



A New Facet of Telemedicine Revealed by the Pandemic

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Opinion

As the whole world suffered through the restrictions imposed by the COVID-19 pandemic, a new way of doing things emerged - telemedicine. Previously reluctant physicians quickly learned how to use laptops and mobile phones to hold voice or video calls with their patients. Patients who were desperate to be seen by a doctor accepted the limitations of a remote teleconference call with their physicians. But such a type of telemedicine, the real-time video or voice-conferencing were not new. These technologies have been available since the early 2000s with prototypes going as far back as the 20th century.

So, what happened? for one there was a pandemic forcing governments to impose strict lockdowns. Secondly, the virus concerned was very contagious and placed both patients and doctors at risk if they meet in the clinic. By 2020, countries around the world have mature telecommunications infrastructure that enabled doctors and patients to meet online and re-establish their relationships. This allowed the doctor to examine the patient by taking a thorough history and careful inspection (some could even perform auscultation if the right devices at the patient side were available). With the help of videoconferencing technology, the clinic visit became virtual. It kept the doctor and patient within their respective safe bubbles but allowed enough data to be exchanged between them to offer adequate interventions for the patient (advice, prescriptions or for some, a necessary but coordinated trip to the emergency room).

As these telemedicine encounters and virtual consultations transpired millions of times per day around the world, there were concerns raised about the privacy and confidentiality of these virtual activities. Some even balked at the use of insecure platforms which were not encrypted and were run by companies who unabashedly admitted that they use all data transmitted within their applications to offer better services to their members. Yet despite these concerns, patients and doctors persisted. There was a real need to communicate and doctors and patients needed to see each other on a platform that was available to both, often in the platform accessible to patients. In many developing countries for example, the poor could not afford expensive mobile data and had to settle for free instant messaging services (also called chat) for their exchanges with their doctors.

Yet despite these numerous telemedicine interactions, all through the three years of the pandemic, complaints on breach of confidentiality or unintended disclosure of sensitive personal information were minimal, even negligible. This is a new facet of telemedicine that was not starkly visible before the pandemic when the number of telemedicine transactions were few and far between. It was only when the lockdowns forced people to communicate online that it became apparent that they weren't much concerned about the confidentiality of their virtual visits. And on the doctor's side, they weren't concerned about any litigation that patients might throw at them for inadequate telemedicine care.

At the core of a telemedicine visit is still the sacred doctorpatient relationship. While the format may have changed from face-to-face to virtual, the essence of this mutually respectful relationship remained. In fact, it was even enhanced as it showed how the doctor, with his/her commitment to the patient's welfare, made himself/herself available through these new modalities. Now that the World Health Organization has declared the pandemic over, many patients have returned to their face-to-face visits with their physicians. Perhaps it is because they desire to feel the human touch. Perhaps because they wanted to see the assurance directly from the eyes of their doctor rather than their laptop screen. Yet we now know that patients are now more amenable to a virtual visit if their physician suggests that option. It took a pandemic to convince the world that telemedicine is a valid and useful tool for care.