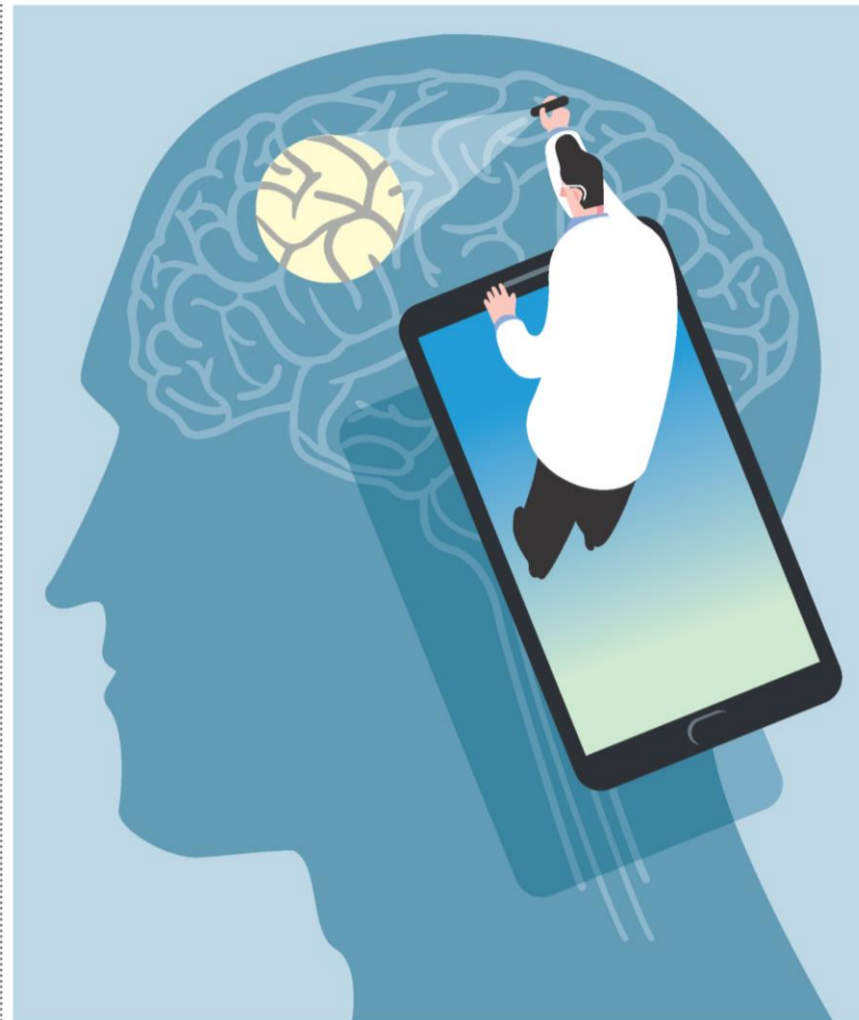


Doc Talk

Telemedicine complements face-to-face clinical visits



ST ILLUSTRATION: CEL GULAPA

Technology can help connect doctors, patients and caregivers, especially during a pandemic, but it cannot entirely replace physical consultation



Matthew Chen

Madam A, 95, has been my patient for a while now. She has dementia and the disease has nearly progressed to the severe stage.

I've seen her become progressively frail over the years. She has suffered quite a few falls in the past, but thankfully none that were serious.

Her family is fully aware of her ailing health and has been extremely supportive in ensuring that she maintains her independence as much as possible.

They employ creative means to take her out of the house when she refuses to do so, use alarms and various technologies to monitor her when she locks herself in her bedroom, and gently coax her to eat and drink when she spits out her food or fluids.

When the Covid-19 pandemic hit our shores last year, clinical

services in the hospital had to be shunted aside to fight the coronavirus, leading to reduced outpatient services.

Safe distancing regulations were put in place and there was a major push to adopt telemedicine to keep in touch with our patients in the community.

While the concept was not new, we found that it provided us with the much-needed opportunity to provide uninterrupted medical care for older people.

This is particularly so for those who are physically frail and vulnerable, as they continue to safely distance themselves during these unprecedented times.

According to National Telemedicine Guidelines established by the Ministry of Health, telemedicine is defined as a "systematic provision of healthcare services over physically separate environments via information and communications technology".

It also includes the exchange of information between healthcare providers and patients or caregivers over the telephone, through text messaging or other similar applications.

Given Madam A's physical frailty, her reluctance to leave her house or wear a face mask, and ultimately the need for safe distancing, we decided to carry out a telemedicine consultation.

Seeing her over the computer screen brought a smile to my face. She looked happy to be able to see her doctor from the comfort of her

home, though bewildered by the technology connecting both of us.

Not only was I able to see her and her 71-year-old son, who is her full-time caregiver, I could take the opportunity to quickly review their home to make sure safety measures were in place to reduce the risk of falls.

Her son has been very dedicated and supportive in her care journey, and he truly appreciated this experience of care.

Telemedicine is not for everyone, though. One needs to be mindful of the potential pitfalls.

These include access to available technologies, inherent data security and privacy issues, limitations to physical examinations, and medicolegal implications.

Guidelines are in place to circumvent these issues, but the decision to hold such a consultation needs to be made jointly and cautiously. Just because something is convenient does not mean it should be taken lightly.

Certain conversations, for example, can be of a sensitive

nature and are probably best had face to face in the confines of a consultation room.

Those who require further physical examination will still need to come for a clinical visit at a later date. Regardless of the situation, patient autonomy, confidentiality and safety are paramount and need to be upheld.

A concerned caregiver of a person with dementia recently rang up to arrange a telemedicine consultation but, upon further review of the case, we had to ask him to bring the patient in for a face-to-face consultation instead.

This was due to concerns that the person with dementia could be experiencing a sudden change in mental state, also known as delirium, which could be potentially life-threatening if missed and required a physical assessment in the clinic.

Careful considerations will need to be made to ensure telemedicine is conducted safely and its benefits enjoyed to the fullest.

Although outpatient services have fully resumed, telemedicine

is here to stay, given its clear benefits. It will, however, not replace our existing services, but rather complement them at the opportune time.

It will be good for everyone to understand the pros and cons of this new mode of care. Generally, patients will be advised of the opportunities for telemedicine consultations if found suitable.

However, patients who have not been offered the service, but are keen to try, can also approach clinic staff who will review and discuss with them the suitability of their cases.

Healthcare professionals, patients and their caregivers should make a shared and informed decision before embarking on this journey.

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