

Is Telemedicine here to stay?

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Clinical medicine has evolved over the years and time. It involves listening to the patient complaints, analysing them, and then correlating them with the symptoms and signs to arrive at a suitable diagnosis. Our teachers were so clinically astute, and were thorough in the examination and elicitation of the signs of the clinical disorder of the patient, which always left a vivid lasting impression on the student. They hammered these principles in our minds during our training. As exam going students, we would be expected to perfect this clinical judgement and have both a diagnosis and thoughts of differential diagnosis at hand.

In a busy orthopaedic OPD in a public hospital, there were patients who would come over and over again, so much so, their thick OPD papers with standard (tall) continue all, one wondered at the motivation of these patients to keep coming to see the doctor, and to take the same tablets over and over again. Were they there to experience the care and compassion of the doctor's touch? or the value of being healed in their pain. Surprisingly this feel good factor seemed to mitigate the discomfort of waiting for hours in endless queues. There were certainly an equal number with genuine complaints to be attended to, who were given suitable and sufficient time for proper assessment to arrive at a diagnosis.

In the Covid19 pandemic that we are experiencing, telemedicine has radically and quickly altered how medical practitioners can provide care to their patients, within approved guidelines. Technology is being made use of to deliver health care services. Some research studies provide theoretical and practical evidence on the significance of using telemedicine and virtual care for remote treatment of patients during this pandemic. It is felt that it reduces face to face contact among physicians and patients, social distancing and protect both the patient and the doctor from the infection.

In a vast country like India with its diverse culture and different level of educational and social backgrounds, people may not be accustomed to using this technology. In some of the smaller cities and towns, challenges like network connectivity disturbances in the bandwidth and even absence of smart phones and devices hinder the use of telemedicine.

Starting telemedicine services in government and semi government and charitable hospitals will entail not just a financial outlay but also call for sound technical support. Many hospitals do not have the resources and infrastructure to change their mind set and some institutions are even reluctant to upgrade their old systems to digital technology. The government needs to support the health system by infusing more funds to facilitate the availability of this technology.

Another great challenge with the introduction of telemedicine will be the inability to do the various clinical tests on the patients and solely rely on patients' movements and imaging studies reports. The clinician will soon lose the clinical touch, and this will result an attempt to treat the imaging diagnosis, rather than tailor the treatment to the patient needs and symptomatology and signs.

Telemedicine is necessary and it is a powerful tool in the hands of medicine and it is the field which is

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emerging and futuristic. However there are issues of not having proper legislation in place, challenges of upgrading the infrastructure, training of the staff, financial constraints, irregularity of the band width which can be a major constraint in the further application of the digital technology and widespread usage, and for the individual patient not having the proper technology backup to avail of telemedicine facilities may be an area of concern. Issues relating to payment for services rendered will have to be analysed, as in some cases and most especially for senior citizens, transfer of funds and payments via portals, may be a challenge.

Although telemedicine will give the medical professional an opportunity to social distancing and work during a pandemic, it will contradict and oppose our clinical acumen that is our hallmark of our profession. With telemedicine, we run the risk of challenging our professional joy of using our professional expertise to arrive at a diagnosis and treat the patient with a holistic approach.

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