously evaluates tumor-infiltrating lymphocytes, immune checkpoint expression, cytokine signaling pathways, stromal architecture, vascular remodeling, and spatial immune-cell organization to estimate responsiveness to immune checkpoint inhibitors, CAR-T cell therapies, cancer vaccines, bispecific antibodies, and adoptive cellular therapies.

Digital twins further strengthen these capabilities by simulating patient-specific immune responses under different therapeutic strategies, allowing clinicians to evaluate individualized immunotherapy plans before treatment initiation.

11. Adaptive Radiation Oncology and Intelligent Surgical Planning

Autonomous precision oncology substantially improves both radiation therapy and surgical oncology by continuously integrating evolving anatomical and biological information into adaptive computational workflows. Sequential imaging acquired during radiation therapy updates digital twin models, allowing artificial intelligence to modify tumor contours, optimize radiation dose distribution, estimate radiosensitivity, and reduce exposure to surrounding healthy tissues.[21]

Within surgical oncology, AI agents generate three-dimensional patient-specific anatomical models using radiological imaging while simultaneously integrating pathological findings, genomic information, and clinical history. These intelligent systems estimate operative complexity, predict resection margins, evaluate lymph node involvement, forecast postoperative complications, and simulate alternative surgical approaches before clinical intervention.

Such computational assistance improves surgical precision, workflow efficiency, and patient safety while supporting multidisciplinary decision-making.

12. Drug Discovery, Clinical Trials, and Learning Oncology Networks

Autonomous precision oncology extends beyond direct patient care into oncology drug discovery, translational research, and continuously learning healthcare systems. Artificial intelligence integrates molecular biology, pharmacology, systems biology, multi-omics, and clinical outcome data to identify novel therapeutic targets, predict drug efficacy, estimate toxicity, and model mechanisms of acquired resistance.[22]

Generative AI further accelerates pharmaceutical innovation through molecular design, protein interaction prediction, target discovery, and synthetic biomedical data generation. AI agents also automate clinical trial matching by comparing patient-specific molecular profiles and clinical characteristics against complex eligibility criteria.

Learning oncology networks continuously incorporate new clinical evidence from participating healthcare institutions, enabling autonomous systems to improve prediction accuracy, therapeutic recommendations, and clinical intelligence across expanding patient populations.

13. Explainable Artificial Intelligence and Human Oversight

Although autonomous systems demonstrate increasingly sophisticated reasoning capabilities, physician oversight remains indispensable for safe clinical implementation. Explainable artificial intelligence (XAI) enables clinicians to understand how autonomous systems generate diagnostic hypotheses and therapeutic recommendations through attention visualization, saliency maps, SHAP (Shapley Additive Explanations), feature attribution analysis, uncertainty estimation, and counterfactual reasoning.[23]

Transparent computational explanations allow oncologists to validate recommendations against established biological knowledge, clinical guidelines, and patient-specific clinical circumstances. Human-centered artificial intelligence emphasizes collaboration rather than replacement, ensuring that physicians retain responsibility for final diagnostic and therapeutic decisions.

Such explainable autonomous systems strengthen clinician confidence, facilitate multidisciplinary communication, and support regulatory approval while maintaining patient safety.

14. Ethical, Regulatory, and Cybersecurity Considerations

The emergence of autonomous oncology systems introduces important ethical, legal, and regulatory challenges. Intelligent computational agents continuously access sensitive biomedical information originating from imaging systems, pathology laboratories, genomic sequencing facilities, wearable technologies, and electronic health records, creating substantial requirements for privacy protection and secure data governance.[24]

Additional challenges include algorithmic bias, interoperability limitations, cybersecurity threats, informed consent, liability, transparency, accountability, equitable healthcare access, and international regulatory harmonization. Robust encryption, federated learning, differential privacy, blockchain audit systems, secure cloud computing, and continuous threat monitoring will become essential components of trustworthy autonomous oncology ecosystems.

Development of internationally accepted governance frameworks and rigorous prospective clinical validation will be necessary before widespread implementation within routine healthcare practice.

15. Future Perspectives

The future of autonomous precision oncology will likely involve intelligent healthcare ecosystems where AI agents, multimodal foundation models, digital twins, reinforcement learning, federated learning, quantum computing, wearable biosensors, liquid biopsy, spatial multi-omics, cloud-native healthcare infrastructure, and Internet of Medical Things (IoMT) technologies function together as continuously learning computational environments.[25]

These systems may autonomously coordinate diagnostic workflows, optimize treatment strategies, predict disease progression, personalize survivorship care, retrieve emerging scientific evidence, and continuously adapt clinical recommendations according to evolving patient conditions and newly acquired biomedical knowledge.

Rather than functioning as isolated decision-support tools, future autonomous oncology platforms are expected to become intelligent collaborative partners supporting clinicians throughout every stage of cancer care.

16. Discussion

Autonomous precision oncology represents one of the most significant paradigm shifts in modern cancer medicine by integrating AI agents, digital twins, multimodal clinical intelligence, and continuously learning computational ecosystems into unified patient-centered healthcare platforms.[26]

Unlike conventional artificial intelligence systems designed for isolated prediction tasks, autonomous platforms continuously perceive, reason, plan, execute, monitor, and learn from multimodal biomedical information while supporting diagnosis, molecular characterization, treatment planning, immunotherapy optimization, radiation oncology, surgical decision-making, drug discovery, and survivorship management.

Nevertheless, successful implementation requires rigorous clinical validation, explainable artificial intelligence, standardized interoperability, secure computational infrastructure, robust cybersecurity, transparent governance, and continuous physician oversight to ensure safe, equitable, and trustworthy clinical adoption.

17. Conclusion

Autonomous precision oncology is redefining the future of personalized cancer care by integrating AI agents, digital twins, multimodal clinical intelligence, foundation models, and real-time biomedical data into continuously evolving computational ecosystems capable of supporting every stage of oncology practice.[27]

Through seamless integration of radiological imaging, digital pathology, genomics, multi-omics, laboratory biomarkers, wearable technologies, electronic health records, and longitudinal patient information, these intelligent systems enable adaptive diagnosis, individualized therapeutic planning, predictive disease monitoring, and evidence-based clinical decision-making.

As agentic artificial intelligence, digital twins, multimodal learning, federated learning, generative AI, quantum computing, and cloud-native healthcare infrastructures continue to mature, autonomous precision oncology is expected to become a defining component of next-generation cancer medicine. Although important scientific, ethical, technical, and regulatory challenges remain, continued interdisciplinary

collaboration among clinicians, computer scientists, biomedical engineers, molecular biologists, healthcare organizations, and regulatory agencies will accelerate responsible implementation of these technologies, ultimately improving patient outcomes and advancing precision oncology worldwide.[28][29][30]

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