The image is not the disease!

¡La imagen no es la enfermedad!

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Conceptual art emerged by the end the 1960s, and is based on the idea that the concept interpreted by the observer is the most important that the art object transmits. Thus, in the series "*The Treachery of Images*", the painting called "*This is Not a Pipe*" created by the brilliant Belgian surrealist artist Rene Magritte (1898-1967), can be considered the precursor of conceptual art (Figure 1). The painting is not a pipe, but rather an image of a pipe, as the author argued when asked about the reason for the title of his creation.

The answer given by the artist was surprising but also reasonable, since it cannot be filled with tobacco or smoked, it is only a visual representation of a pipe.

The same situation arises with an image obtained during cardiology imaging tests. If we observe an abnormal mitral valve, we can use 2D and 4D color ultrasound techniques, transillumination or magnetic resonance imaging, to obtain the best images and information about this valve.

We can then claim that it is a valve with different levels of abnormality, but this information is only valuable if we know the patient's context: age, history, symptoms, frailty, concomitant diseases, and their impact on the patient's organism. In other words, his/her own biography.

The conceptual art developed by Magritte teaches us that any visual representation, either a painting or a photo, is usually divorced from reality which has a non-objective character in quantum physics nowadays. In our specialty, image can confirm a diagnostic probability, but it is only a constituent part of the disease, it does not tell us anything about patient's symptoms, feelings, emotions, or fears. Of his/her completeness.

The image obtained from the valve represents a limited aspect of the disease; but its interpretation forces us to think about the patient's context and all the differential diagnoses. In a psycho-organic-social complexity.

Our senses lack the required perfection, so the diagnostic tools lead us to a better temporal and spatial resolution. However, images also have their level of subjectivity and must pass through the eye to be interpreted. In the words of the poet: "*The eye sees what the mind knows*".

The most sophisticated imaging technologies cannot reveal all the mysteries of the disease when they are not accompanied by a profound knowledge of the medical history and a direct contact with the patient to thoroughly investigate his/her symptoms, perform a meticulous physical examination and listen to all his/her concerns (Figure 2). Lain Entralgo expressed it with absolute precision when he conceptualized that the diagnosis just begins with the visual observation of the patient.

Disease is more than a good diagnosis made by visualization of images. We cannot forget the socio-cultural context in the person who suffers. Most of the patients are not described in the guidelines and it is the experience, the clinical judgment, which must predominate in an attempt to cure them body and soul, or at least comfort them with a halo of hope.

Daily medical reality has confirmed Rene Magritte's legacy, as it may be different from the vision we have of an image. There is no doubt about the considerable diagnostic value of technology, but its usefulness can be undermined if it is not used rationally. Frequently, its prohibitive cost and difficult access

Fig. 1. "*This is not a pipe*". Rene Magritte, 1928-1929
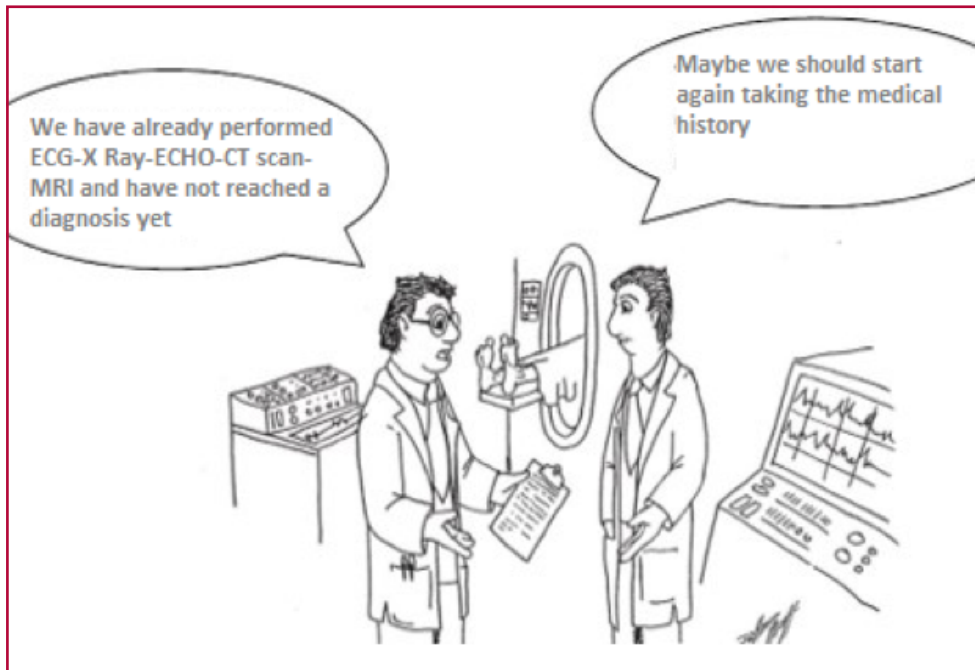
Fig. 2. The patient is the principle and the purpose of the art of medicine

make it necessary for physicians to provide more humanized medical care to patients.

Valentin Fuster wonders, is artificial intelligence and the digital world the future? It is likely that artificial intelligence can make better diagnoses than an expert. However, only a third of the population will have access to this technology, which should be equitable and ethical. *I cannot help stating that we can learn far more by observing the patient than by looking at images or by simply pressing keys.*