

Advancing precision medicine in companion animal oncology: Integrating AI, advanced radiology, and surgical innovation

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Abstract

Precision medicine (PM) is bringing about a paradigm shift in the companion animal oncology. PM approach consider a unique treatment and method of diagnosing for each patients. in essence of PM, new cutting-edge technology such as artificial intelligence (AI) hand in hand to novel imaging approach and surgical innovation improving the cancer management. This review examines open-access and published English-language articles containing keywords such as AI, advanced radiology, surgical innovation, and precision medicine in the field of companion animals from 2014 to 2025 in PubMed, Scopus, Web of Science, and Google Scholar. The PM principles have changed surgical oncology, including the integration of oncogenomics, the use of minimally invasive techniques, and robotic-assisted procedures that make it easier to move around. In addition, AI makes these surgical frontiers even bigger by helping with detailed preoperative planning, real-time guidance during surgery, and objective skill training. Also, AI has pivotal role in enhancing diagnostic accuracy, automating image segmentation, and bolstering clinical decision support within modern radiology. This paper also talks about how useful intraoperative imaging is for quickly checking the margins and new precision medicine technologies like Next-Generation Sequencing (NGS), liquid biopsies, and non-coding RNAs for finding and predicting diseases. AI has recently sped up frameworks for comparative oncology, which has made the translation medicine easier. On the other hand, the PM method has its own problems, like high costs and the need for experts to handle big issues. It needs clear rules for sharing data and teams of experts from different fields. This integrated framework is very important for raising the standard of animal care, coming up with new ideas, and making a big difference in both human and animal medicine.

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1. Introduction

In these recent decades companion animals have been living longer than ever before due to recent advancement in animal nutrition, improved animal welfare, better hygiene practice, and overall medical development (Tanaka et al. 2020). Consequently, malignant neoplasia has emerged as a significant mortality factors in aged dogs globally particularly in countries such as Sweden, the United States, the United Kingdom, and Japan, where it contributes to 15-30% of mortality rates (Inoue et al. 2015; O'Neill et al. 2013). The recent novel diagnostic techniques and therapeutic strategies have been implemented to prevent and detect cancer; yet, cancer imposes a heavy burden on the healthcare system (Zaorsky et al. 2017). However, new discoveries in cancer genetics (Barot et al. 2023), defining tumor-specific molecular profiles (Malone et al. 2020), and coming up with new treatment methods like advanced nanomaterials (Taheriazam et al. 2023), and ways to fight drug resistance (Hashemi et al. 2023) are making it possible for more creative and targeted treatments (Ghasemi et al. 2016).

As a result, the conventional "one-size-fits-all" style of thinking about medicine is slowly being replaced by PM. PM is a means to make illness prevention and treatment programs that are unique to each person based on their genetics, environment, and lifestyle (König et al. 2017; Wang et al. 2016). This paradigm puts the patient first and tries to make treatment as effective as possible by picking the optimum therapies for each type of cancer or patient profile (Bu et al. 2016), while concurrently minimizing unnecessary diagnostic procedures, therapy-related costs, and adverse side effects (Penet et al. 2014). PM is all about gathering a lot of data and using advanced analysis to turn information about individual patients into helpful clinical insights (Kraus et al. 2018). Similar to human oncology, the paradigm shift towards adopting PM in small animal oncology marks a new approach (Chon et al. 2024; Lajmi et al. 2024). PM in veterinary oncology means integrating advanced diagnostic tools, such as genomic profiling and innovative molecular imaging techniques. These tools provide crucial data basis for the development of targeted medicines and the optimisation of surgical procedures for companion animals (Gola et al. 2021; Gray et al. 2020; Mealey et al. 2019). This new approach of treating neoplasms is a

big change from the traditional methods. The collaboration of experts in contemporary pharmaceuticals, advanced surgical methods, and, most importantly, cutting-edge diagnostic imaging necessitates collaborative multidisciplinary efforts across many fields (Lajmi et al. 2024; Thamm 2019).

The evolving of PM in pet animals heavily depends on the advanced imaging and surgical methods (Yitbarek and Dagnaw 2022). Comparative oncology offers a variety of benefits for both groups, researching in various fields such as understanding tumour microenvironment characteristics like the enhanced permeability and retention (EPR) effect for improved drug delivery and imaging contrast (Gray et al. 2020; Thamm 2019). The surgical oncology progress, particularly in the development and refinement of minimally invasive procedures (Balsa and Culp 2019), sophisticated image-guided interventions (Favril et al. 2018), and novel ablative technologies designed to maximize tumor eradication while minimizing patient morbidity (Kudnig and Séguin 2022). Many of these advanced imaging biomarkers, targeted therapeutic strategies, and advanced surgical techniques were first developed and tested in humans. However, the basic ideas behind them could be very useful for improving cancer care in companion animals (Ren et al. 2022; Ruan et al. 2020). However, for these complex new technologies to be successfully translated and integrated into routine small animal oncology practice, they need to be carefully adapted, thoroughly validated, and kept up with by radiologists, oncologists, surgeons, and other veterinary specialists (Furdos et al. 2015; Han et al. 2024a). This review provides a comprehensive analysis of how the strategic integration of AI with advanced radiology and innovative surgical techniques is currently advancing precision medicine in companion animal oncology.

2. Methods

In this article, open-access peer-reviewed articles that were published in English between January 2014 and May 2025 were assessed. Search strategies combined keywords and subject headings related to three core domains: (1) companion animal oncology (e.g., "dog," "cat," "canine," "feline," AND "cancer," "tumor," "oncology"); (2) key technologies and approaches (e.g., "Artificial Intelligence," "Machine Learning," "Radiology," "CT," "MRI," "PET," "Radiomics," "Imaging Biomarkers," "Surgery," "Surgical Oncology"); and (3) the central theme ("Precision Medicine," "Personalized Medicine"). The keywords were searched via PubMed, Scopus, Web of Science, and Google Scholar. Publications that were eligible included original research articles and review papers that looked at the development, validation, or use of new radiological techniques, artificial intelligence, and/or new surgical techniques in the context of precision oncology for dogs and cats. The case reports, conference abstracts, articles in languages other than English, or studies that weren't directly related to using these technologies in companion animal oncology were not included. After looking at the titles and abstracts, full-text articles were looked at again to see if they should be included. To meet the goals of this review, data about the study's goals, methods, technological applications (in AI, radiology, and surgery), relevance to precision medicine, main findings, and limitations were systematically gathered and put together in a narrative.

3. Results

3.1 Advances in diagnostic radiology for companion animal oncology

Diagnostic radiology has evolved in the way of transitioning from a

discipline primarily focused on anatomical depiction to one that increasingly incorporates functional and molecular data to guide cancer care (Nagata 2019). Although the classic radiographic techniques are still valuable for initial cancer staging, they are now substantially augmented by advanced cross-sectional modalities such as computed tomography (CT), magnetic resonance imaging (MRI), and positron emission tomography (PET). These technologies, which can be improved by AI-driven analyses, give more detail and new types of information (Hennessey et al. 2022; Hespel et al. 2022; Mattoon and Bryan 2013; O'Connor et al. 2017). So, modern imaging goes beyond just looking at the structure of a tumour to give important information on its physiology, metabolism, and microenvironment. This helps with the molecular characterization that is needed for precision oncology (Spinu-Popa et al. 2021). Modern veterinary diagnostic imaging is mostly about finding out how the body works and how it looks in a way that can be linked to the genetic and molecular profiles of tumours (Yitbarek and Dagnaw 2022). For example, functional imaging tools let us see what the main biological processes, such as metabolism and proliferation of a tumour are. For example, tracers like 2-deoxy-2-[¹⁸F]fluoro-D-glucose (¹⁸F-FDG) and 3'-deoxy-3'-[¹⁸F]fluorothymidine (¹⁸F-FLT) can be used in PET imaging to see and measure changes in energy metabolism and increased cell growth, respectively. These assessments can be performed shortly after initiating cancer therapy to predict treatment response early in both preclinical and clinical veterinary settings (De Bruycker et al. 2018; Jensen and Kjaer 2015; Joshi et al. 2017). Other translatable techniques from human practice include oxygen-enhanced MRI for quantifying tumor hypoxia (Fleming et al. 2015) and advanced CT applications, such as virtual simulation for precise radiotherapy planning (Mi et al. 2016).

The unifying concept behind these advances is that of imaging biomarkers (IBs)—clinically measurable characteristics derived from medical images that capture normal biological processes, pathogenetic processes, or response to therapeutic intervention (Colombe et al. 2022; O'Connor et al. 2017). IBs are gaining crucial roles in veterinary oncology to detect cancer, diagnose, stage, and assess treatment response, offering non-invasive and generally cost-effective approaches (Perera et al. 2022). Their integration allows for quantification of tumor biology and treatment response, resulting in personalized treatment strategies (Chiu and Yen 2023; Perera et al. 2022). This is supplemented by radiomics as well, which involves high-throughput extraction of quantifiable features from imaging to yield imaging signatures that are correlated with the underneath genomics and can be used for predicting clinical outcomes (Able et al. 2021; Basran and Porter 2022). Preclinical molecular imaging with PET and MRI plays a central role in this field by enabling the development and validation of quantitative IBs that connect animal model studies to applications in veterinary oncology (Aguir et al. 2019; Buck et al. 2018; Kovacs et al. 2018). Furthermore, the fusion of multimodal imaging modalities, combining data from CT, MRI, PET, and ultrasound, significantly increases the specificity of diagnosis and therapy planning (Giardino et al. 2017). Combined imaging is particularly advantageous in veterinary oncology for accurate surgical planning as well as post-treatment follow-up. For instance, contrast-enhanced CT or MRI defines tumor margins with high resolution, which is critical for planning minimally invasive or complicated oncologic surgery. A comparative summary of these and other imaging modalities routinely employed in veterinary oncology is presented in Table 1. These modalities also allow the production of three-dimensional (3D) tumor reconstructions, which are very useful in the assessment of invasion into surrounding tissues, predicting

Table 1. Comparative overview of oncology imaging modalities for veterinary applications		
Imaging modality	Key features and advantages	Potential veterinary applications
Computed Tomography	High-resolution detailed anatomy, rapid acquisition	Staging, tumor volume delineation, pre-surgical mapping
Magnetic Resonance Imaging	Superior soft tissue contrast, functional imaging options	Assessing tumor boundaries and vascular invasion
Positron Emission Tomography	Metabolic and functional assessment, early response prediction	Monitoring treatment efficacy, mapping metabolic activity
Ultrasound	Real-time imaging, accessibility, cost-effectiveness	Fine-needle aspirates guidance, localized tumor evaluations

problems in surgery, and reconstructive planning (Lajmi et al. 2024; Yitbarek and Dagnaw 2022).

3.2 Impact of artificial intelligence (AI) and machine learning (ML) in veterinary diagnostic radiology

AI, in the form of machine learning (ML) and deep learning (DL) algorithms, is emerging as a revolutionizing force in modern veterinary diagnostic radiology, and oncology is no exception. These technologies excel at managing complex, high-dimensional imaging datasets and delivering powerful decision-support tools for practitioners, yet not replacements for experienced radiologists (Burti et al. 2024). One of the clinical rollout's key principles is maintaining a "human-in-the-loop" approach, whereby AI augments human judgment to ensure clinical responsibility and patient safety (Goisau and Cano Abadia 2022). The applications of AI in veterinary oncologic imaging are diverse and expanding exponentially. AI algorithms can significantly streamline radiology workflow by automating the labor-intensive processes such as image segmentation—the precise delineation of tumor borders and organs at risk—which is so critical for accurate radiotherapy planning and surgical guidance (Cohen and Gordon 2022; Leary and Basran 2022). Furthermore, AI software is being developed for detecting and classifying neoplastic lesions on various imaging modalities with increased sensitivity, and for enhanced diagnostic consistency between practices (Burti et al. 2024; Schmid et al. 2022). Such consistency is also vital for the standardized implementation of precision therapies.

Besides lesion detection and segmentation, AI enables precision oncology through the potential for more sophisticated analysis of imaging biomarkers and radiomic features. ML models are capable of picking up subtle patterns in imaging data that are not detectable by the human eye and mapping them to underlying tumor biology, genetic signatures, or treatment responses (Aguiar et al. 2019). These roles involve patient stratification, where AI can aid in the categorization, animals based on imaging characteristics of their tumors for prognosis or for tailoring treatment protocols for the maximum therapeutic effect and limiting inappropriate interventions or toxicity (Pang et al. 2021; Shaikh 2022; Yousefirizi et al. 2022). For instance, AI could predict responsiveness to targeted therapies in tumors according to pre-treatment imaging features, a concept with very high similarity in human oncology (Sadeghi et al. 2023; Zandieh et al. 2023a). While the substantial clinical evidence for most such AI applications in veterinary medicine is ongoing, potential benefits for encouraging personalized oncologic therapy are large. Continued progress, however, relies on the development of disease-specific, standardized imaging data for training

of strong AI models and the establishment of strict methodologies for their translation into clinical use (Aguiar et al. 2019).

3.3 Precision medicine in companion animal surgical oncology

Surgical intervention has long been a cornerstone of cancer treatment in companion animals with the greatest possibility of cure or acceptable palliation if removal of the tumor can be accomplished (Pratschke 2016). Traditional surgical oncology relies on the methods of precise identification of the tumor, accurate anatomical resection with adequate margins, and evaluation of the overall condition of the patient to avoid morbidity and optimize quality of life (Orencole and Butler 2013). But the new paradigm of PM is in the process of revolutionizing this field, towards a more individualized and biology-based strategy of surgical cancer treatment (Dreyer et al. 2020). Precision surgical oncology in companion animals aims to individualize surgical strategies according to the distinctive characteristics of each patient and his/her corresponding cancer, integrating molecular and genetic insights with advanced-level technological innovation (Argento et al. 2025; Soria et al. 2018). This is a shift from the exclusive reliance on gross anatomical features to incorporating improved understanding of tumor biology. The impetus for this shift is oncogenomic, since with improved genomic sequencing and molecular profiling, one can determine specific genetic mutations and pathways that caused a specific animal's cancer (Goodwin et al. 2016). Such oncogenomic information might guide decisions on the necessity and extent of surgery and, in conjunction with successful targeted therapy, enable more conservative resections, or identify the need for more aggressive approaches in certain molecular subtypes (Hirsch et al. 2016). This results in a powerful synergy in which molecular diagnosis informs surgical planning and perioperative management, and correctly executed surgery can optimize the windows for observing after adjuvant treatment (Argento et al. 2025).

The utilisation of PM in the real sense in veterinary surgical oncology is also reflected in the employment of novel surgical techniques and technologies designed to optimise precision and minimise invasiveness (Fonseca-Alves et al. 2021). Minimally invasive surgery (MIS), including laparoscopic and thoracoscopic surgery, is increasingly being utilized in companion animal oncology. MIS has the benefits of reduced postoperative pain, shorter recovery times, and less tissue trauma, which are particularly useful in small animal patients where access to the surgical site may be poor and morbidity from conventional open surgery may be high (Borah et al. 2025; Buote 2024; Kudnig and Séguin 2022; Mayhew 2014). Besides MIS, robotic surgical systems, though not as prevalent in veterinary medicine presently as they were in human health care, can offer enhanced 3D visualization, better instrument dexterity, and tremor elimination, with the potential to allow surgeons to enter intricate anatomical regions more accurately (Borah et al. 2025; Hoeckelmann et al. 2015; Wright 2017). Further, the development of advanced surgical simulators is also changing training as veterinary surgeons are able to hone complex oncologic procedures in a secure environment (Aramini et al. 2023). These technological and cognitive breakthroughs, driven by PM principles, are projected to improve oncologic and overall welfare and quality of care for dogs and cats with cancer.

3.4 The role of artificial intelligence in surgical oncology

AI is fundamentally transforming surgical oncology by delivering powerful tools to enhance decision-making and technical execution along the perioperative continuum. Incorporating ML, DL, and

computer vision, AI employs complex algorithms to analyze gigantic datasets, recognize patterns, and provide predictive information, thereby changing traditional surgical paradigms (Chang et al. 2020; Han et al. 2024b; Morris et al. 2023). The application of these technologies in surgical oncology is designed to improve accuracy, safety, and outcomes for patients, with significant translational potential to companion animal health. AI plays a role in preoperative planning in risk stratification and the development of personalized surgical plans. AI systems can integrate multidimensional patient-specific data—like advanced imaging, genomic profiles, proteomics, and clinical laboratory findings—to predict variables such as tissue response to surgery, likelihood of residual disease, and postoperative morbidity (Abbasi and Hussain 2024; Mirchi et al. 2020). For instance, ML algorithms on big clinical datasets, such as NSQIP in human surgery, have proved superior to traditional models in predicting surgical complications and, by that extension, allow personalized perioperative planning (Collaborative et al. 2020; Hassan et al. 2023; Yeramосу et al. 2025). Such predictive models are immensely valuable in optimizing surgical approaches and minimizing patient risk in complex oncologic operations.

During the intraoperative phase, AI is significant in providing real-time guidance and performance enhancement. Computer vision, one of the most crucial subsets of AI, deciphers intraoperative video streams to identify anatomical structures, detect surgical instruments, and identify different phases of an operation, with accuracy sometimes matching that of experienced surgeons (Kennedy-Metz et al. 2021; Ward et al. 2021). This has the potential to provide the surgical team with real-time feedback, alerting them to protocol breach or alerting them to potential hazards, thereby enhancing accuracy and safety (Mascagni et al. 2022). Furthermore, real-time image segmentation with AI and AR overlays can provide surgeons with precise visual cues, improving targeting accuracy (Bain et al. 2024). Robotic-assisted surgery is particularly benefited by AI integration, with ML algorithms enhancing instrument tracking, enabling automation of settings based on tissue characteristics, removal of smoke from surgical videos, and facilitating the identification of safe planes of dissection (Fard et al. 2018; Iftikhar et al. 2024; Knudsen et al. 2024). The inherent precision of robotic instruments, combined with AI-driven motion scaling and tremor reduction, allows for more accurate movement within constrained areas, with the potential to achieve improved resection margins and reduced complications in complicated oncologic procedures (Hwang and Hunt 2020; Wright 2017). Aside from direct surgical assistance, AI advancements are also improving surgical training and skill assessment. AI-powered simulators and performance metrics tools can provide objective measurement, detect technical faults, and provide personalized feedback, thereby accelerating the learning curve for complex oncologic procedures and helping to maintain high standards of surgical care (Navarrete-Welton and Hashimoto 2020; Varghese et al. 2024). The application of such diverse AI applications to daily veterinary surgical oncology can improve the precision and success of cancer surgery in companion animals but requires dedicated research, validation, and adaptation to species-specific demands.

3.5 AI-assisted surgical workflow and perioperative planning

Adding artificial intelligence to the overall surgical process is propelling an increasingly integrated, data-driven, and smarter perioperative process, from initial patient screening to post-op management. AI-enhanced surgical workflow leverages processing power to parse and combine massive volumes of patient data and

inform decision-making at each critical point (Nardone et al. 2024). The aim is to enhance the efficiency, safety, and personalization of surgical cancer treatment. In the preoperative phase, AI systems contribute by creating personalized surgical plans through the analysis of imaging data, patient history, genomic profiles, and predictive models of treatment response or potential complications, as detailed previously. This step makes the next step in the surgery more informed. AI goes beyond direct guidance during the intraoperative phase to help with managing workflow. Real-time computer vision systems built into the surgical environment can keep an eye on the steps of the procedure, predict the instruments that will be needed, and send alerts or suggestions to the surgical team. This helps ensure that best practices are followed and that the procedure is as efficient as possible (Jalote-Parmar and Badke-Schaub 2008; Navarrete-Welton and Hashimoto 2020). Ongoing analysis of the surgical field assists dynamic decision-making and intraoperative readjustment. Finally, after the operation, AI can assist in predicting recovery trends, identifying at-risk patients for complications for early treatment, and optimizing follow-up care schedules. The following figure is a conceptual representation of this AI-powered surgical workflow with significant AI contributions along the perioperative continuum (Fig. 1). The implementation and introduction of such integrated AI-enabled processes in veterinary cancer surgery could substantially streamline complex cancer procedures, increase utilization, and eventually improve the quality and standard of care.

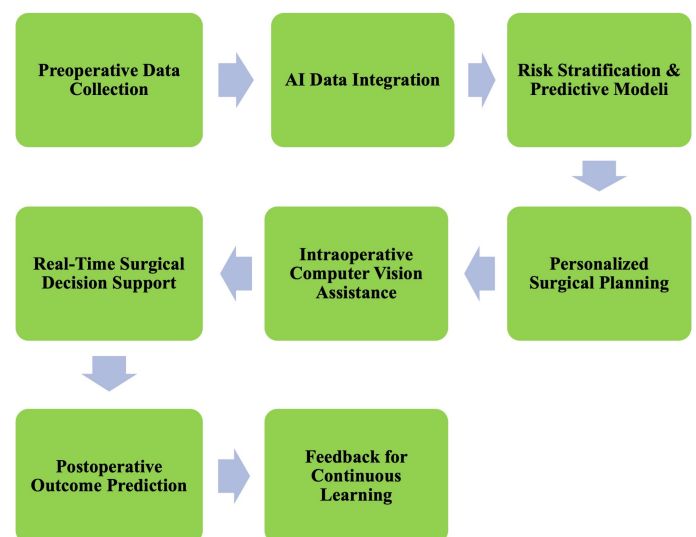


Fig. 1. Conceptual overview of this AI-assisted surgical workflow

3.6 Intraoperative imaging and real-time surgical guidance

While detailed preoperative imaging forms the cornerstone of surgical planning, the advent of advanced intraoperative imaging (IOI) modalities has significantly expanded the ability of the surgeon to achieve precise tumor resection and make important real-time decisions intraoperatively during oncologic surgery (Alam et al. 2018; Lauwerends et al. 2021). These tools provide immediate visual feedback, enabling avoiding the pitfalls of relying solely on preoperative data, which can't always compensate for tissue displacements and changes during surgery. Different IOI techniques are being found useful. Real-time intraoperative ultrasound has a dynamic, cost-effective, and radiation-free method of imaging soft tissue lesions, guiding biopsies, and confirming resection margins (Moiyadi 2016; Nagaya et al. 2017). Intraoperative CT (ICT) provides high-resolution

cross-sectional imaging directly in the operating room, enabling updated anatomical information for complex resections and immediate verification of surgical goals, such as hardware placement or extent of tumor removal (Grozđanić et al. 2024; Kumar et al. 2021).

A particularly impactful advancement is fluorescence-guided surgery (FGS), a form of intraoperative molecular imaging. FGS utilizes systemically or locally administered fluorescent contrast agents that selectively accumulate in tumor tissue or highlight specific biological processes. Specialized camera systems then enable real-time visualization of these fluorescent signals, helping surgeons to more accurately delineate tumor margins, identify residual tumor deposits, detect involved lymph nodes, or visualize critical normal structures (Azari et al. 2021; Hussain and Nguyen 2014). Key advantages of FGS include its relative safety (often non-ionizing), ease of integration into surgical workflows, and demonstrated ability in human clinical trials to improve the completeness of tumor resections and reduce local recurrence rates (Azari et al. 2021; Singhal 2016). The translation of various FGS agents and systems holds considerable promise for companion animal oncology (Lee et al. 2023).

Data from these IOI modalities can be integrated with surgical navigation systems, providing augmented reality overlays or co-registration with preoperative plans to guide the surgeon with enhanced spatial awareness (Hu et al. 2018). The merging of these is important for maximizing tumor cytoreduction without leaving behind vital healthy tissues. In veterinary oncology in companion animals, where tumor presentations vary extensively and working areas can be compromised anatomically (Shaye et al. 2015), the precision that IOI offers is particularly valuable. It is capable of minimizing risks of protracted anesthesia or multiple surgeries by maximizing the rate of success of the first treatment (Biretoni et al. 2017; Cabon et al. 2016). The continuous innovation and development of IOI technology are thus foundations for improving precision surgical oncology objectives in veterinary medicine.

3.7 Innovations in precision cancer management for companion animals

Development in PM of oncology in companion animals is stimulated by a series of significant technological and conceptual innovations, enhancing diagnostic accuracy, prognostic capability, and individualization of treatment strategies (Domrazek and Jurka 2024). This advancement is shifting veterinary cancer management away from traditional paradigms, ushering in new optimism for enhanced outcomes. While cancer in companion animals, particularly canine animals, is a predominant cause of morbidity and mortality, these advancements are paving the way for more effective and personalized management (Alvarez 2014; Fleming et al. 2011). A cornerstone of this progress is advanced genomic profiling, primarily through NGS. NGS techniques have revolutionized the ability to comprehensively analyze cancer genomes in dogs and cats, offering high sensitivity and accuracy in detecting genetic alterations, specific mutations, and molecular subtypes that drive tumor development and progression (Brunetti et al. 2023; Flory et al. 2024; Flory et al. 2022; Ruiz-Perez et al. 2024). This specific genomic information allows veterinarians to identify specific therapeutic targets, predict medication responses, and classify patients into subpopulations for optimal treatment plans (Alshammari et al. 2025; Bahcall 2015). The data revealed by NGS in domesticated animals also contributes significantly to comparative oncology in general, accelerating research and allowing the development of novel therapies on the board of species, including humans (Marconato et al. 2013; Oh

Table 2. Comparison of traditional diagnostic methods versus next-generation sequencing (NGS)-based approaches in veterinary oncology

Diagnostic method	Traditional techniques	NGS
Sensitivity	Moderate	High, enables detection of low-frequency variants
Throughput	Single or few targets at a time	Simultaneous analysis of hundreds of genes
Invasiveness	Often requires tissue biopsy	Liquid biopsy available; non-invasive
Cost Efficiency	Lower upfront cost	High initial investment but reduced cost per target over time
Data Complexity	Limited molecular insights	Comprehensive genomic landscape insights

and Cho 2023; Simpson et al. 2022; Varshney et al. 2016). This exhaustive genomic information that is condensed compared to traditional methods in Table 2. Based on genomic information, liquid biopsies are rapidly becoming an extremely useful, less intrusive diagnostic tool in veterinary oncology. These tests analyze circulating tumor-derived material, such as cell-free DNA (cfDNA) and other markers in blood or other fluids, that are shed by tumor cells (Colombo et al. 2021; Flory et al. 2022; Kim et al. 2021). Liquid biopsies have the potential to be valuable in early cancer detection, tracking treatment response, identifying minimal residual disease, and identifying emergent resistance mutations, all with much less invasiveness than traditional tissue biopsies.

Besides, the roles of non-coding RNAs (ncRNAs) in cancer biology are being well recognized. MicroRNAs (miRNAs) and long non-coding RNAs (lncRNAs) although they are not translated into proteins, are essential regulators of gene expression and play roles in cancer progression, metastasis, and drug resistance (Hashemi et al. 2024; Mirzaei et al. 2023; Sabouni et al. 2023; Taheriazam et al. 2023; Zandieh et al. 2023b). In veterinary oncology, both miRNAs (Fish et al. 2020; Srisawat et al. 2025) and lncRNAs (Hitte et al. 2019; Zhang et al. 2023) are being investigated as stable and readily detectable biomarkers. Their potential for diagnostic, prognostic, and theranostic applications could further refine personalized treatment pathways within the PM framework (Bolha et al. 2017; Cavaliere et al. 2021; Yuan et al. 2020). Collectively, these innovations in genomic sequencing, liquid biopsies, and ncRNA analysis are enhancing the ability to detect tumors earlier, develop more targeted therapies, improve survival rates, and ultimately enhance the quality of life for companion animals with cancer (Chon et al. 2024). They exemplify the multidisciplinary collaboration inherent in the PM ecosystem, bringing together researchers, diagnostic laboratories, and clinicians to deliver tailored cancer care. This collaborative and translational process is illustrated in Fig. 2.

3.8 Challenges and future opportunities in precision veterinary oncology

The integration of advanced imaging, AI, and molecular innovations into precision veterinary oncology holds immense promise for transforming cancer care in companion animals. However, the widespread clinical adoption and sustained progress of these sophisticated approaches are contingent upon successfully navigating several notable challenges (Petzschner 2024). It is overcoming these challenges that holds the secret to translating today's research gains into tomorrow's clinical advances, yet these very challenges also offer

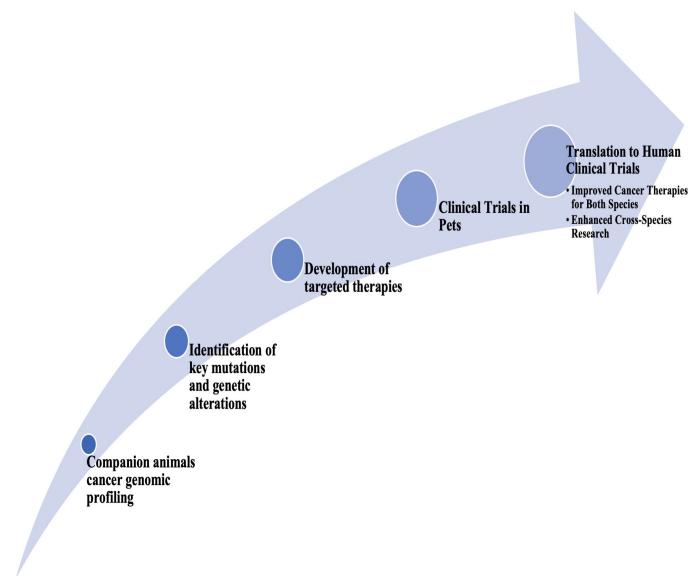


Fig. 2. The collaborative cycle in comparative oncology research. This flowchart illustrates the key stages and interactions in comparative oncology, highlighting how research involving naturally occurring cancers in companion animals (e.g., genomic analysis, preclinical trials) informs and accelerates the development and validation of targeted therapies and diagnostic approaches for both veterinary and human patients, fostering a reciprocal translational impact.

significant opportunities for development, collaboration, and strategic thinking for the field in general. One group of barriers relates to financial and infrastructural hurdles. The cutting-edge technologies that underpin precision oncology—including advanced imaging systems like PET-CT, NGS platforms, specialized AI software, and robotic surgical units—necessitate substantial capital investment and incur significant ongoing operational expenditure (Duffy 2016; Lajmi et al. 2024). Such high costs can considerably limit access to these technologies, particularly for smaller veterinary practices or those operating in resource-constrained environments. In line with this, it will be essential to the broader access the development of more affordable diagnostic and therapeutic products, as well as innovative financing mechanisms (Kasztura et al. 2019). Beyond financial considerations, data management and interoperability present further complex issues. Precision medicine is inherently data-intensive, relying on the effective integration and analysis of diverse datasets, including genomic, proteomic, imaging, clinical, and patient-reported outcomes. Beyond finance, data management and interoperability are other difficult issues. Precision medicine is by its nature data-dependent, based on the effective integration and evaluation of disparate datasets, including those genomic, proteomic, image, clinical, and patient-reported outcomes (Kraus et al. 2018). Current limitations include the lack of data format standardization across platforms and institutions, the prevalence of siloed information systems, and the infrastructure lack for large-scale secure data storage, ethical sharing, and advanced computational analysis. These factors can impede collaborative research efforts and the development of robust, generalizable AI models (Edsjö et al. 2023; Naithani et al. 2021; Petzschnner 2024). Coupled with these are the regulatory and ethical considerations that emerge with rapidly advancing technologies. The pace of innovation outstrips the development of clear regulatory frameworks for novel diagnostics, targeted therapies, and AI algorithms in veterinary medicine. Furthermore, ethical issues of data privacy, informed consent

for data utilization, ownership of biological data, and equitable access to innovative therapies must be diligently and continuously addressed (Goisauf and Cano Abadia 2022; Korngiebel et al. 2017).

One of the most important enablers for the success of precision veterinary oncology implementation is human expertise, yet educational and specialized training needs constitute another significant challenge. Effective use and interpretation of precision approaches necessitates advanced levels of interdisciplinary proficiency in genomics, bioinformatics, sophisticated imaging interpretation, AI literacy, and data science in veterinary practitioners. There is thus a pressing need to augment veterinary curricula with these subjects and to develop specialized continuing professional development programs to equip the workforce with the necessary skills (McGrath and Ghera 2016; Nightingale et al. 2025). Despite these challenges, the path forward is rich with future opportunities and strategic directions that can propel the field. Fostering multi-institutional and international collaborative initiatives is paramount. The establishment of standardized protocols for data collection, quality control, and analysis, along with the creation of shared, ethically governed data repositories, can help overcome current fragmentation and significantly accelerate research progress (Stenzinger et al. 2023). Developing regional or national centers of excellence in precision veterinary oncology could further serve as vital hubs for cutting-edge research, specialized training, and the broader dissemination of validated best practices (Lloyd et al. 2016).

Moreover, leveraging the principles of comparative oncology by strengthening partnerships between veterinary and human oncology research centers offers profound mutual benefits. Naturally occurring cancers in companion animals frequently share important molecular, genetic, and pathological similarities with their human counterparts. This makes them invaluable comparative models for investigating disease mechanisms and for validating novel diagnostic tools (such as liquid biopsies and advanced imaging techniques) and innovative therapeutic strategies, thereby accelerating the translational research pipeline for both human and animal patients (Chon et al. 2024; Lloyd et al. 2016; Pang and Argyle 2016). Continued technological advancements, particularly in AI and computational tools, will also be critical. Future development should focus on creating more interpretable, robust, and rigorously validated AI algorithms specifically tailored for veterinary applications. The availability of user-friendly computational platforms that can seamlessly integrate and analyze multimodal data at the point of care will empower clinicians to make more informed, timely, and personalized treatment decisions (Duggirala et al. 2025; Sisodiya 2021). Finally, a concerted focus on demonstrating value and improving accessibility will be essential. Rigorous studies evaluating the clinical utility and cost-effectiveness of precision oncology approaches are needed to justify their integration into standard care. Concurrently, research into developing more affordable diagnostic tests and targeted therapies will be key to ensuring that the benefits of precision medicine can reach a wider spectrum of companion animals across diverse veterinary care settings (Das et al. 2024). Successfully navigating the existing challenges while strategically capitalizing on these emerging opportunities requires a dedicated and collaborative effort from all stakeholders, including researchers, clinicians, industry partners, regulatory bodies, and funding agencies. Such commitment will be paramount in fully realizing the transformative potential of precision medicine for improving the lives of companion animals diagnosed with cancer.

4. Conclusions

The new approach to combat tumors is the establishment of advanced diagnostic radiology, AI tools, and PM principles in companion animal oncology. This review has highlighted how AI-enhanced imaging techniques deliver crucial anatomical and functional insights for improved diagnosis, staging, and treatment planning. Concurrently, the integration of advanced molecular profiling (including NGS and novel biomarkers) with innovative, minimally invasive, and image-guided surgical approaches—all increasingly by AI and unified under the spectrum of PM. Despite the significant benefits and promise offered by precision veterinary oncology, it presents indispensable challenges on its own. The most notable issue is the need for substantial investment in the AI sector and high-tech tools. Additionally, data transparency and collaboration across multiple sectors are common structural challenges. Still, the rapid pace of technological progress and the potential for comparative oncology will strengthen the collaborative research. Altogether, to make PM a key part of cancer management, we need to keep working on creating, testing, and using these advanced diagnostic and therapeutic methods. These kinds of efforts are necessary to improve the outcomes of treatment for companion animals, and they will keep giving us useful information about specific treatment for each patient.

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References

- Abbasi N, Hussain HK. (2024). Integration of artificial intelligence and smart technology: AI-driven robotics in surgery: precision and efficiency. *Journal of Artificial Intelligence General science* 5(1): 381-390. <https://doi.org/10.60087/jaigs.v5i1.207>
- Able H, Wolf-Ringwall A, Rendahl A, Ober CP, Seelig DM, Wilke CT, Lawrence J. (2021). Computed tomography radiomic features hold prognostic utility for canine lung tumors: An analytical study. *PloS one* 16(8): e0256139. <https://doi.org/10.1371/journal.pone.0256139>
- Aguiar P, Fernandez-Ferreiro A, Galli F, Tsoumpas C. (2019). Imaging biomarkers in translational small animal models. *Contrast Media and Molecular Imaging* 2019: 9469041. <https://doi.org/10.1155/2019/9469041>
- Alam IS, Steinberg I, Vermesh O, van den Berg NS, Rosenthal EL, van Dam GM, Ntziachristos V, Gambhir SS, Hernot S, Rogalla S. (2018). Emerging intraoperative imaging modalities to improve surgical precision. *Molecular Imaging Biology* 20(5): 705-715. <https://doi.org/10.1007/s11307-018-1227-6>
- Alshammari AH, Oshiro T, Ungkulpasvich U, Yamaguchi J, Morishita M, Khadair SA, Hatakeyama H, Hirotsu T, di Luccio E. (2025). Advancing veterinary oncology: Next-generation diagnostics for early cancer detection and clinical implementation. *Animals* 15(3): 389. <https://doi.org/10.3390/ani15030389>
- Alvarez CE. (2014). Naturally occurring cancers in dogs: insights for translational genetics and medicine. *ILAR Journal* 55(1): 16-45. <https://doi.org/10.1093/ilar/ilu010>
- Aramini B, Masciale V, van Vugt JL. (2023). Editorial: Innovations in surgical oncology. *Frontiers in Oncology* 13: 1257762. <https://doi.org/10.3389/fonc.2023.1257762>
- Argento G, Rendina EA, Maurizi G. (2025). Advancing thoracic surgical oncology in the era of precision medicine. *Cancers* 17(1): 115. <https://doi.org/10.3390/cancers17010115>
- Azari F, Kennedy G, Bernstein E, Hadjipanayis C, Vahrmeijer AL, Smith BL, Rosenthal EL, Sumer BD, Tian J, Henderson ER, Lee A, Nguyen Q, Gibbs SL, Pogue BW, Orringer DA, Charalampaki C, Martin LW, Tanyi JL, Lee MK, Lee JYK, Singhal S. (2021). Intraoperative molecular imaging clinical trials: a review of 2020 conference proceedings. *Journal of Biomedical Optics* 26(5): 050901. <https://doi.org/10.1117/1.JBO.26.5.050901>
- Bahcall O. (2015). Precision medicine. *Nature* 526(7573): 335. <https://doi.org/10.1038/526335a>
- Bain AP, Holcomb CN, Zeh III HJ, Sankaranarayanan G. (2024). Artificial intelligence for improving intraoperative surgical care. *Global Surgical Education-Journal of the Association for Surgical Education* 3(1): 73. <https://doi.org/10.1007/s44186-024-00268-z>
- Balsa IM, Culp WTN. (2019). Use of minimally invasive surgery in the diagnosis and treatment of cancer in dogs and cats. *Veterinary Science* 6(1): 33. <https://doi.org/10.3390/vetsci6010033>
- Barot S, Patel H, Yadav A, Ban I. (2023). Recent advancement in targeted therapy and role of emerging technologies to treat cancer. *Medical Oncology* 40(11): 324. <https://doi.org/10.1007/s12032-023-02184-6>
- Basran PS, Porter I. (2022). Radiomics in veterinary medicine: Overview, methods, and applications. *Veterinary Radiology and Ultrasound* 63(1): 828-839. <https://doi.org/10.1111/vru.13156>
- Birettoni F, Caivano D, Rishniw M, Moretti G, Porciello F, Giorgi ME, Crovace A, Bianchini E, Bufalari A. (2017). Preoperative and intraoperative ultrasound aids removal of migrating plant material causing iliopsoas myositis via ventral midline laparotomy: a study of 22 dogs. *Acta Veterinaria Scandinavica* 59(1): 12. <https://doi.org/10.1186/s13028-017-0280-5>
- Bolha L, Ravnik-Glavač M, Glavač D. (2017). Long noncoding RNAs as biomarkers in cancer. *Disease Markers* 2017(1): 7243968. <https://doi.org/10.1155/2017/7243968>
- Borah S, Soren S, Gogoi J, Borah B. (2025). The significant potential of robotics in animal welfare. *International Journal of Life Sciences* 13: 1. <https://doi.org/10.53068/ijlsci.2025.13.1>
- Brunetti B, de Biase D, Dellapina G, Muscatello LV, Ingravalle F, Tura G, Bacci B. (2023). Validation of p53 immunohistochemistry (PAb240 clone) in canine tumors with next-generation sequencing (NGS) analysis. *Animals* 13(5): 899. <https://doi.org/10.3390/ani13050899>
- Bu LL, Yang K, Xiong WX, Liu FT, Anderson B, Wang Y, Wang J. (2016). Toward precision medicine in Parkinson's disease. *Annals of Translational Medicine* 4(2): 26. <https://doi.org/10.3978/j.issn.2305-5839.2016.01.21>
- Buck J, Larkin JR, Simard MA, Khrapitchev AA, Chappell MA, Sibson NR. (2018). Sensitivity of multiphase pseudocontinuous arterial spin labelling (MP pCASL) magnetic resonance imaging for measuring brain and tumour blood flow in mice. *Contrast Media Molecular Imaging* 2018(1): 4580919. <https://doi.org/10.1155/2018/4580919>
- Buote NJ. (2024). Looking to the future; Veterinary robotic surgery. *Veterinary Clinics of North America: Small Animal Practice* 54(4): 735-751. <https://doi.org/10.1016/j.jcvsm.2024.02.008>
- Burti S, Banzato T, Coghlan S, Wodzinski M, Bendazzoli M, Zotti A. (2024). Artificial intelligence in veterinary diagnostic imaging:

- Perspectives and limitations. *Research in Veterinary Science* 175: 105317. <https://doi.org/10.1016/j.rvsc.2024.105317>
- Cabon Q, Sayag D, Texier I, Navarro F, Boisgard R, Virieux-Watrelot D, Ponce F, Carozzo C. (2016). Evaluation of intraoperative fluorescence imaging-guided surgery in cancer-bearing dogs: a prospective proof-of-concept phase II study in 9 cases. *Translational Research* 170: 73-88. <https://doi.org/10.1016/j.trsl.2015.12.001>
- Cavaliere AF, Perelli F, Zaami S, Piergentili R, Mattei A, Vizzielli G, Scambia G, Straface G, Restaino S, Signore F. (2021). Towards personalized medicine: non-coding RNAs and endometrial cancer. *Healthcare* 9(8): 965. <https://doi.org/10.3390/healthcare9080965>
- Chang M, Canseco JA, Nicholson KJ, Patel N, Vaccaro AR. (2020). The role of machine learning in spine surgery: The future is now. *Frontiers in Surgery* 7: 54. <https://doi.org/10.3389/fsurg.2020.00054>
- Chiu FY, Yen Y. (2023). Imaging biomarkers for clinical applications in neuro-oncology: current status and future perspectives. *Biomarker Research* 11(1): 35. <https://doi.org/10.1186/s40364-023-00476-7>
- Chon E, Hendricks W, White M, Rodrigues L, Haworth D, Post G. (2024). Precision medicine in veterinary science. *Veterinary Clinics of North America: Small Animal Practice* 54(3): 501-521. <https://doi.org/10.1016/j.cvsm.2023.12.006>
- Cohen EB, Gordon IK. (2022). First, do no harm. Ethical and legal issues of artificial intelligence and machine learning in veterinary radiology and radiation oncology. *Veterinary Radiology and Ultrasound* 63: 840-850. <https://doi.org/10.1111/vru.13171>
- Collaborative P, Dudurych I, Kelly M, Aalbers A, Abdul Aziz N, Abecasis N, Abraham-Nordling M, Akiyoshi T, Alberda W, Albert M. (2020). Predicting outcomes of pelvic exenteration using machine learning. *Colorectal Disease* 22(12): 1933-1940. <https://doi.org/10.1111/codi.15260>
- Colombe P, Beguin J, Benchechroun G, Le Roux D. (2022). Blood biomarkers for canine cancer, from human to veterinary oncology. *Veterinary Comparative Oncology* 20(4): 767-777. <https://doi.org/10.1111/vco.12848>
- Colombo J, Moschetta-Pinheiro MG, Novais AA, Stoppe BR, Bonini ED, Gonçalves FM, Fukumasu H, Coutinho LL, Chuffa LG dA, Zuccari DAP dC. (2021). Liquid biopsy as a diagnostic and prognostic tool for women and female dogs with breast Cancer. *Cancers* 13(20): 5233. <https://doi.org/10.3390/cancers13205233>
- Das B, Ellis M, Sahoo M. (2024). Veterinary diagnostics: growth, trends, and impact. In: Suar M, Misra N, Singh PK, editors, *Evolving landscape of molecular diagnostics*. Elsevier. Pp. 227-242. <https://doi.org/10.1016/B978-0-323-99316-6.00007-X>
- De Bruycker S, Vangestel C, Staelens S, Van den Wyngaert T, Stroobants S. (2018). How to modulate tumor hypoxia for preclinical in vivo imaging research. *Contrast Media and Molecular Imaging* 2018(1): 4608186. <https://doi.org/10.1155/2018/4608186>
- Domrazek K, Jurka P. (2024). Application of next-generation sequencing (NGS) techniques for selected companion animals. *Animals* 14(11): 1578. <https://doi.org/10.3390/ani14111578>
- Dreyer SB, Pinese M, Jamieson NB, Scarlett CJ, Colvin EK, Pajic M, Johns AL, Humphris JL, Wu J, Cowley MJ, Chou A, Nagrial AM,David K. (2020). Precision oncology in surgery: Patient selection for operable pancreatic cancer. *Annals of Surgery* 272(2): 366-376. <https://doi.org/10.1097/SLA.0000000000003143>
- Duffy DJ. (2016). Problems, challenges and promises: perspectives on precision medicine. *Briefings in Bioinformatics* 17(3): 494-504. <https://doi.org/10.1093/bib/bbv060>
- Duggirala HJ, Johnson JL, Tadesse DA, Hsu CH, Norris AL, Faust J, Walter-Grimm L, Colonius T. (2025). Artificial intelligence and machine learning in veterinary medicine: a regulatory perspective on current initiatives and future prospects. *American Journal of Veterinary Research* 86(S1): S16-S21. <https://doi.org/10.2460/ajvr.24.09.0285>
- Edsjö A, Lindstrand A, Gisselsson D, Mölling P, Friedman M, Cavelier L, Johansson M, Ehrencrona H, Fagerqvist T, Strid T. (2023). Building a precision medicine infrastructure at a national level: The Swedish experience. *Cambridge Prisms: Precision Medicine* 1: e15. <https://doi.org/10.1017/pcm.2023.3>
- Fard MJ, Ameri S, Darin Ellis R, Chinnam RB, Pandya AK, Klein MD. (2018). Automated robot-assisted surgical skill evaluation: Predictive analytics approach. *The International Journal of Medical Robotics and Computer Assisted Surgery* 14(1): 1850. <https://doi.org/10.1002/rcs.1850>
- Favril S, Abma E, Blasi F, Stock E, Devriendt N, Vanderperren K, de Rooster H. (2018). Clinical use of organic near-infrared fluorescent contrast agents in image-guided oncologic procedures and its potential in veterinary oncology. *Veterinary Record* 183(11): 354. <https://doi.org/10.1136/vr.104851>
- Fish EJ, Martinez-Romero EG, DeInnocentes P, Koehler JW, Prasad N, Smith AN, Bird RC. (2020). Circulating microRNA as biomarkers of canine mammary carcinoma in dogs. *Journal of Veterinary Internal Medicine* 34(3): 1282-1290. <https://doi.org/10.1111/jvim.15736>
- Fleming IN, Manavaki R, Blower PJ, West C, Williams KJ, Harris AL, Domarkas J, Lord S, Baldry C, Gilbert FJ. (2015). Imaging tumour hypoxia with positron emission tomography. *British Journal of Cancer* 112(2): 238-250. <https://doi.org/10.1038/bjc.2014.610>
- Fleming J, Creevy K, Promislow D. (2011). Mortality in North American dogs from 1984 to 2004: an investigation into age-, size-, and breed-related causes of death. *Journal of Veterinary Internal Medicine* 25(2): 187-198. <https://doi.org/10.1111/j.1939-1676.2011.0695.x>
- Flory A, Gray S, McLennan LM, Rafalko JM, Marshall MA, Wotrang K, Kroll M, Flesner BK, O'Kell AL, Cohen TA. (2024). Study Design and interim analysis of the Cancer Lifetime Assessment Screening Study in Canines (CLASSiC): The first prospective cancer screening study in dogs using next-generation sequencing-based liquid biopsy. <https://doi.org/10.1101/2024.04.01.587600>
- Flory A, Kruglyak KM, Tynan JA, McLennan LM, Rafalko JM, Fiaux PC, Hernandez GE, Marass F, Nakashe P, Ruiz-Perez CA. (2022). Clinical validation of a next-generation sequencing-based multi-cancer early detection "liquid biopsy" blood test in over 1,000 dogs using an independent testing set: The CANcer Detection in Dogs (CANDiD) study. *PloS one* 17(4): e0266623. <https://doi.org/10.1371/journal.pone.0266623>
- Fonseca-Alves CE, Palmieri C, Dagli MLZ, Laufer-Amorim R. (2021). Editorial: Precision medicine in veterinary oncology. *Frontiers in Veterinary Science* 8: 718891. <https://doi.org/10.3389/fvets.2021.718891>
- Furdos I, Fazekas J, Singer J, Jensen-Jarolim E. (2015). Translating clinical trials from human to veterinary oncology and back. *Journal of Translational Medicine* 13: 265. <https://doi.org/10.1186/s12967-015-0631-9>
- Ghasemi M, Nabipour I, Omrani A, Alipour Z, Assadi M. (2016). Precision medicine and molecular imaging: new targeted approaches toward cancer therapeutic and diagnosis. *American*

- Journal of Nuclear Medicine and Molecular Imaging 6(6): 310-327. <https://www.ncbi.nlm.nih.gov/pubmed/28078184>
- Giardino A, Gupta S, Olson E, Sepulveda K, Lenchik L, Ivanidze J, Rakow-Penner R, Patel MJ, Subramaniam RM, Ganeshan D. (2017). Role of imaging in the era of precision medicine. *Academic Radiology* 24(5): 639-649. <https://doi.org/10.1016/j.acra.2016.11.021>
- Goisauf M, Cano Abadia M. (2022). Ethics of AI in radiology: A review of ethical and societal implications. *Frontiers in Big Data* 5: 850383. <https://doi.org/10.3389/fdata.2022.850383>
- Gola C, Giannuzzi D, Rinaldi A, Iussich S, Modesto P, Morello E, Buracco P, Aresu L, De Maria R. (2021). Genomic and transcriptomic characterization of canine osteosarcoma cell lines: A valuable resource in translational medicine. *Frontiers in Veterinary Science* 8: 666838. <https://doi.org/10.3389/fvets.2021.666838>
- Goodwin S, McPherson JD, McCombie WR. (2016). Coming of age: ten years of next-generation sequencing technologies. *Nature Review Genetics* 17(6): 333-351. <https://doi.org/10.1038/nrg.2016.49>
- Gray M, Meehan J, Turnbull AK, Martinez-Perez C, Kay C, Pang LY, Argyle DJ. (2020). The importance of the tumor microenvironment and hypoxia in delivering a precision medicine approach to veterinary oncology. *Frontiers in Veterinary Science* 7: 598338. <https://doi.org/10.3389/fvets.2020.598338>
- Grozđanić SD, Murtha H, Lazić T, Đukić S, Luzetskii S, Ursu DC, Sarment D. (2024). Preoperative and intraoperative ct imaging for orbital foreign bodies identification and surgical planning in veterinary medicine. *Acta Veterinaria* 74(3): 367-397. <https://doi.org/10.2478/acve-2024-0026>
- Han L, Lee Y, Lee H, Lee H, Lee JI. (2024a). Overcoming challenges in interdisciplinary collaboration between human and veterinary medicine. *Veterinary Sciences* 11(11): 518. <https://doi.org/10.3390/vetsci11110518>
- Han Z, Wang Y, Wang W, Zhang T, Wang J, Ma X, Men K, Shi A, Gao Y, Bi N. (2024b). Artificial intelligence-assisted delineation for postoperative radiotherapy in patients with lung cancer: a prospective, multi-center, cohort study. *Frontiers in Oncology* 14: 1388297. <https://doi.org/10.3389/fonc.2024.1388297>
- Hashemi M, Daneii P, Zandieh MA, Raesi R, Zahmatkesh N, Bayat M, Abuelrub A, Khazaei Koohpar Z, Aref AR, Zarrabi A, Rashidi M, Salimimoghadam S, Entezari M, Taheriazam A, Khorrami R. (2024). Non-coding RNA-Mediated N6-Methyladenosine (m(6)A) deposition: A pivotal regulator of cancer, impacting key signaling pathways in carcinogenesis and therapy response. *Noncoding RNA Research* 9(1): 84-104. <https://doi.org/10.1016/j.ncrna.2023.11.005>
- Hashemi M, Nadafzadeh N, Imani MH, Rajabi R, Ziaolhagh S, Bayanzadeh SD, Norouzi R, Rafiei R, Koohpar ZK, Raei B, Zandieh MA, Salimimoghadam S, Entezari M, Taheriazam A, Alexiou A, Papadakis M, Tan SC. (2023). Targeting and regulation of autophagy in hepatocellular carcinoma: revisiting the molecular interactions and mechanisms for new therapy approaches. *Cell Communication and Signaling* 21(1): 32. <https://doi.org/10.1186/s12964-023-01053-z>
- Hassan AM, Rajesh A, Asaad M, Nelson JA, Coert JH, Mehrara BJ, Butler CE. (2023). Artificial intelligence and machine learning in prediction of surgical complications: Current state, applications, and implications. *The American Surgeon* 89(1): 25-30. <https://doi.org/10.1177/00031348221101488>
- Hennessey E, DiFazio M, Hennessey R, Cassel N. (2022). Artificial intelligence in veterinary diagnostic imaging: A literature review. *Veterinary Radiology and Ultrasound* 63(1): 851-870. <https://doi.org/10.1111/vru.13163>
- Hespeel AM, Zhang Y, Basran PS. (2022). Artificial intelligence 101 for veterinary diagnostic imaging. *Veterinary Radiology and Ultrasound* 63(1): 817-827. <https://doi.org/10.1111/vru.13160>
- Hirsch FR, Suda K, Wiens J, Bunn PA Jr. (2016). New and emerging targeted treatments in advanced non-small-cell lung cancer. *Lancet* 388(10048): 1012-1024. [https://doi.org/10.1016/S0140-6736\(16\)31473-8](https://doi.org/10.1016/S0140-6736(16)31473-8)
- Hitte C, Le Beguec C, Cadieu E, Wucher V, Primot A, Prouteau A, Botherel N, Hedan B, Lindblad-Toh K, Andre C, Derrien T. (2019). Genome-wide analysis of long non-coding RNA profiles in canine oral melanomas. *Genes* 10(6): 477. <https://doi.org/10.3390/genes10060477>
- Hoeckelmann M, Rudas JJ, Fiorini P, Kirchner F, Haidegger T. (2015). Current capabilities and development potential in surgical robotics. *International Journal of Advanced Robotic Systems* 12(5): 61. <https://doi.org/10.5772/60947>
- Hu S, Kang H, Baek Y, El Fakhri G, Kuang A, Choi HS. (2018). Real-time imaging of brain tumor for image-guided surgery. *Advanced Healthcare Materials* 7(16): e1800066. <https://doi.org/10.1002/adhm.201800066>
- Hussain T, Nguyen QT. (2014). Molecular imaging for cancer diagnosis and surgery. *Advanced Drug Delivery Reviews* 66: 90-100. <https://doi.org/10.1016/j.addr.2013.09.007>
- Hwang RF, Hunt KK. (2020). The emergence of robotic-assisted breast surgery: Proceed with caution. *Annals of Surgery* 271(6): 1013-1015. <https://doi.org/10.1097/SLA.0000000000003902>
- Iftikhar M, Saqib M, Zareen M, Mumtaz H. (2024). Artificial intelligence: revolutionizing robotic surgery: review. *Annals of Medicine and Surgery* 86(9): 5401-5409. <https://doi.org/10.1097/MS9.0000000000002426>
- Inoue M, Hasegawa A, Hosoi Y, Sugiura K. (2015). A current life table and causes of death for insured dogs in Japan. *Preventive Veterinary Medicine* 120(2): 210-218. <https://doi.org/10.1016/j.prevetmed.2015.03.018>
- Jalote-Parmar A, Badke-Schaub P. (2008). Critical factors influencing intra-operative surgical decision-making. *IEEE International Conference on Systems, Man, and Cybernetics*. 12-15 October, 2008, Singapore. <https://doi.org/10.1109/ICSMC.2008.4811779>
- Jensen MM, Kjaer A. (2015). Monitoring of anti-cancer treatment with 18F-FDG and 18F-FLT PET: a comprehensive review of pre-clinical studies. *American Journal of Nuclear Medicine and Molecular Imaging* 5(5): 431. <https://doi.org/10.1016/j.nucmed.2015.05.005>
- Joshi FR, Manavaki R, Fryer TD, Figg NL, Sluimer JC, Aigbirhio FI, Davenport AP, Kirkpatrick PJ, Warburton EA, Rudd JH. (2017). Vascular imaging with 18F-fluorodeoxyglucose positron emission tomography is influenced by hypoxia. *Journal of the American College of Cardiology* 69(14): 1873-1874. <https://doi.org/10.1016/j.jacc.2017.02.025>
- Kaszura M, Richard A, Bemping NE, Loncar D, Flahault A. (2019). Cost-effectiveness of precision medicine: a scoping review. *International Journal of Public Health* 64(9): 1261-1271. <https://doi.org/10.1007/s00038-019-01298-x>
- Kennedy-Metz LR, Mascagni P, Torralba A, Dias RD, Perona P, Shah JA, Padoy N, Zenati MA. (2021). Computer vision in the operating room: Opportunities and caveats. *IEEE Transactions on Medical*

- Robotics and Bionics 3(1): 2-10.
<https://doi.org/10.1109/tmrb.2020.3040002>
- Kim J, Bae H, Ahn S, Shin S, Cho A, Cho KW, Jung DI, Yu D. (2021). Cell-free DNA as a diagnostic and prognostic biomarker in dogs with tumors. *Frontiers in Veterinary Science* 8: 735682.
<https://doi.org/10.3389/fvets.2021.735682>
- Knudsen JE, Ghaffar U, Ma R, Hung AJ. (2024). Clinical applications of artificial intelligence in robotic surgery. *Journal of Robotic Surgery* 18(1): 102. <https://doi.org/10.1007/s11701-024-01867-0>
- König IR, Fuchs O, Hansen G, von Mutius E, Kopp MV. (2017). What is precision medicine? *European Respiratory Journal* 50(4): 1700391.
<https://doi.org/10.1183/13993003.00391-2017>
- Korngiebel DM, Thummel KE, Burke W. (2017). Implementing precision medicine: The ethical challenges. *Trends in Pharmacological Sciences* 38(1): 8-14.
<https://doi.org/10.1016/j.tips.2016.11.007>
- Kovacs N, Szigeti K, Hegedus N, Horvath I, Veres DS, Bachmann M, Bergmann R, Mathe D. (2018). Multimodal PET/MRI imaging results enable monitoring the side effects of radiation therapy. *Contrast Media and Molecular Imaging* 2018(1): 5906471.
<https://doi.org/10.1155/2018/5906471>
- Kraus JM, Lausser L, Kuhn P, Jobst F, Bock M, Halanke C, Hummel M, Heuschmann P, Kestler HA. (2018). Big data and precision medicine: challenges and strategies with healthcare data. *International Journal of Data Science and Analytics* 6: 241-249.
<https://doi.org/10.1007/s41060-018-0095-0>
- Kudnig ST, Séguin B. (2022). *Veterinary surgical oncology*, 2nd Edition. Wiley-Blackwell. <https://www.wiley.com/go/kudnig/veterinary>
- Kumar V, Baburaj V, Patel S, Sharma S, Vaishya R. (2021). Does the use of intraoperative CT scan improve outcomes in Orthopaedic surgery? A systematic review and meta-analysis of 871 cases. *Journal of Clinical Orthopaedics and Trauma* 18: 216-223.
<https://doi.org/10.1016/j.jcot.2021.04.030>
- Lajmi N, Alves-Vasconcelos S, Tsiachristas A, Haworth A, Woods K, Crichton C, Noble T, Salih H, Varnai KA, Branford-White H, Orrell L, Osman A, Bradley KM, Bonney L, McGowan DR, Davies J, Prime MS, Hassan AB. (2024). Challenges and solutions to system-wide use of precision oncology as the standard of care paradigm. *Cambridge Prism: Precision Medicine* 2: e4.
<https://doi.org/10.1017/pcm.2024.1>
- Lauwerends LJ, Galema HA, Hardillo JAU, Sewnaik A, Monserez D, van Driel P, Verhoef C, Baatenburg de Jong RJ, Hilling DE, Keereweere S. (2021). Current intraoperative imaging techniques to improve surgical resection of laryngeal cancer: A systematic review. *Cancers* 13(8): 1895.
<https://doi.org/10.3390/cancers13081895>
- Leary D, Basran PS. (2022). The role of artificial intelligence in veterinary radiation oncology. *Veterinary Radiology and Ultrasound* 63(1): 903-912. <https://doi.org/10.1111/vru.13162>
- Lee AM, Tollefson C, Shores A. (2023). Intraoperative ultrasound in intracranial surgery. In: Shores A, Brisson BA, editors, *Advanced techniques in canine and feline neurosurgery*, Wiley Blackwell. Pp. 169-178.
- Lloyd KC, Khanna C, Hendricks W, Trent J, Kotlikoff M. (2016). Precision medicine: an opportunity for a paradigm shift in veterinary medicine. *Journal of American Veterinary Medical Association* 248(1): 45-48. <https://doi.org/10.2460/javma.248.1.45>
- Malone ER, Oliva M, Sabatini PJB, Stockley TL, Siu LL. (2020). Molecular profiling for precision cancer therapies. *Genome Medicine* 12(1): 8. <https://doi.org/10.1186/s13073-019-0703-1>
- Marconato L, Gelain ME, Comazzi S. (2013). The dog as a possible animal model for human non-Hodgkin lymphoma: a review. *Hematological oncology* 31(1): 1-9.
<https://doi.org/10.1002/hon.2017>
- Mascagni P, Alapatt D, Sestini L, Altieri MS, Madani A, Watanabe Y, Alseidi A, Redan JA, Alfieri S, Costamagna G, Boskoski I, Padoy N, Hashimoto DA. (2022). Computer vision in surgery: from potential to clinical value. *NPJ Digital Medicine* 5(1): 163.
<https://doi.org/10.1038/s41746-022-00707-5>
- Mattoon JS, Bryan JN. (2013). The future of imaging in veterinary oncology: learning from human medicine. *The Veterinary Journal* 197(3): 541-552. <https://doi.org/10.1016/j.tvjl.2013.05.022>
- Mayhew PD. (2014). Recent advances in soft tissue minimally invasive surgery. *Journal of Small Animal Practice* 55(2): 75-83.
<https://doi.org/10.1111/jsap.12164>
- McGrath S, Gherzi D. (2016). Building towards precision medicine: empowering medical professionals for the next revolution. *BMC Medical Genomics* 9(1): 23.
<https://doi.org/10.1186/s12920-016-0183-8>
- Mealey KL, Martinez SE, Villarino NF, Court MH. (2019). Personalized medicine: going to the dogs? *Human Genetics* 138(5): 467-481.
<https://doi.org/10.1007/s00439-019-02020-w>
- Mi Y, Shao Z, Vang J, Kaidar-Person O, Wang AZ. (2016). Application of nanotechnology to cancer radiotherapy. *Cancer Nanotechnol* 7(1): 11. <https://doi.org/10.1186/s12645-016-0024-7>
- Mirchi N, Bissonnette V, Yilmaz R, Ledwos N, Winkler-Schwartz A, Del Maestro RF. (2020). The virtual operative assistant: An explainable artificial intelligence tool for simulation-based training in surgery and medicine. *PloS One* 15(2): e0229596.
<https://doi.org/10.1371/journal.pone.0229596>
- Mirzaei S, Paskeh MDA, Moghadam FA, Entezari M, Koohpar ZK, Hejazi ES, Rezaei S, Kakavand A, Aboutalebi M, Zandieh MA, Rajabi R, Salimimoghadam S, Taheriazam A, Hashemi M, Samarghandian S. (2023). miRNAs as short non-coding RNAs in regulating doxorubicin resistance. *Journal of Cell Communication and Signaling* 17(4): 1181-1202.
<https://doi.org/10.1007/s12079-023-00789-0>
- Moiyadi AV. (2016). Intraoperative ultrasound technology in neuro-oncology practice-current role and future applications. *World Neurosurgery* 93: 81-93.
<https://doi.org/10.1016/j.wneu.2016.05.083>
- Morris MX, Rajesh A, Asaad M, Hassan A, Saadoun R, Butler CE. (2023). Deep learning applications in surgery: Current uses and future directions. *The American Surgeon* 89(1): 36-42.
<https://doi.org/10.1177/00031348221101490>
- Nagata K. (2019). A retrospective analysis of radiation oncology related scientific articles in the journal *Veterinary Radiology and Ultrasound*: Trends over 40 years (1976-2015). *Veterinary Radiology and Ultrasound* 60(3): 351-357.
<https://doi.org/10.1111/vru.12716>
- Nagaya T, Nakamura YA, Choyke PL, Kobayashi H. (2017). Fluorescence-guided surgery. *Frontiers in Oncology* 7: 314.
<https://doi.org/10.3389/fonc.2017.00314>
- Naithani N, Atal AT, Tilak T, Vasudevan B, Misra P, Sinha S. (2021). Precision medicine: Uses and challenges. *Medical Journal Armed Forces India* 77(3): 258-265.

<https://doi.org/10.1016/j.mjafi.2021.06.020>

- Nardone V, Marmorino F, Germani MM, Cichowska-Cwalinska N, Menditti VS, Gallo P, Studiale V, Taravella A, Landi M, Reginelli A, Cappabianca S, Girnyi S, Cwalinski T, Boccardi V, Goyal A, Skokowski J, Oviedo RJ, Abou-Mrad A, Marano L. (2024). The role of artificial intelligence on tumor boards: Perspectives from surgeons, medical oncologists and radiation oncologists. *Current Oncology* 31(9): 4984-5007. <https://doi.org/10.3390/currncol31090369>
- Navarrete-Welton AJ, Hashimoto DA. (2020). Current applications of artificial intelligence for intraoperative decision support in surgery. *Frontiers in Medicine* 14(4): 369-381. <https://doi.org/10.1007/s11684-020-0784-7>
- Nightingale KP, Bishop M, Avitabile N, Simpson S, Freidoony L, Buckley S, Tatton-Brown K. (2025). Evaluation of the master's in genomic medicine framework: A national, multiprofessional program to educate health care professionals in NHS England. *Genetics in Medicine* 27(1): 101277. <https://doi.org/10.1016/j.gim.2024.101277>
- O'Connor JP, Aboagye EO, Adams JE, Aerts HJ, Barrington SF, Beer AJ, Boellaard R, Bohndiek SE, Brady M, Brown G, Buckley DL, Chenevert TL, . . . Waterton JC. (2017). Imaging biomarker roadmap for cancer studies. *Nature Reviews Clinical Oncology* 14(3): 169-186. <https://doi.org/10.1038/nrclinonc.2016.162>
- O'Neill DG, Church DB, McGreevy PD, Thomson PC, Brodbelt DC. (2013). Longevity and mortality of owned dogs in England. *Veterinary Journal* 198(3): 638-643. <https://doi.org/10.1016/j.tvjl.2013.09.020>
- Oh JH, Cho JY. (2023). Comparative oncology: overcoming human cancer through companion animal studies. *Experimental & Molecular Medicine* 55(4): 725-734. <https://doi.org/10.1038/s12276-023-00977-3>
- Orencole MJ, Butler R. (2013). Fundamentals of surgical oncology in small animals. *Today's Veterinary Practice* 14-18. [Source Link](#)
- Pang LY, Argyle DJ. (2016). Veterinary oncology: Biology, big data and precision medicine. *The Veterinary Journal* 213: 38-45. <https://doi.org/10.1016/j.tvjl.2016.03.009>
- Pang Y, Wang H, Li H. (2021). Medical imaging biomarker discovery and integration towards AI-based personalized radiotherapy. *Frontiers in Oncology* 11: 764665. <https://doi.org/10.3389/fonc.2021.764665>
- Penet MF, Krishnamachary B, Chen Z, Jin J, Bhujwalla ZM. (2014). Molecular imaging of the tumor microenvironment for precision medicine and theranostics. In: Pomper MG, Fisher PB, Emerging applications of molecular imaging to oncology: *Advances in Cancer Research* 124: 235-256. <https://doi.org/10.1016/B978-0-12-411638-2.00007-0>
- Perera TRW, Skerrett-Byrne DA, Gibb Z, Nixon B, Swegen A. (2022). The Future of biomarkers in veterinary medicine: Emerging approaches and associated challenges. *Animals* 12(17): 2194. <https://doi.org/10.3390/ani12172194>
- Petzschner FH. (2024). Practical challenges for precision medicine. *Science* 383(6679): 149-150. <https://doi.org/10.1126/science.adm9218>
- Pratschke K. (2016). Principles and good practice in using oncologic surgery: Part 1. *VetTimes*. [Source Link](#)
- Ren W, Ji B, Guan Y, Cao L, Ni R. (2022). Recent technical advances in accelerating the clinical translation of small animal brain imaging: Hybrid imaging, deep learning, and transcriptomics. *Frontiers in Medicine* 9: 771982. <https://doi.org/10.3389/fmed.2022.771982>
- Ruan Y, Robinson NB, Khan FM, Hameed I, Rahouma M, Naik A, Oakley CT, Rong L, Girardi LN, Gaudino M. (2020). The translation of surgical animal models to human clinical research: A cross-sectional study. *International Journal of Surgery* 77: 25-29. <https://doi.org/10.1016/j.ijsu.2020.03.023>
- Ruiz-Perez CA, Nakashe P, Marshall MA, Marass F, Tang T, McLennan LM, Kroll M, Flesner BK, Gray S, Rafalko JM, Grosu DS, Hicks SC, Tynan JA, Tsui DWY, Flory A, Kruglyak KM. (2024). Proof-of-concept evaluation of next-generation sequencing-based liquid biopsy for non-invasive cancer detection in cats. *Frontiers in Veterinary Science* 11: 1394686. <https://doi.org/10.3389/fvets.2024.1394686>
- Sabouni E, Nejad MM, Mojtavavi S, Khoshdud S, Mojtavavi M, Nadafzadeh N, Nikpanjeh N, Mirzaei S, Hashemi M, Aref AR, Khorrami R, Nabavi N, Ertas YN, Salimimoghadam S, Zandieh MA, Rahmanian P, Taheriazam A, Hushmandi K. (2023). Unraveling the function of epithelial-mesenchymal transition (EMT) in colorectal cancer: Metastasis, therapy response, and revisiting molecular pathways. *Biomedicine and Pharmacotherapy* 160: 114395. <https://doi.org/10.1016/j.biopha.2023.114395>
- Sadeghi MS, Sangrizeh FH, Jahani N, Abedin MS, Chaleshgari S, Ardakan AK, Baeelashaki R, Ranjbarpazuki G, Rahmanian P, Zandieh MA, Nabavi N, Aref AR, Salimimoghadam S, Rashidi M, Rezaee A, Hushmandi K. (2023). Graphene oxide nanoarchitectures in cancer therapy: Drug and gene delivery, phototherapy, immunotherapy, and vaccine development. *Environmental Research* 237(2): 117027. <https://doi.org/10.1016/j.envres.2023.117027>
- Schmid D, Scholz VB, Kircher PR, Lautenschlaeger IE. (2022). Employing deep convolutional neural networks for segmenting the medial retropharyngeal lymph nodes in CT studies of dogs. *Veterinary Radiology and Ultrasound* 63(6): 763-770. <https://doi.org/10.1111/vru.13132>
- Shaikh S. (2022). Quantitative imaging biomarkers in precision medicine. In: *Advances in Imaging: Step towards Precision Medicine*, Springer Singapore. Pp. 317-326. https://doi.org/10.1007/978-981-16-9535-3_26
- Shaye DA, Tollefson TT, Strong EB. (2015). Use of intraoperative computed tomography for maxillofacial reconstructive surgery. *JAMA Facial Plastic Surgery* 17(2): 113-119. <https://doi.org/10.1001/jamafacial.2014.1343>
- Simpson S, Rizvanov AA, Jeyapalan JN, De Brot S, Rutland CS. (2022). Canine osteosarcoma in comparative oncology: Molecular mechanisms through to treatment discovery. *Frontiers in Veterinary Science* 9: 965391. <https://doi.org/10.3389/fvets.2022.965391>
- Singhal S. (2016). The future of surgical oncology: Image-guided cancer surgery. *JAMA Surgery* 151(2): 184-185. <https://doi.org/10.1001/jamasurg.2015.3604>
- Sisodiya SM. (2021). Precision medicine and therapies of the future. *Epilepsia* 62(2): S90-S105. <https://doi.org/10.1111/epi.16539>
- Soria JC, Ohe Y, Vansteenkiste J, Reungwetwattana T, Chewaskulyong B, Lee KH, Dechaphunkul A, Imamura F, Nogami N, Kurata T, Okamoto I, Zhou C, . . . Ramalingam SS. (2018). Osimertinib in untreated EGFR-mutated advanced non-small-cell lung cancer. *New England Journal of Medicine* 378(2): 113-125. <https://doi.org/10.1056/NEJMoa1713137>

- Spinu-Popa EV, Cioni D, Neri E. (2021). Radiology reporting in oncology-oncologists' perspective. *Cancer Imaging* 21(1): 63. <https://doi.org/10.1186/s40644-021-00431-5>
- Srisawat W, Koonyosying P, Muenthaisong A, Sangkakam K, Varinrak T, Rittipornlertrak A, Nambooppha B, Apinda N, Sthitmatee N. (2025). mRNA and protein expression of programmed cell death-ligand-1 on canine mammary gland tumour in dogs of Chiang Mai, Thailand. *International Journal of Veterinary Science and Medicine* 13(1): 1-11. <https://doi.org/10.1080/23144599.2025.2483102>
- Stenzinger A, Moltzen EK, Winkler E, Molnar-Gabor F, Malek N, Costescu A, Jensen BN, Nowak F, Pinto C, Ottersen OP, Schirmacher P, Nordborg J, Seufferlein T, Frohling S, Edsjo A, Garcia-Foncillas J, Normanno N, Lundgren B, Friedman M, Bolanos N, Tatton-Brown K, Hill S, Rosenquist R. (2023). Implementation of precision medicine in healthcare-A European perspective. *Journal of Internal Medicine* 294(4): 437-454. <https://doi.org/10.1111/joim.13698>
- Taheriazam A, Abad GGY, Hajimazdarany S, Imani MH, Ziaolhagh S, Zandieh MA, Bayanzadeh SD, Mirzaei S, Hamblin MR, Entezari M, Aref AR, Zarrabi A, Ertas YN, Ren J, Rajabi R, Paskeh MDA, Hashemi M, Hushmandi K. (2023). Graphene oxide nanoarchitectures in cancer biology: Nano-modulators of autophagy and apoptosis. *Journal of Control Release* 354: 503-522. <https://doi.org/10.1016/j.jconrel.2023.01.028>
- Tanaka M, Yamaguchi S, Iwasa Y. (2020). Enhanced risk of cancer in companion animals as a response to the longevity. *Scientific Reports* 10(1): 19508. <https://doi.org/10.1038/s41598-020-75684-4>
- Thamm DH. (2019). Canine cancer: Strategies in experimental therapeutics. *Frontiers in Oncology* 9: 1257. <https://doi.org/10.3389/fonc.2019.01257>
- Varghese C, Harrison EM, O'Grady G, Topol EJ. (2024). Artificial intelligence in surgery. *Nature Medicine* 30(5): 1257-1268. <https://doi.org/10.1038/s41591-024-02970-3>
- Varshney J, Scott MC, Largaespada DA, Subramanian S. (2016). Understanding the osteosarcoma pathobiology: A comparative oncology approach. *Veterinary Science* 3(1): 3. <https://doi.org/10.3390/vetsci3010003>
- Wang ZG, Zhang L, Zhao WJ. (2016). Definition and application of precision medicine. *Chinese Journal of Traumatology* 19(5): 249-250. <https://doi.org/10.1016/j.cjtee.2016.04.005>
- Ward TM, Mascagni P, Ban Y, Rosman G, Padoy N, Meireles O, Hashimoto DA. (2021). Computer vision in surgery. *Surgery* 169(5): 1253-1256. <https://doi.org/10.1016/j.surg.2020.10.039>
- Wright JD. (2017). Robotic-assisted surgery: Balancing evidence and implementation. *JAMA* 318(16): 1545-1547. <https://doi.org/10.1001/jama.2017.13696>
- Yeramosu T, Krivicich LM, Puzzitiello RN, Guenther G, Salzler MJ. (2025). Concomitant procedures, black race, male sex, and general anesthesia show fair predictive value for prolonged rotator cuff repair operative time: analysis of the national quality improvement program database using machine learning. *Arthroscopy: The Journal of Arthroscopic and Related Surgery* 41(5): 1279-1290. <https://doi.org/10.1016/j.arthro.2024.07.019>
- Yitbarek D, Dagnaw GG. (2022). Application of advanced imaging modalities in veterinary medicine: A review. *Veterinary Medicine* 13: 117-130. <https://doi.org/10.2147/VMRR.S367040>
- Yousefirizi F, Pierre D, Amyar A, Ruan S, Saboury B, Rahmim A. (2022). AI-based detection, classification and prediction/prognosis in medical imaging: Towards radiophenomics. *PET Clinics* 17(1): 183-212. <https://doi.org/10.1016/j.cpet.2021.09.010>
- Yuan L, Xu ZY, Ruan SM, Mo S, Qin JJ, Cheng XD. (2020). Long non-coding RNAs towards precision medicine in gastric cancer: early diagnosis, treatment, and drug resistance. *Molecular Cancer* 19(1): 96. <https://doi.org/10.1186/s12943-020-01219-0>
- Zandieh MA, Farahani MH, Daryab M, Motahari A, Gholami S, Salmani F, Karimi F, Samaei SS, Rezaee A, Rahmanian P, Khorrami R, Salimimoghadam S, Nabavi N, Zou R, Sethi G, Rashidi M, Hushmandi K. (2023a). Stimuli-responsive (nano) architectures for phytochemical delivery in cancer therapy. *Biomedicine and Pharmacotherapy* 166: 115283. <https://doi.org/10.1016/j.biopha.2023.115283>
- Zandieh MA, Farahani MH, Rajabi R, Avval ST, Karimi K, Rahmanian P, Razzazan M, Javanshir S, Mirzaei S, Paskeh MDA, Salimimoghadam S, Hushmandi K, Taheriazam A, Pandey V, Hashemi M. (2023b). Epigenetic regulation of autophagy by non-coding RNAs in gastrointestinal tumors: Biological Functions and Therapeutic Perspectives. *Pharmacological Research* 187: 106582. <https://doi.org/10.1016/j.phrs.2022.106582>
- Zaorsky NG, Churilla T, Egleston B, Fisher S, Ridge J, Horwitz E, Meyer J. (2017). Causes of death among cancer patients. *Annals of Oncology* 28(2): 400-407. <https://doi.org/10.1093/annonc/mdw604>
- Zhang Y, Wu M, Zhou J, Diao H. (2023). Long non-coding RNA as a potential biomarker for canine tumors. *Veterinary Sciences* 10(11): 637. <https://doi.org/10.3390/vetsci10110637>

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