TELEMEDICINE AS AN EFFECTIVE STRATEGY FOR INDIA?

Posted on May 29, 2020 by Dr. Pankaj Gupta

Category: Opinion

According to the economic survey of India 2019-2020, the doctor patient ratio in India is 1:1456 with respect to the prescribed WHO standards of 1:1000. In order to provide optimal level of quality health care, every 3000 to 5000 population should have a Sub centre, for every 20000-30000 population there should be a Primary health centre and for every 80000-120000 there should be a community health centre. But the standard dynamics do not satisfy the norms of Indian Public Health Standards (IPHS) . There is a gap between the availability of medical needs to the patients in rural areas. A major factor that causes this inaccessibility is our larger geographical landscape with 65% of our population still living in the rural areas. Therefore, telemedicine can been seen as a favourable solution for providing timely care. It majorly cuts down the cost that they would spend to travel to reach the hospital. Telemedicine can be proven as an asset for follow up cases, routine monitoring and various therapies such as counselling sessions. Several advantages of telemedicine include remote analysis and monitoring services and electronic data storage helps in reducing cost, saving money for patients and doctors. It also helps in eliminating the transportation expenses. Thus, easing accessibility, and reducing nosocomial infections hence focussing on preventive care approach.

 In India, Telemedicine was formally launched in March 2000 when then USA president Bill Clinton

commissioned the first unit with Apollo group of health services in association with ISRO starting a pilot project in a secondary hospital level in a village named Aragonda in Andhra Pradesh. ISRO has played a great role in providing the telehealth even to the rural parts of the India, with the aid of HEALTHSAT. Till recently, ISRO has covered 384 hospitals with 60 speciality hospitals connected to 306 remote/rural/district/medical college hospitals and 18 Mobile Telemedicine units across the country through its geo-stationary satellite which has marked a continuous improvement in quality of healthcare in rural India. This covers diverse areas of Cardiology, Radiology, Diabetology, Mammography, Ophthalmology, General medicine, maternal and Child healthcare. There has been a considerable progress in the ophthalmologic division through completion of Sankara Netralaya Teleophthalmology Project (SNTOP) and Aravind Teleophthalmology Network (ATN) project in 2003.

There has been a significant growth in India in implementing telemedicine. But there has been a void in closing gaps in creating awareness, knowledge and attitude. Research on the use of telemedicine to broaden our perspectives, needs to be expediated.

A cross sectional study, Evaluation of patient and doctor perception towards telemedicine in India (Rajesh Acharya and Jasuma,2016) conducted to evaluate the effects telemedicine on patients and medical specialists, where about 80% patients reported their satisfaction towards the treatment, 90% of the participants found telemedicine cost-effective whereas 61% of the doctors found an increase in patient's inflow when compared to their regular practice. There were a few flaws noted in the system, 47% with technical issues, 39% in time scheduling by doctors while 31% of patients were uncomfortable to face the camera, and 24% had operational issues with the software. Another cross sectional study " the attitude knowledge and skills of telemedicine among the health professional faculty working in teaching institutions"(Zayapragassarazan and Kumar, 2016), found the knowledge level of the respondents to be 41%, while 35% had fair knowledge and 24% didn't have an adequate knowledge of telemedicine. 39% of the respondents had a high attitude, 31% moderate and 30% had low level of attitude. 19% respondents were highly skilled, 25% moderately skilled, and 56% were unskilled in handling the telemedicine equipment.

On March 2020, NITI AAYOG released fresh "Guidelines for telemedicine practice" for virtual consultations. This will help in improving quality of healthcare across the country. The Registered doctors have to complete an online course within three years, to practice online consultations. Standard operating protocols are to be followed by a doctor along with guidelines while consulting cases.

In India, several healthtech start-ups are working towards technological advancements in health. There are more than 150 healthcare-based start-ups in India. Practo outshines as an example offering teleconsultation. Another start-up HD Medical, is a medical R&D firm empowering medical practitioners & organisations with perfect products specialising in screening and early detection of

cardiac conditions. A medical innovation company, Rijuven India, has introduced smart healthcare with a mission to transform and revolutionize healthcare through innovative medical products and services. In terms of online consultancy, TeleRad provides accurate teleradiology, remote radiology, and radiology outsourcing solutions at very economical costs. Other Start-ups such as MedCords connects doctors, patients and pharmacies for smooth access and sharing of medical data. Live health is a online platform which helps in maintaining the medical health reports and storing them securely for easy access in future for patients and doctors.5C Network is an online portal providing radiodiagnosis through technology which makes it affordable and easily accessible even when a radiologist is not present. It provides its services to more than 20 lakh users, across Uttar Pradesh, Madhya Pradesh, Gujarat, Bihar, Rajasthan.

While Indian Government is trying to achieve the motto of 'Health for all', telemedicine is not a genie anymore rather is a breakthrough in the healthcare technology assessment. Telemedicine provides an aperture, to strengthen the infrastructure which could prove an asset to achieve a robust healthcare for its citizens.

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