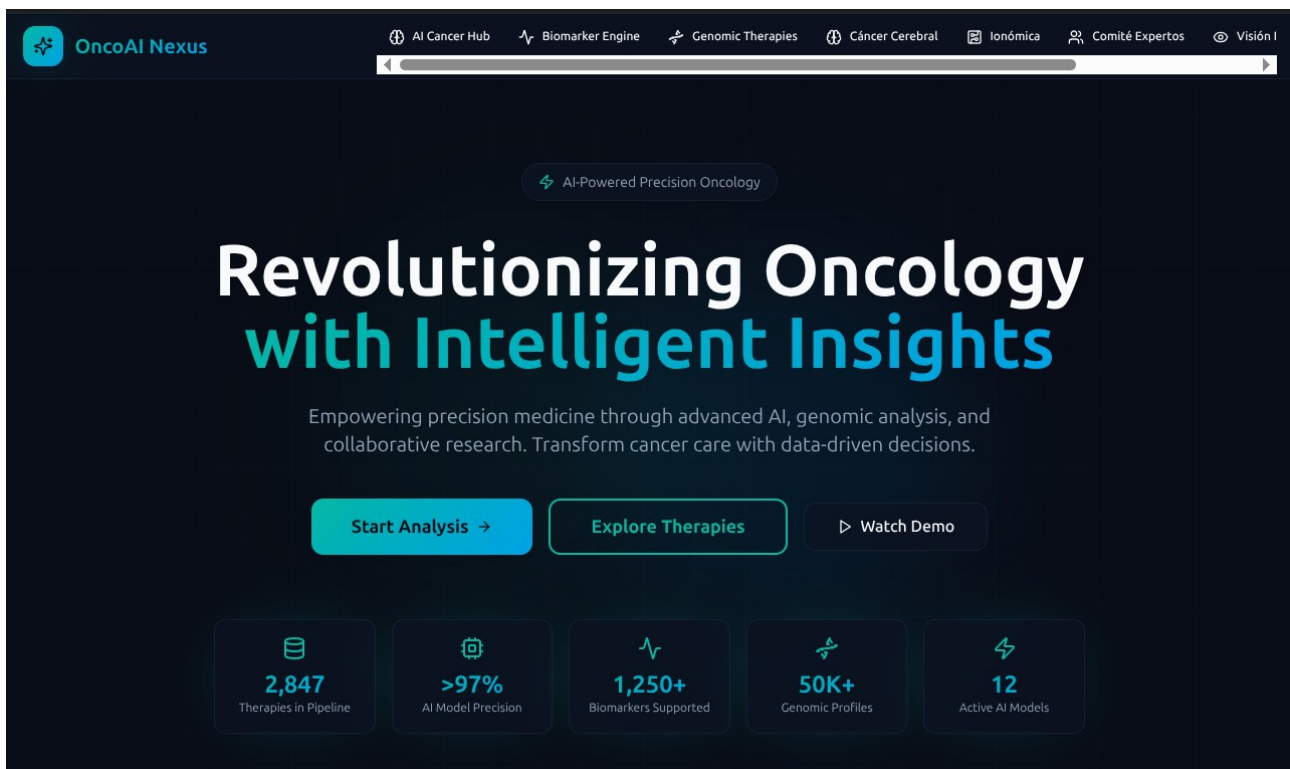


# OncoAI Nexus — Detailed Structured Document (Expanded PDF-Ready Version)

## 1. Introduction

**OncoAI Nexus** is a next-generation computational oncology platform built to unify multi-modal biomedical data, advanced artificial intelligence, and high-performance computing. Its purpose is to support precision oncology workflows through a fully auditable, explainable, and interoperable ecosystem.

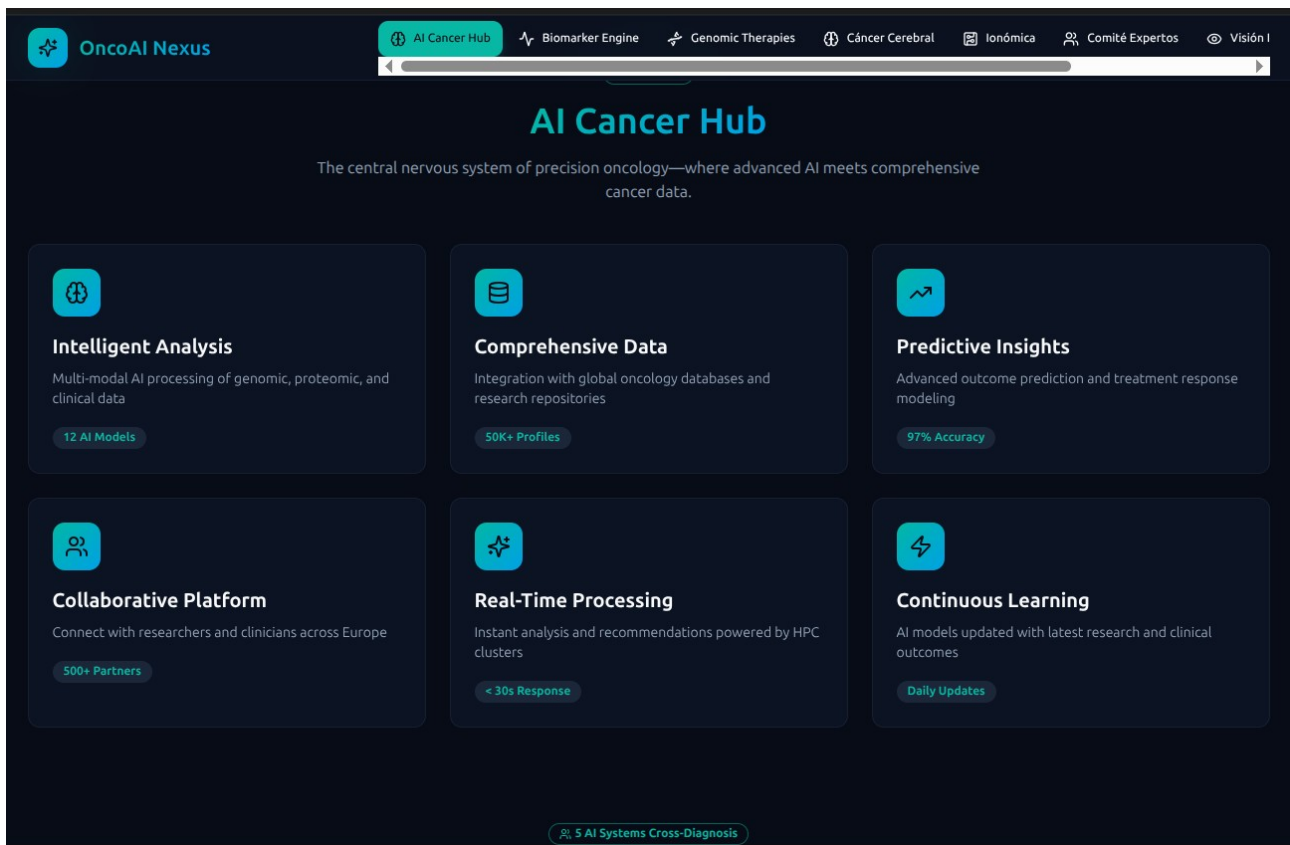
The platform centralizes biomarker intelligence, genomic insights, multi-AI consensus engines, and computational simulations, enabling researchers and institutions to work with structured, high-quality data at scale.



## 2. Platform Overview

### 2.1 AI Cancer Hub

The AI Cancer Hub serves as the central nervous system of the entire platform. It orchestrates data ingestion, model execution, and cross-module communication, ensuring that every component works together seamlessly.



## Key Capabilities

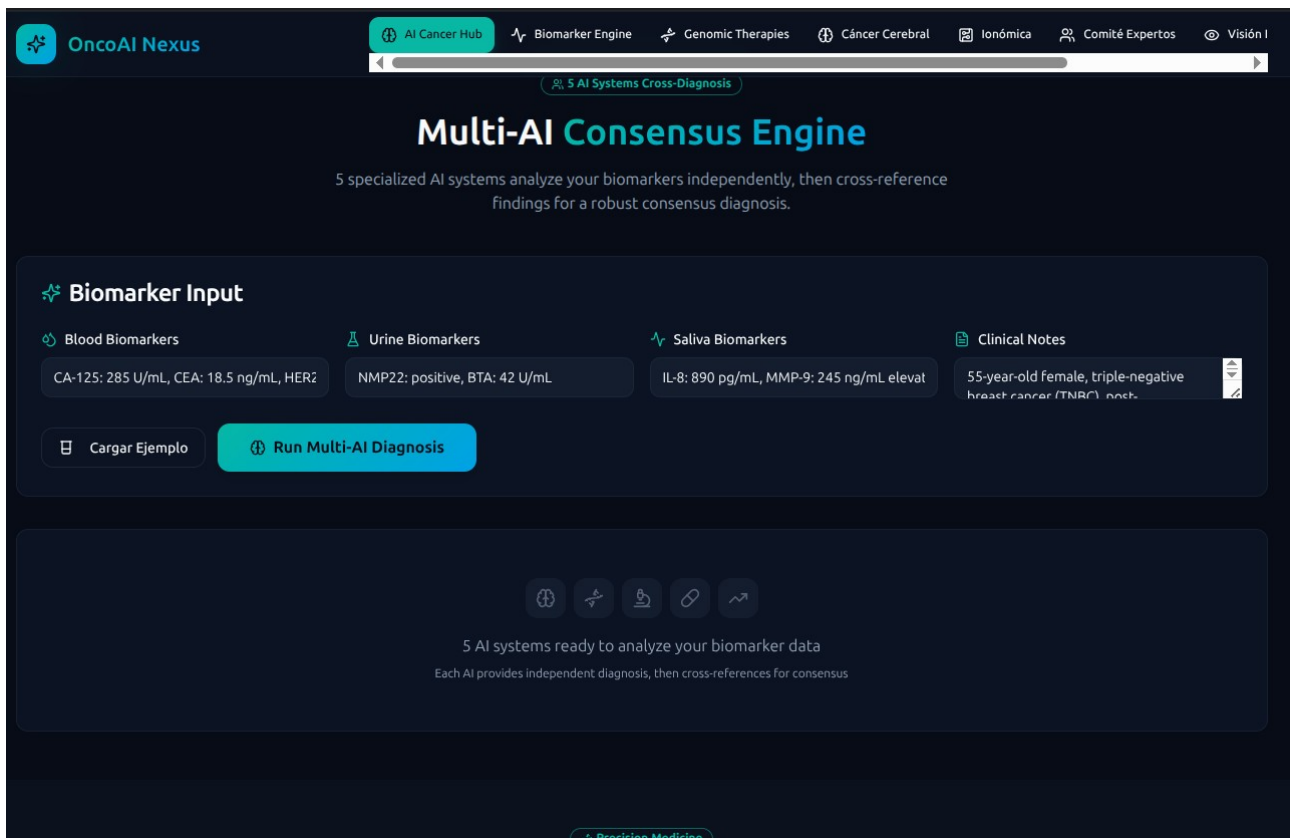
- Multi-modal AI analysis across genomic, proteomic, clinical text, and imaging data
- Integration with global oncology databases and research repositories
- Predictive modeling for outcomes and treatment responses
- Real-time processing powered by HPC clusters
- Continuous updates incorporating the latest scientific research

## Core Metrics

- **12 active AI models** working in parallel
- **50,000+ genomic profiles** integrated
- **1,250+ biomarkers supported**
- **2,847 therapies** tracked in the pipeline
- **<30 seconds** average response time

## 3. Multi-AI Consensus Engine

This engine brings together **five specialized AI systems**, each analyzing biomarker inputs independently. Their outputs are then cross-validated to produce a unified, robust consensus.



## Inputs Supported

- Blood biomarkers
- Urine biomarkers
- Saliva biomarkers
- Clinical notes and contextual information

## Outputs

- Multi-AI consensus
- Cross-checked interpretations
- Confidence scoring
- Conflict resolution protocols

This approach ensures that no single model dominates the analysis, increasing reliability and transparency.

# 4. Precision Medicine Engine

## 4.1 Genomic Therapies Database

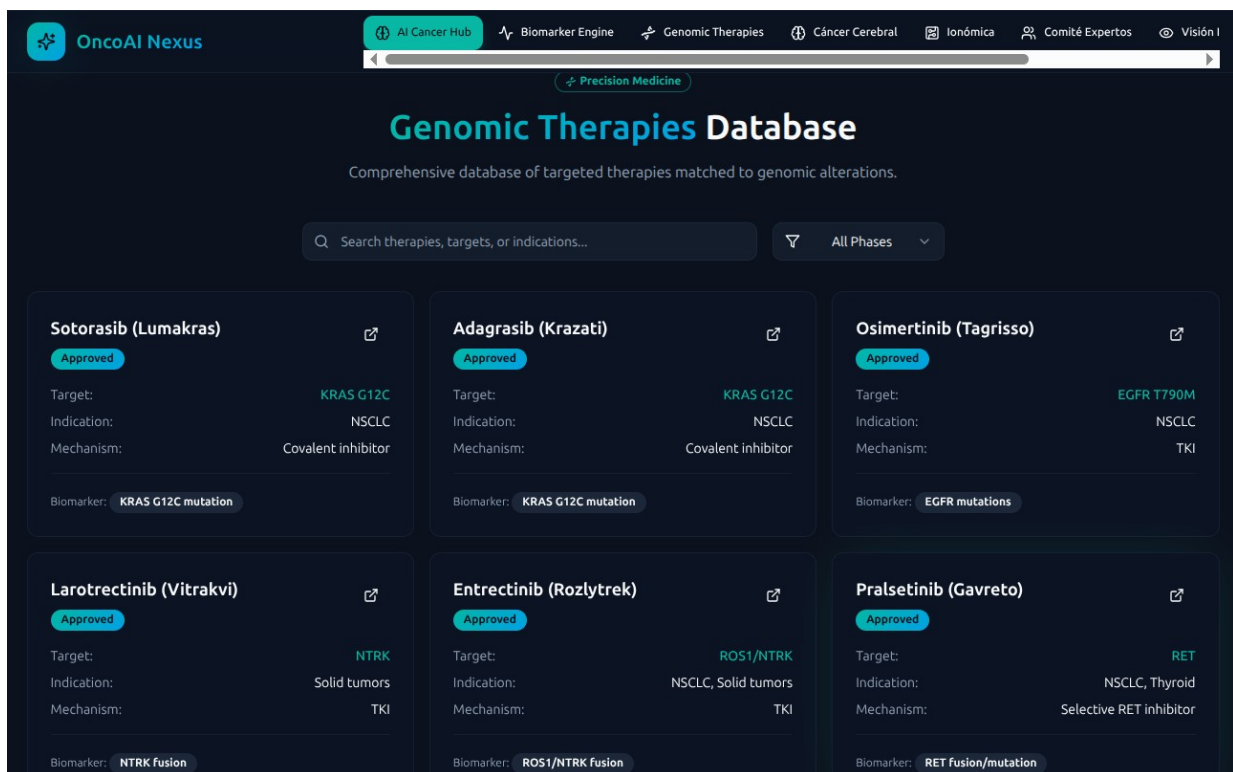
A comprehensive, continuously updated repository of targeted therapies linked to specific genomic alterations. It allows users to explore mechanisms, indications, and biomarker associations.

### Examples

- Sotorasib (KRAS G12C)
- Osimertinib (EGFR T790M)
- Larotrectinib (NTRK fusion)
- Pralsetinib (RET fusion)

### Database Includes

- Mechanism of action
- Approved indications
- Biomarker associations
- Regulatory status



# 5. Neuro-Oncology Center

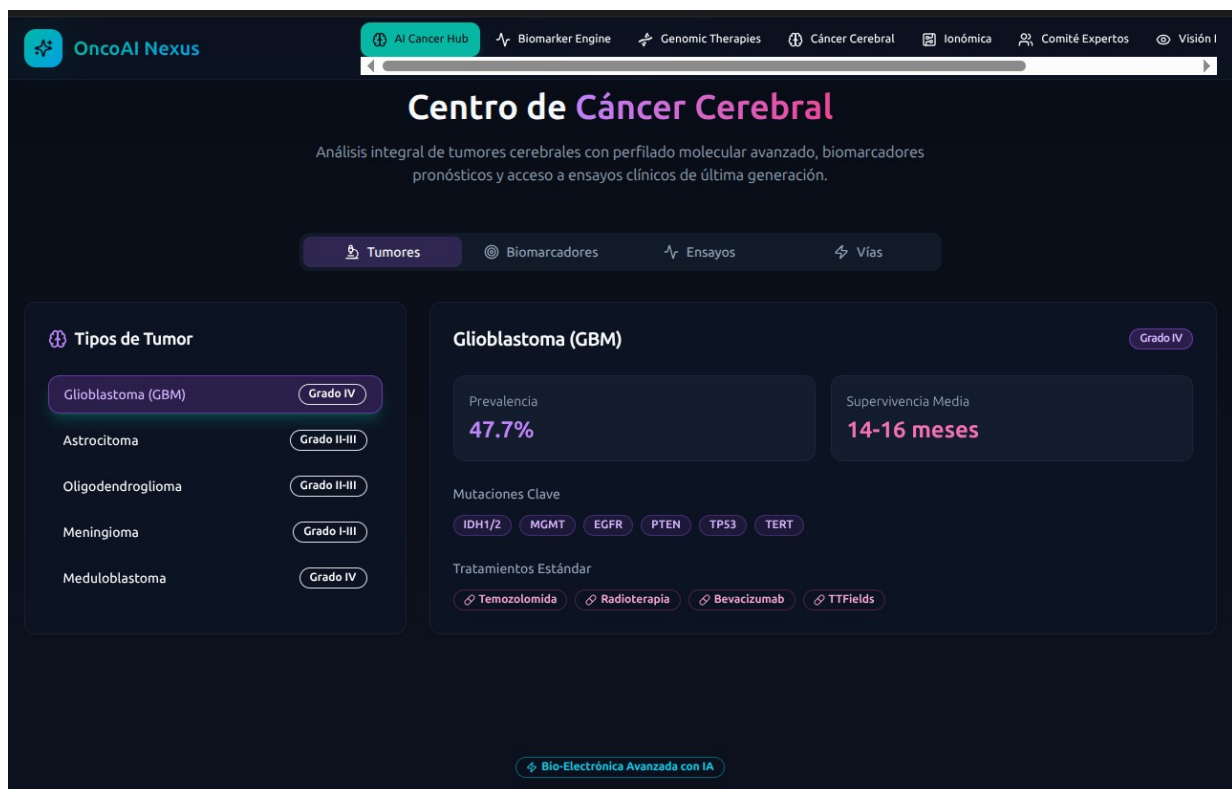
A specialized module dedicated to computational analysis of brain tumors.

## Tumor Types Covered

- Glioblastoma
- Astrocytoma
- Oligodendroglioma
- Meningioma
- Medulloblastoma

## Data Provided

- Prevalence statistics
- Key molecular mutations
- Standard treatment frameworks
- Relevant signaling pathways



## 6. Bio-Electronic Inference Engine (Ionómica)

This module analyzes ionic signaling and tumor bioelectricity using advanced computational models.

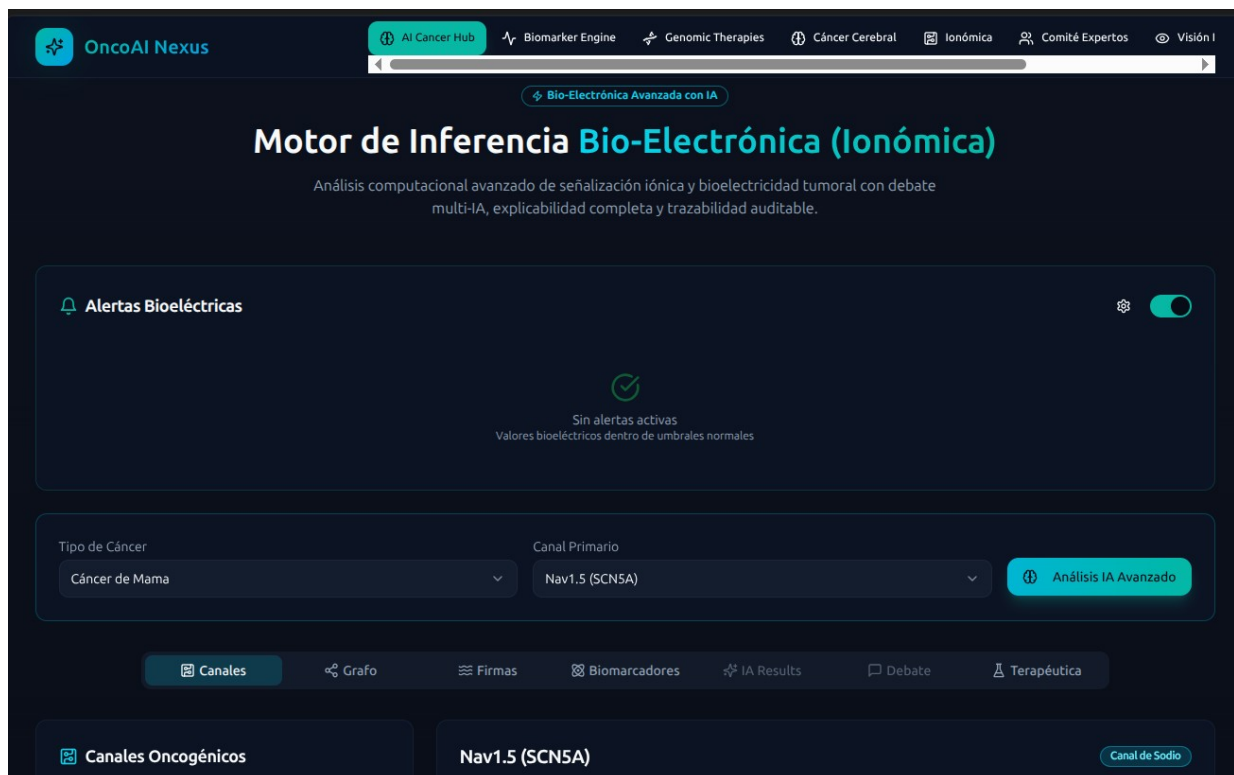
### Features

- Multi-AI debate for interpretability
- Fully explainable outputs

- Auditable traceability
- Ion channel profiling

## Example Channels

- Nav1.5 (Sodium)
- Kv11.1 (Potassium)
- TRPM7 ( $Mg^{2+}/Ca^{2+}$ )
- ClC-3 (Chloride)
- Cav1.2 (Calcium)



## 7. Expert AI Committee

A panel of **five specialized AI systems** designed to review complex oncology cases.

### Inputs

- Cancer type
- Biomarker list
- Imaging findings
- Proposed treatments
- Patient profile

## Outputs

- Multi-AI review
- Risk detection
- Alternative scenario generation
- Confidence scoring

This module enhances oversight and reduces uncertainty in complex analyses.

Revisión Multi-IA

### Comité de Expertos IA

5 inteligencias artificiales especializadas revisan el diagnóstico, identifican riesgos, errores potenciales y proponen escenarios alternativos.

#### Caso para Revisión

Tipo de Cáncer Biomarcadores (separados por coma)

Ej: Adenocarcinoma de pulmón EGFR+ Ej: EGFR L858R, PD-L1 80%, ALK-

Diagnóstico y Hallazgos

Describe el diagnóstico actual, estadio, hallazgos de imagen y patología...

Tratamientos Propuestos Perfil del Paciente

Ej: Osimertinib 80mg/día, Radioterapia Ej: 65 años, ECOG 1, diabético, no fumador

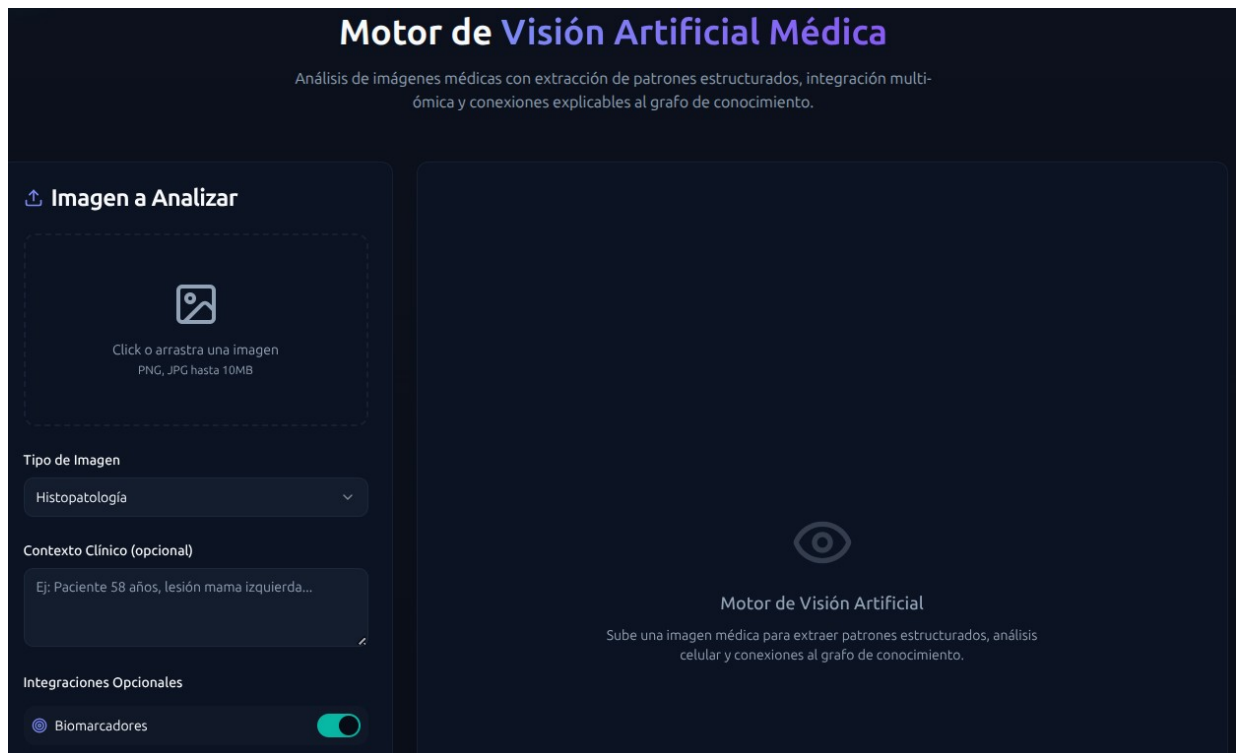
Cargar Ejemplo Solicitar Revisión del Comité

## 8. Medical Computer Vision Engine

A high-performance AI engine for analyzing medical images and extracting structured patterns.

### Supported Features

- Histopathology image analysis
- Multi-omic integration
- Knowledge graph linking
- Explainable visual outputs



## 9. Computational Risk Management — Extreme Mode

A dual-activation safety protocol designed for high-uncertainty scenarios.

### Automatic Activation

Triggered when model confidence drops below **60%**.

### Manual Activation

Available for user-flagged critical cases.

### Includes

- Multi-AI debate
- Full audit trail
- EU AI Act compliance



## 10. Digital Twin Oncology

A simulation engine that creates patient-specific computational models.

### Modules

- Tumor progression modeling
- Therapy response simulation
- Resistance mechanism prediction
- Drug combination synergy analysis



## 11. SAFC — Advanced Computational Pharmacology System

A multi-layered engine for analyzing drug-target interactions and pharmacodynamic behavior.

### Includes

- Drug-target analysis
- Pharmacodynamic simulation
- Multi-drug interaction graph
- European knowledge base
- Multi-AI risk debate
- Full audit trail



## Sistema Avanzado de Farmacología Computacional

Motor de análisis molecular, interacción fármaco-objetivo, simulación computacional, detección de riesgos algorítmicos y trazabilidad completa con debate multi-IA.

Cargar Ejemplo
Ocultar Datos
▶ Ejecutar Análisis SAFC

### Datos del Paciente y Fármacos

Ingrese los datos del Digital Twin y los fármacos a analizar

**Signos Vitales**

Tipo Sanguíneo	Peso (kg)	Altura (cm)	Pulso (bpm)	PA Sistólica	PA Diastólica
A+	72	168	78	128	82

**Análisis Sanguíneo**

Glucosa (mg/dL)	Hemoglobina (g/dL)	Creatinina (mg/dL)	ALT (U/L)	AST (U/L)	Leucocitos (/μL)
112	11,8	1,2	38	32	8200

**Perfil Tumoral**

Tipo de Tumor	Estadio	Mutaciones (separadas por coma)
Adenocarcinoma pulmonar	IIIB	EGFR exon 19 del, TP53 R273H, MET amplification

## 12. Computational Biotherapies Module

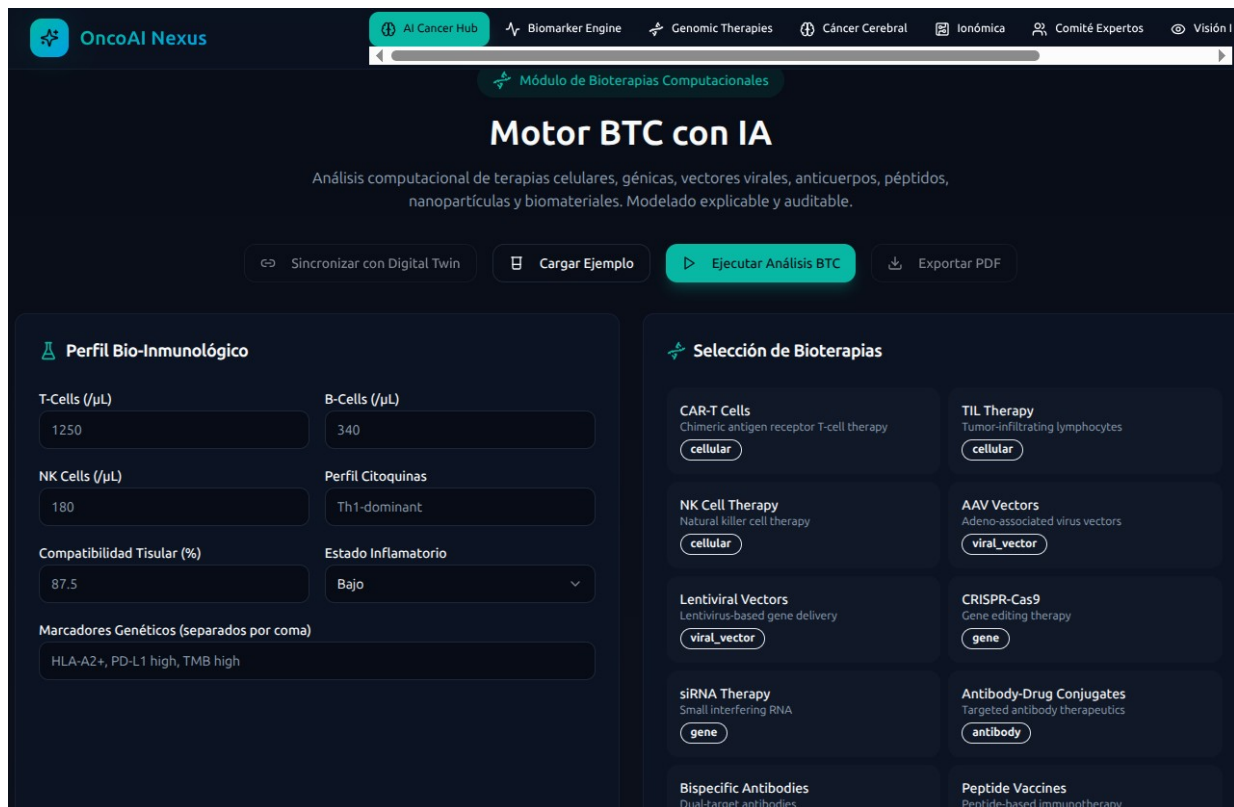
A module dedicated to analyzing advanced therapeutic modalities.

### Therapies Covered

- CAR-T
- TIL
- NK cell therapy
- Viral vectors
- Gene editing
- siRNA
- Antibody-drug conjugates
- Nanoparticles
- Biomaterials

### Outputs

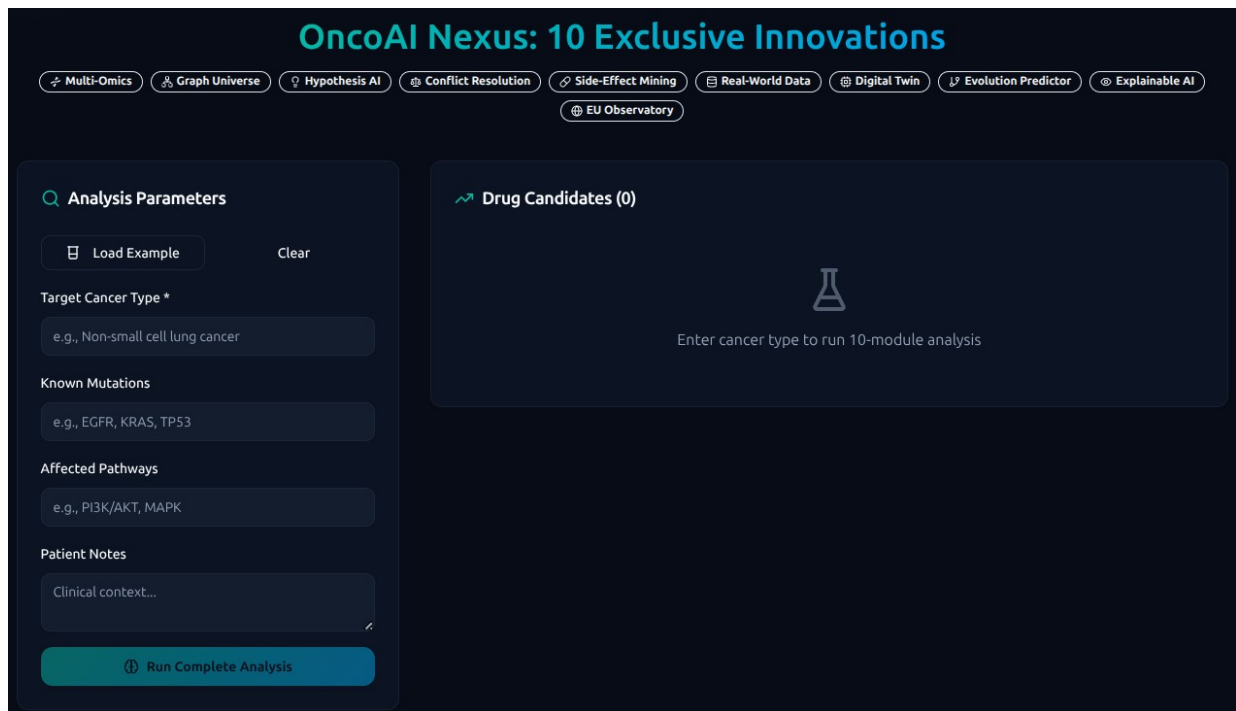
- Bio-immune profile
- Cytokine patterns
- Tissue compatibility



## 13. Drug Repurposing Platform — 10 Innovation Modules

This platform integrates ten advanced computational engines:

- Multi-omics
- Graph universe
- Hypothesis AI
- Conflict resolution
- Side-effect mining
- Real-world data
- Digital twin
- Evolution predictor
- Explainable AI
- EU observatory

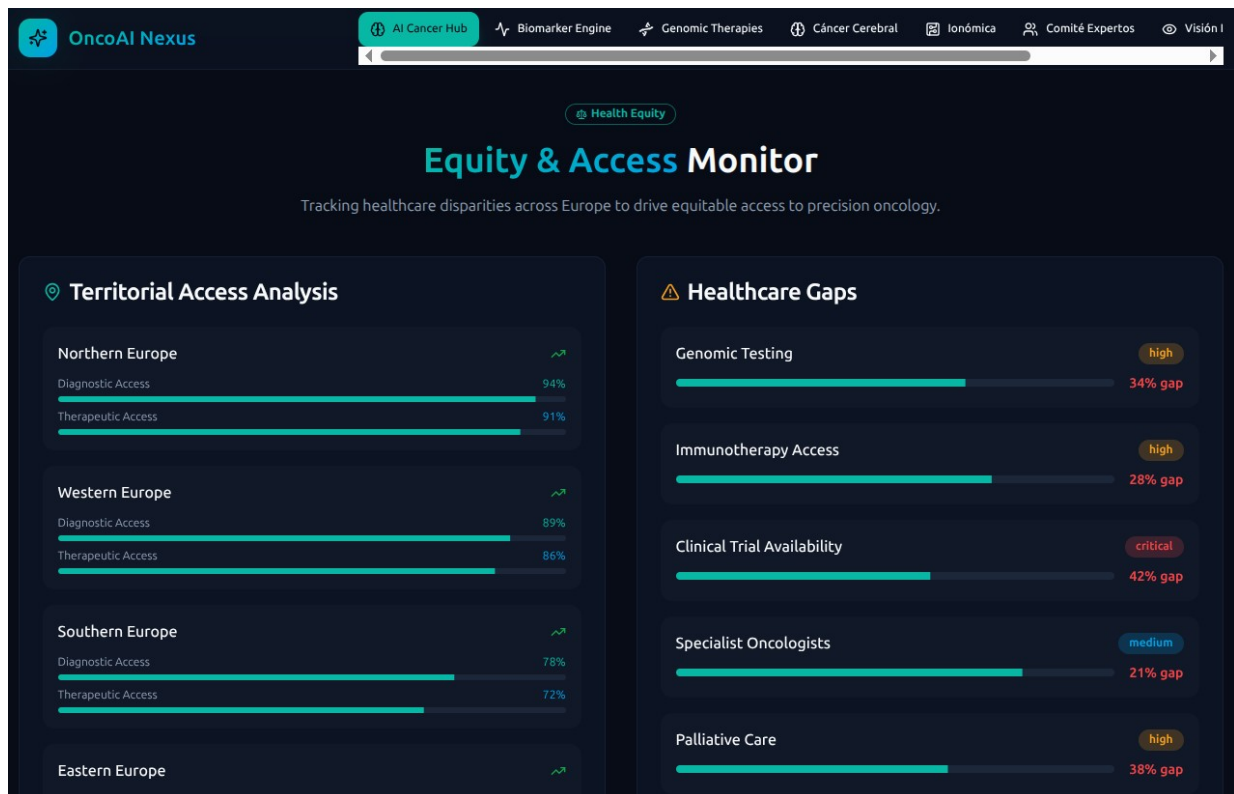


## 14. Health Equity & Access Monitor

A continental-scale dashboard tracking disparities in oncology access across Europe.

### Metrics

- Diagnostic access
- Therapeutic access
- Genomic testing gaps
- Clinical trial availability
- Specialist density
- Palliative care access

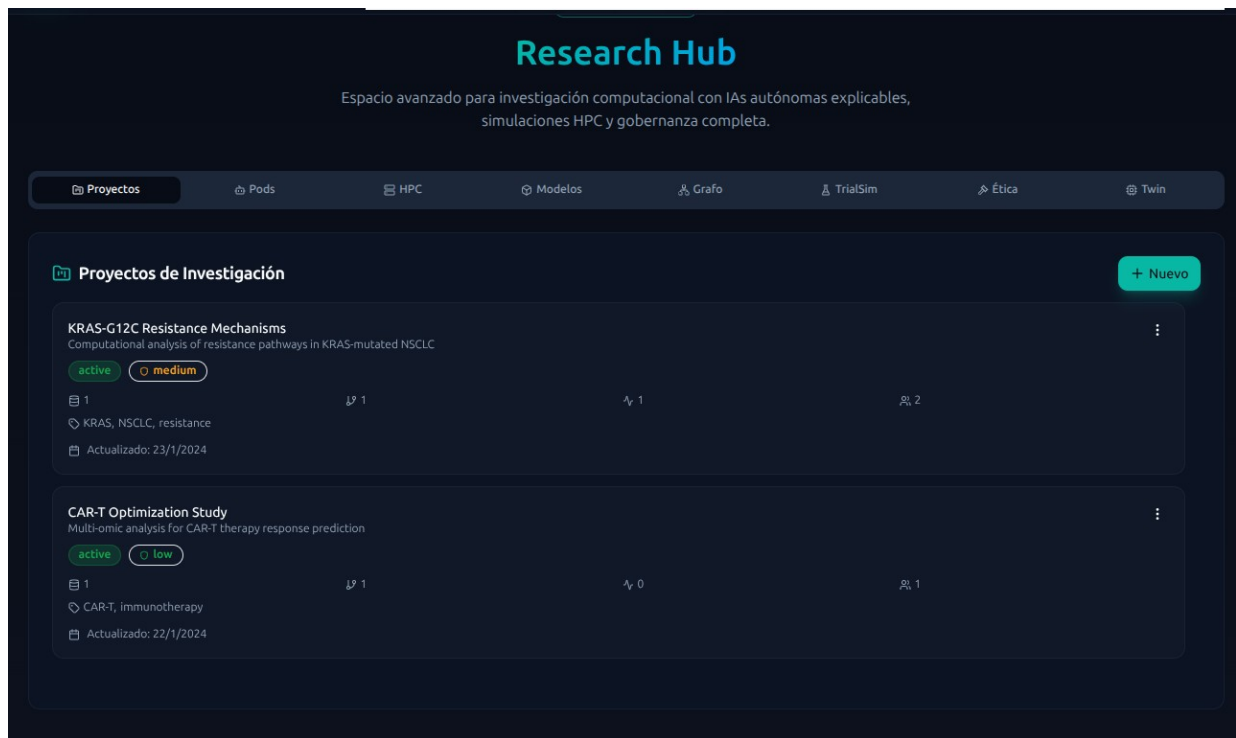


## 15. Research Hub

A dedicated environment for computational oncology research.

### Includes

- Autonomous explainable AIs
- HPC simulations
- Knowledge graph exploration
- Ethical governance
- Project management tools
- Model registry
- Trial simulation
- Digital twin integration



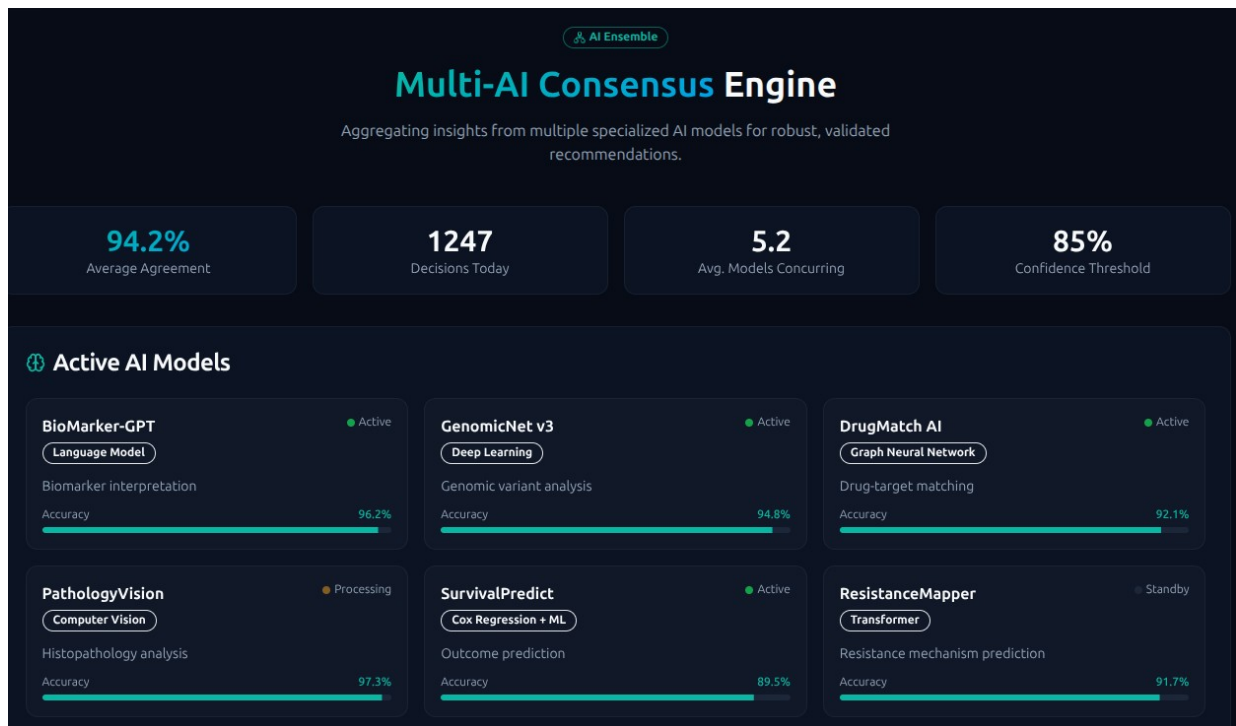
## 16. AI Ensemble — Model Performance

Active models include:

- BioMarker-GPT
- GenomicNet v3
- DrugMatch AI
- PathologyVision
- SurvivalPredict
- ResistanceMapper

Consensus requires:

- At least **4 models**
- At least **85% confidence**

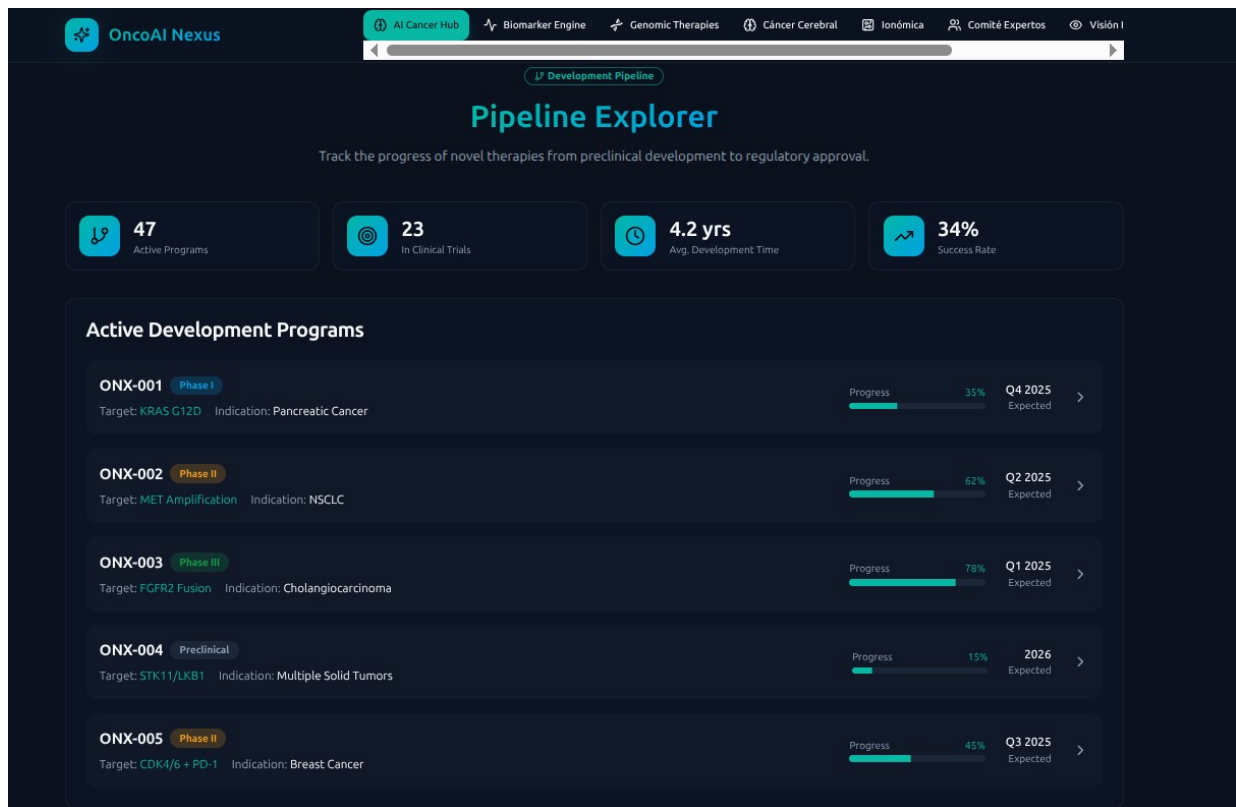


## 17. Development Pipeline

Tracks therapy development from early research to regulatory approval.

### Metrics

- 47 active programs
- 23 in clinical trials
- 4.2-year average development time
- 34% success rate

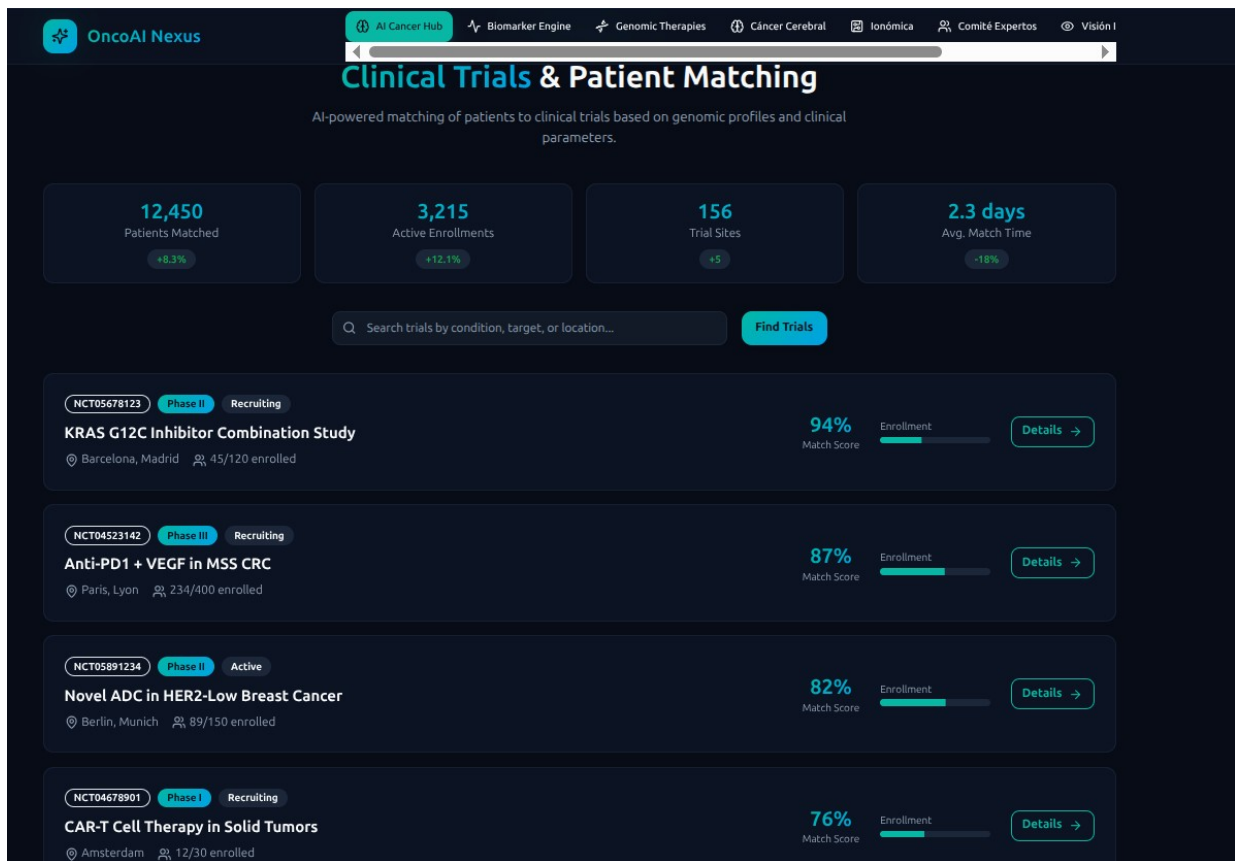


## 18. Clinical Trial Matching Engine

AI-powered matching based on genomic and clinical parameters.

### Metrics

- 12,450 patients matched
- 3,215 active enrollments
- 156 trial sites
- 2.3-day average match time

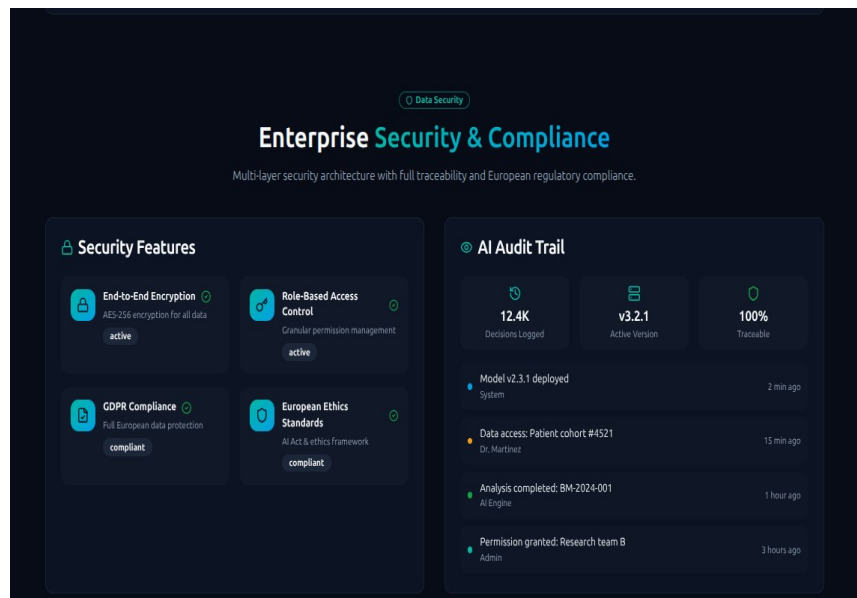


# 19. Security & Compliance

The platform follows strict European standards.

## Includes

- End-to-end encryption
- Role-based access control
- GDPR compliance
- EU AI Act alignment
- Full audit trail



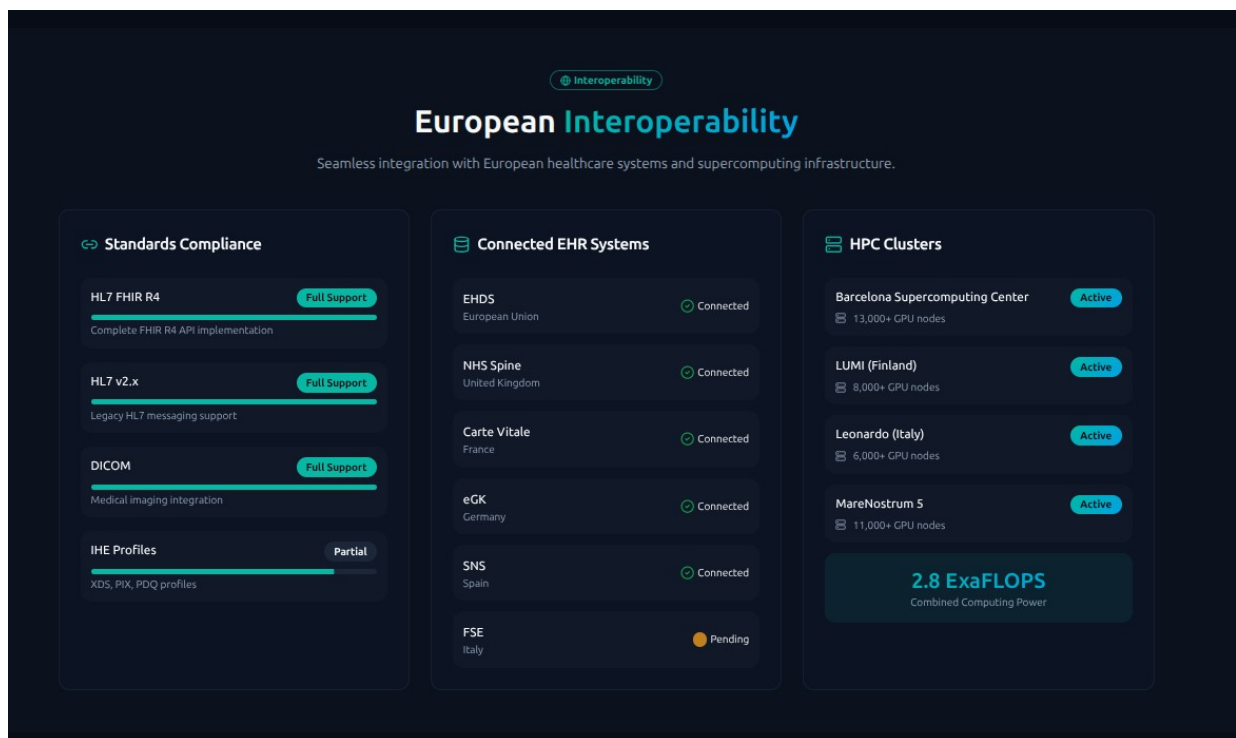
# 20. Interoperability

Supports major healthcare standards:

- HL7 FHIR R4
- HL7 v2.x
- DICOM
- IHE profiles

Connected to:

- EHDS
- NHS Spine
- Carte Vitale
- eGK
- SNS
- FSE



# 21. HPC Infrastructure

Connected to leading European supercomputers:

- Barcelona Supercomputing Center
- LUMI (Finland)

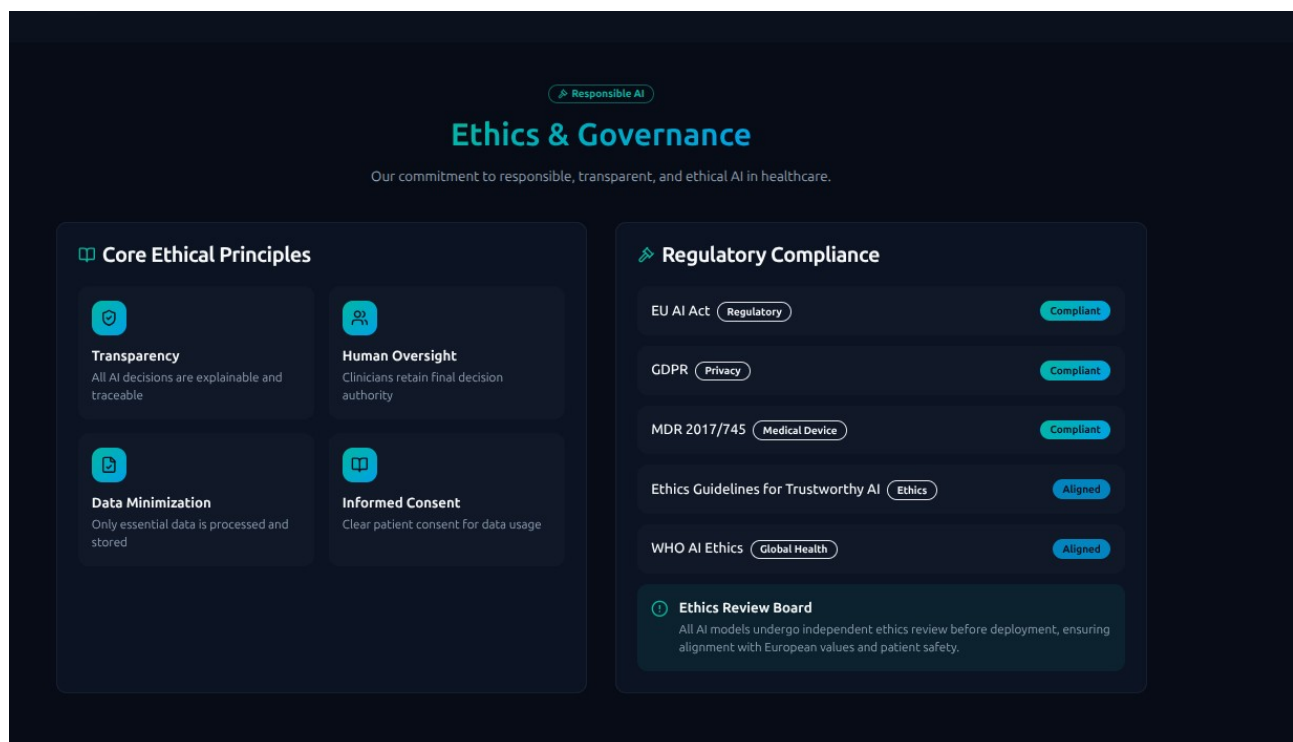
- Leonardo (Italy)
- MareNostrum 5

Combined computing power: **2.8 ExaFLOPS**

## 22. Ethics & Governance

Aligned with:

- EU AI Act
- GDPR
- MDR 2017/745
- WHO AI Ethics
- European ethics guidelines



## 23. Biomarkers B — What the Eye Cannot See

Traditional lab reports show isolated numbers. BioMark Pro reveals **hidden patterns**.

**Biomarkers B** represent an advanced computational layer that transforms raw biomarker values into **relationships, proportions, and mathematical signatures** that do not appear in standard reports. They do **not** diagnose, predict, or replace clinical evaluation. They simply uncover **data structures** that are invisible to the human eye.

## 🛡️ Análisis Multi-Consenso IA

Motor de seguridad reforzado: 5 expertos de IA analizando cada dato para tu tranquilidad.

🛡️ Generar Informe Seguro

### ✓ INFORME DE CONSENSO VERIFICADO

\*\*INFORME DE CONSENSO MÉDICO - DIRECCIÓN MÉDICA\*\*

\*\*Fecha de Emisión:\*\* Actual

\*\*Paciente:\*\* [No especificado]

\*\*Ref. Laboratorio:\*\* 2026-01-25 (Ver Alerta)

---

### ### 1. RESUMEN EJECUTIVO

Tras revisar y unificar los criterios de Hematología, Endocrinología, Medicina Interna y Seguridad, concluyo que el paciente presenta un **estado de salud general bueno y sin riesgo vital inmediato**, destacando una función renal y un estado antiinflamatorio excelentes. Sin embargo, existe un hallazgo metabólico unánime: una **Dislipidemia Mixta** con un índice aterogénico elevado. Aunque no hay daño orgánico visible ni inflamación sistémica, el perfil lipídico sugiere un inicio de **resistencia a la insulina** que requiere intervención preventiva inmediata en el estilo de vida para evitar riesgos cardiovasculares a mediano plazo.

---

### ### 2. ALERTAS ROJAS (SEGURIDAD Y ADMINISTRACIÓN)

Siguiendo el protocolo de seguridad de la clínica, se destaca la siguiente anomalía crítica que debe resolverse antes de procesar nuevos datos: **ERROR DE TRAZABILIDAD (CRÍTICO):** Los estudios presentan fecha del **25 de enero de 2026**. Esta inconsistencia temporal invalida legalmente la muestra.

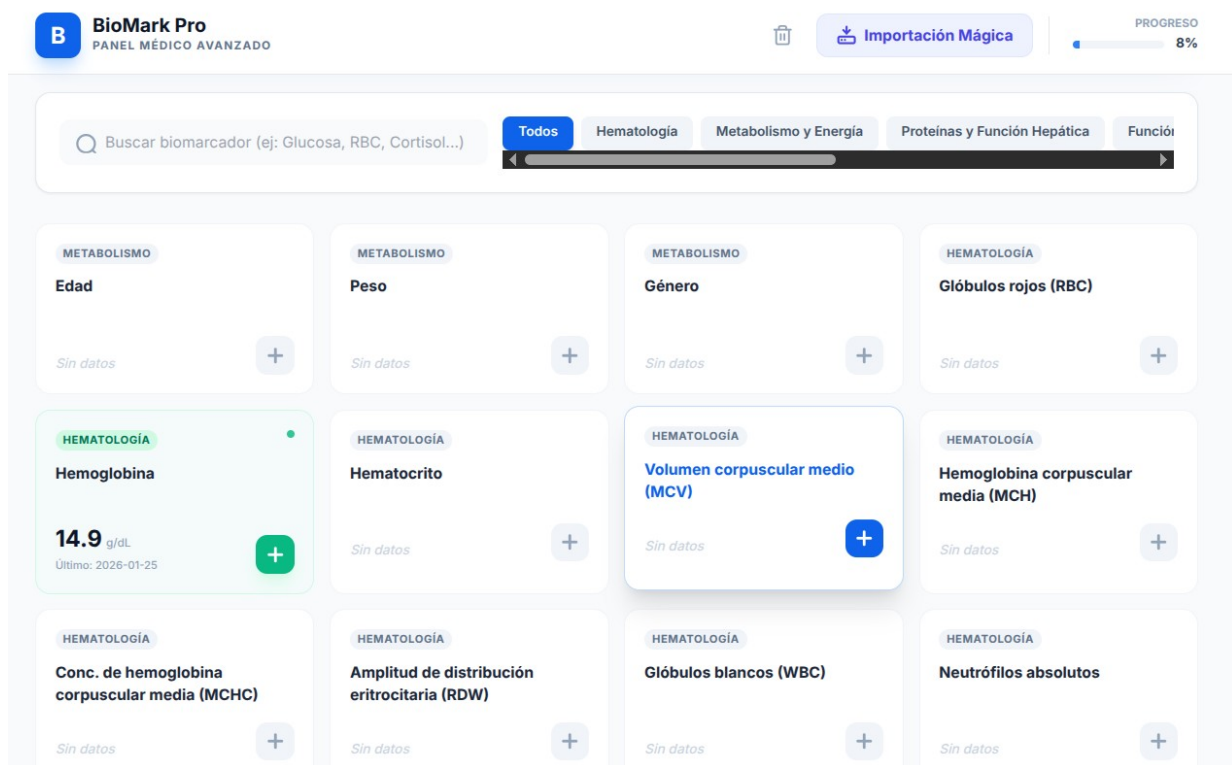
**Acción:** El departamento administrativo debe contactar al laboratorio para rectificar la fecha real de la toma de muestra y asegurar que

## 23.1 What Are Biomarkers B?

Biomarkers B are **mathematical derivatives** generated from classical biomarkers (Biomarkers A). They are not new medical values — they are **computational constructs** that help interpret how different biomarkers relate to each other.

Examples of Biomarkers B (always mathematical, never clinical):

- Ratios between biomarkers
- Derived indices
- Internal coherence signatures
- Cross-system proportions
- Statistical patterns not visible in raw data



## 23.2 Why “What the Eye Cannot See”?

Because a traditional lab report only shows **individual values**. Biomarkers B reveal **how those values interact**.

A number may look normal on its own, but its relationship with another number may form a pattern that is not obvious without computation.

Sin datos +	Sin datos +	Sin datos +	Sin datos +
<b>METABOLISMO</b> <b>Lactato</b>  Sin datos +	<b>METABOLISMO</b> <b>Piruvato</b>  Sin datos +	<b>METABOLISMO</b> <b>Cuerpos cetónicos</b>  Sin datos +	<b>METABOLISMO</b> <b>Colesterol total</b>  <b>210</b> mg/dL Último: 2026-01-25 +
<b>METABOLISMO</b> <b>Colesterol HDL</b>  <b>40</b> mg/dL Último: 2026-01-25 +	<b>METABOLISMO</b> <b>Colesterol LDL</b>  <b>130</b> mg/dL Último: 2026-01-25 +	<b>METABOLISMO</b> <b>Colesterol VLDL</b>  Sin datos +	<b>METABOLISMO</b> <b>Triglicéridos</b>  <b>200</b> mg/dL Último: 2026-01-25 +
<b>METABOLISMO</b> <b>Colesterol No-HDL</b>  Sin datos +	<b>METABOLISMO</b> <b>Colesterol Remanente</b>  Sin datos +	<b>METABOLISMO</b> <b>Relación Triglicéridos/HDL</b>  Sin datos +	<b>METABOLISMO</b> <b>Índice Aterogénico del Plasma (AIP)</b>  Sin datos +
<b>METABOLISMO</b> <b>Índice TyG (Triglicéridos/Glucosa)</b>  Sin datos +	<b>METABOLISMO</b> <b>Ácidos grasos libres</b>  Sin datos +	<b>METABOLISMO</b> <b>Lipoproteína(a)</b>  Sin datos +	<b>METABOLISMO</b> <b>Apolipoproteína A1</b>  Sin datos +
<b>METABOLISMO</b> <b>Apolipoproteína B</b>  Sin datos +	<b>METABOLISMO</b> <b>Índice colesterol total/HDL</b>  Sin datos +	<b>METABOLISMO</b> <b>Índice LDL/HDL</b>  Sin datos +	<b>METABOLISMO</b> <b>Ácido úrico</b>  Sin datos +

## 23.3 What Does This Layer Add?

- **Structural clarity:** transforms scattered values into meaningful patterns
- **Inconsistency detection:** highlights values that don't align mathematically
- **Internal signatures:** groups biomarkers into coherent clusters
- **Multidimensional analysis:** connects data across different physiological systems

All of this happens without generating medical conclusions.

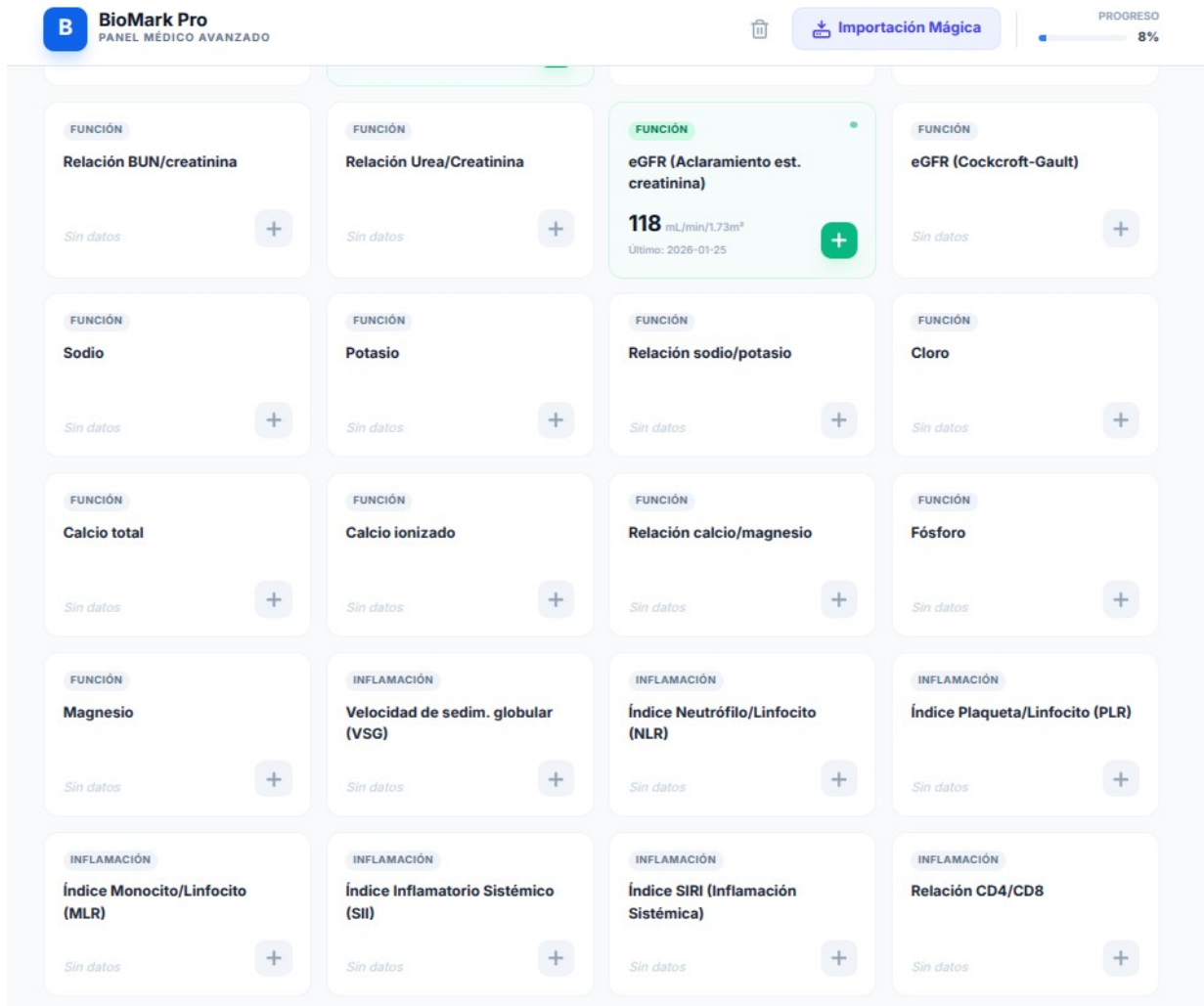
The screenshot displays the 'BioMark Pro' medical dashboard, labeled 'PANEL MÉDICO AVANZADO'. At the top right, there is a 'Progreso' indicator at 8% and a 'Importación Mágica' button. The dashboard is organized into a grid of biomarker cards, each with a category label (e.g., 'METABOLISMO', 'PROTEÍNAS', 'FUNCIÓN') and a plus sign to expand details. The biomarkers shown are:

- METABOLISMO:** Homocisteína, Beta-hidroxiacetato, Insulina basal, Péptido C, Índice HOMA-IR, Lactato deshidrogenasa (LDH), Creatina quinasa (CK), Troponina I.
- PROTEÍNAS:** Albúmina, Globulinas totales, Relación albúmina/globulina, Proteínas totales, Bilirrubina total, Alanina aminotransferasa (ALT), Aspartato aminotransferasa (AST), Índice AST/ALT (De Ritis), Fosfatasa alcalina (FA), Gamma-glutamil transferasa (GGT), Ferritina.
- PROTEÍNAS (Highlighted):** Proteína C reactiva (PCR) with a value of 0.50 mg/L and a date of 'Último: 2026-01-25'.
- FUNCIÓN:** (Empty cards visible at the bottom).

## 23.4 How It Works Inside BioMark Pro

When a report is imported, the system automatically:

1. Extracts Biomarkers A (the classical values)
2. Normalizes units and formats



- 3.
4. Computes Biomarkers B (derived patterns)
5. Displays everything in a clear, auditable structure

This creates a **second layer of insight** that complements the raw data.

## 23.5 Conceptual Example (Non-Medical)

Imagine two numbers:

- Value A
- Value B

Individually, they tell you very little. But when combined:

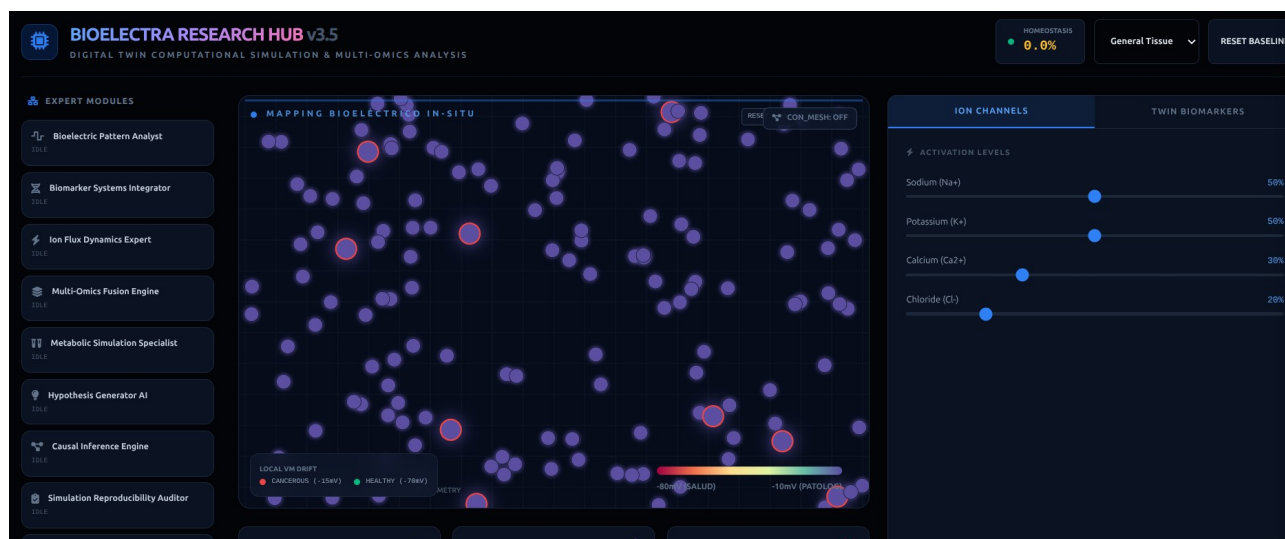
- $A/B$
- $A \times B$
- A relative to the average of both
- A compared to historical values

...you suddenly see **patterns** that were invisible before.

# 24. BIOELECTRA RESEARCH HUB v3.5 — Digital Twin & Multi-Omics Engine

The **BioElectra Research Hub v3.5** is the advanced computational environment where the Digital Twin, multi-omics fusion, and bioelectric modeling converge. It provides a high-resolution, explainable, and fully auditable simulation space for exploring complex biological patterns.

This module does **not** generate clinical interpretations. It focuses exclusively on **data modeling, pattern extraction, and computational simulation.**



## 24.1 Digital Twin Computational Simulation

The Digital Twin represents a **mathematical replica** of biological systems, built from multi-modal data streams. It allows researchers to observe how different variables interact inside a controlled computational environment.

### Homeostasis Indicator

- **10.9%** — Represents the current deviation from the baseline computational equilibrium.

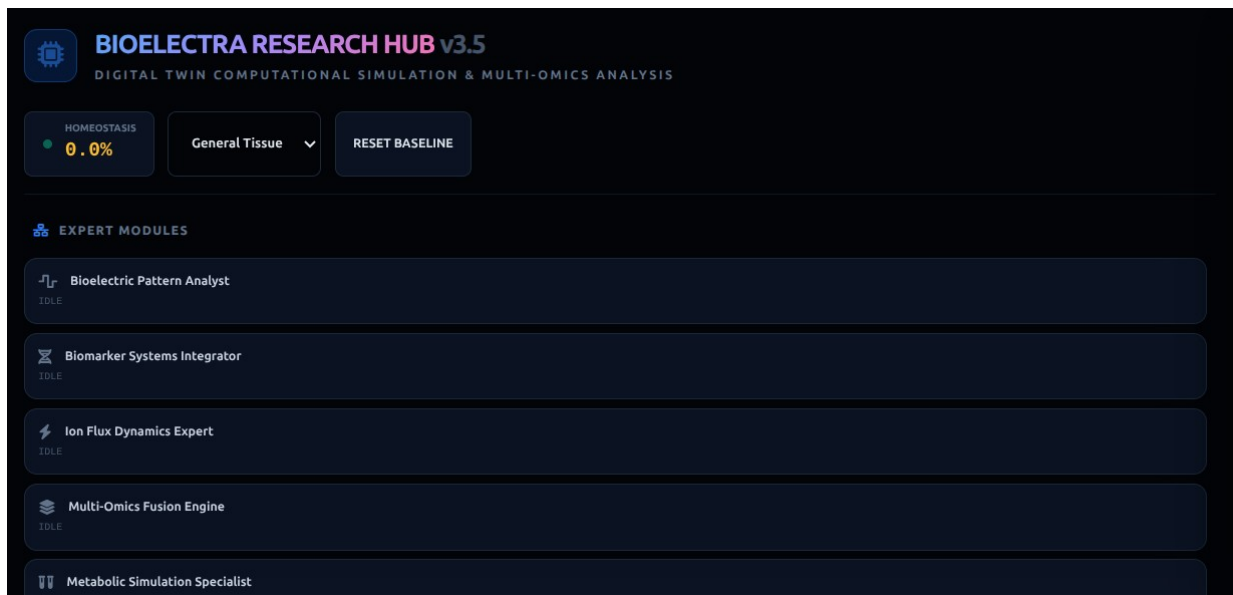
### General Tissue Model

A synthetic tissue layer used as the default simulation substrate. Users can reset the baseline at any time to re-initialize the model.

## 24.2 Expert Modules (All AI-Driven, All Explainable)

Each module operates independently and can be orchestrated together for complex simulations.

- **Bioelectric Pattern Analyst** — Detects voltage-based signatures and membrane potential trends.
- **Biomarker Systems Integrator** — Merges biomarker inputs into unified computational structures.



- **Ion Flux Dynamics Expert** — Models ionic movement and charge distribution.
- **Multi-Omics Fusion Engine** — Integrates genomic, proteomic, metabolomic, and ionic layers.
- **Metabolic Simulation Specialist** — Projects metabolic load and energy flow.
- **Hypothesis Generator AI** — Proposes computational hypotheses based on observed patterns.
- **Causal Inference Engine** — Estimates directional relationships between variables.
- **Simulation Reproducibility Auditor** — Ensures deterministic and auditable outputs.
- **Digital Twin Synchronization Manager** — Aligns all modules with the active Twin state.
- **Research Hub Orchestrator** — Coordinates all expert modules in real time.

All modules start in **idle** mode and activate on demand.

## 24.3 In-Situ Bioelectric Mapping

A high-resolution visualization layer that displays membrane potential ( $V_m$ ) across the simulated tissue.

### Voltage Reference Scale

- **-80 mV** → Healthy computational baseline
- **-10 mV** → Pathological deviation threshold

### Interactive Controls

- Scroll to zoom
- Drag to pan

- Hover for telemetry
- Mesh overlay toggle

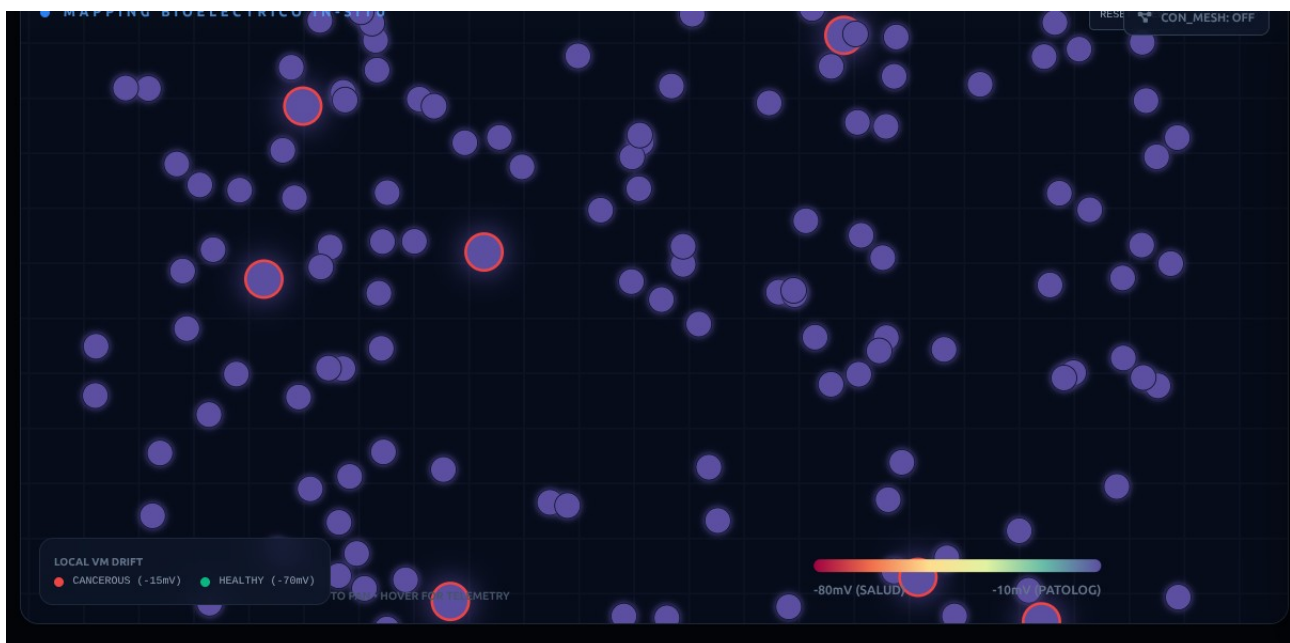
## Local Vm Drift

Shows micro-variations in membrane potential across the tissue.

## Example States

- **CANCEROUS (-15 mV)** — Computationally depolarized region
- **HEALTHY (-70 mV)** — Stable region near baseline

*(These are simulation states, not clinical interpretations.)*



## 24.4 Twin Biomarkers & Ion Channel Activity

The Digital Twin tracks activation levels of key ionic components:

- **Sodium (Na<sup>+</sup>)** — 50%
- **Potassium (K<sup>+</sup>)** — 50%
- **Calcium (Ca<sup>2+</sup>)** — 30%
- **Chloride (Cl<sup>-</sup>)** — 20%

These values represent **relative activation within the simulation**, not biological measurements.

## 24.5 Computational Indicators

- **Causal Inference Score:** 0.82 CONF

- Indicates strong directional relationships within the model.
- **Metabolic Stress: 0.34**
  - Represents computational load on the metabolic simulation layer.
- **Network Entropy: 1.44 NAT**
  - Measures variability and complexity of the system.

## 24.6 Perturbation Engine

A controlled environment for applying computational disturbances to the Digital Twin.

Available perturbations:

- **Acidosis**
- **Calcium Spike (Ca<sup>2+</sup> Spike)**

These perturbations allow researchers to observe how the system reorganizes itself under stress.

## 24.7 Telemetry Stream (Encrypted)

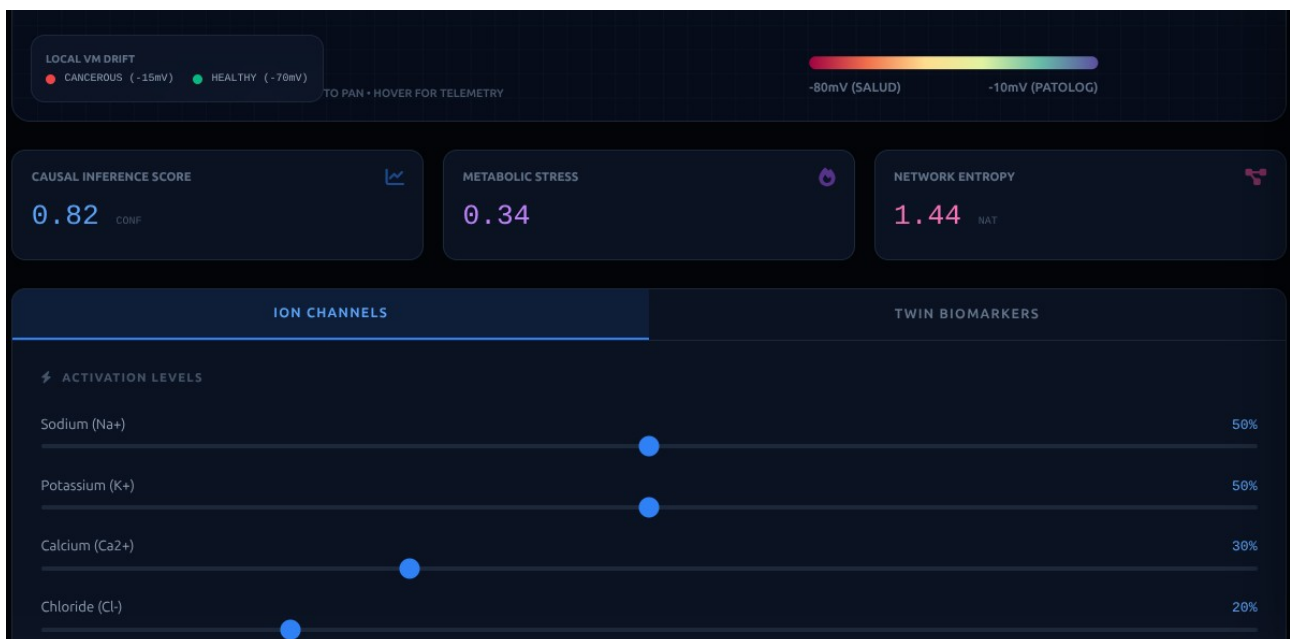
A real-time log of system activity.

Example:

Código

```
[03:11:09] Research Hub Orchestrator initialized.
[03:11:09] Synchronizing expert modules...
```

All telemetry is encrypted and fully auditable.



## 24.8 AI Twin Report Synthesis

The system can generate a **Digital Twin AI Report**, summarizing:

- Bioelectric patterns
- Ion flux dynamics
- Multi-omics fusion results
- Causal inference structures
- Perturbation responses
- Reproducibility metrics

This report is strictly computational and does not provide medical conclusions.

