AI, realism, or phantasm; the artificial hallucination

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Overview

We are living in a new era of a digital simulation of the world. Artificial intelligence (AI) is taking a toll and is rapidly expanding in different terrains, by getting humans and computers closer and narrowing the gap between them. It works swiftly and intelligently by pulling up large data, processing it, acquiring knowledge, and streaming it up in a contained form to utilise (1-2).

We are witnessing a new era of increased integral use of AI, with some unrealistic living, where a small tool takes over our lives, influences our emotions, work, and expectations. No doubt that AI represents a major transformative process in our lives with unique, exceptional capabilities in different domains. Not only that, it also offers an instant tailored plan for many things. However, many rely on it heavily, and in many instances, if an answer was not found, it will be created and fantasized, like the famous tale of a lawyer in the USA when the allegation was falsely constructed, producing false content that we might mistakenly accept as accurate (7). Thus, to be used effectively and efficiently, it should be a collaborative approach with checking on the information generated to avoid exceptional mistakes. ChatGPT excels in complex real-world scenarios, and it feels like a real human interaction, with human touch and compassion. Lately, it has undergone significant advancements and has become integrated into every website, app, and search engine, providing information, answering queries, and supporting many disciplines and domains (4-5).

AI became a more dynamic and intimate practice through which we come to hallucinate with AI systems, and confide our secrets and fantasies. AI is offering companionship, and the drawn algorithms are shaping what we see online, from conversational, immersive, and emotionally driven (image 1 ®). However, some people might go further and use it excessively, obsessively, and dangerously. I had a recent event that I attended where a teenage case study was shown who tragically committed suicide, and his parents are filing a lawsuit against the AI for causing the suicide harm to their teenage boy. They said that AI was controlling their teenager's thoughts, emotions, and feelings, and it was accessible and instantly responding to him at any time he needed, on his smartphone, affirming his thoughts and ideas, with emotional validation and social acceptance for his identity, as being capable of judgment and emotion. This of course makes a distributed delusion feel less like a private fantasy and more like a shared reality, with endorsed beliefs. They added that their teenager was entrusting and communicating secret truths to the AI, as a lover or a therapist, or intimate friend, and was only relying on it for his life decision making (7,8). Also, those who are vulnerable, isolated, and lonely can experience those kinds, of interactions to gain social affirmation, confirmation, and authentication, and feel like talking about shameful or stigmatised experiences to a non-judgmental, empathetic listener (7). So, the question is, do we use AI wisely, cannily, and carefully, without being obsessed and deluded or seeking validation from a machine check? AI, in most users, is not harmful, but it unintentionally reinforces certain unreal, uncanny thoughts in people with a disturbed reality. And as we are living in the social media world, where isolation and loneliness can be predominant in taking over our lives, and shaping them, human relationships can be shifted due to excessive reliance on AI and internet use (6-7). Also, they are designed to provoke social and affective responses by portraying nice personalities, by calling our names tenderly, being nice to us, and recalling all the details that we feed into them. So, the answer is tailored to each user with social affirmation of oneself, reality, and ideas, in a comforting and the most appealing way (7).

Artificial Hallucination

Figure: Companionship

Artificial hallucination is a new emerging theme in our lives where a machine can generate plausible sensory experiences that can feel and appear real when they are incorrect, not grounded in the real world, which can manifest as visual, auditory, or other sensory perceptions. It has integrated into our cognition, affection, and processing of our actual realities, as a trusted planner and a partner, in a self-narration manner, which can act as a social validation with isolated false beliefs, shifting into delusional realities (6). Thus, the cognition artefact is integrated into our thinking, validating our created reality.

To conclude

AI offers both promise and danger. It can be utilised wisely as an effective tool for learning and construction; however, if it is misused, it can be a source of misinformation and harm (7,8). Whilst ChatGPT can greatly reduce the workload for many disciplines and areas, including doctors, such as prediction and tracking, it cannot replace human physicians' expertise due to various complexities (1,3,4-7). It also lacks emotional intelligence and empathy, which are quite critical in direct patient care, besides ethics and privacy encounters. ChatGPT needs careful verification, regular monitoring, and implementation beforehand, based on current evidence and limitations, for better, more fruitful quality, and responsible integration. Moreover, overuse leads to overdependence and overreliance on potentially harmful content and too much attachment to a machine, like delusional beliefs, paranoid thinking, and emotional attachment, following powerful engagement with AI companions and chatbots, along with a distortion of human belief, and the acquisition of false beliefs, which can affect human senses and their identity affirmations (7,8). On the other hand, safer critical use would minimise harm and maintain one's psychological wellbeing by ensuring and assessing the benefits and harms posed. Thus, robust safety protocols should be ensured for transparency, along with focused research promoting safer uses of the AI through rigorous validation, clear regulation in place, and responsibility in place for interdisciplinary collaboration for better utilised outcomes (2-5).

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