

Trends and advances of teleconsultation in developing countries

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Global Health Telemedicine (GHT) is a non-profit organization created in September 2013 in charge of offering specialized medical tele-consultation to Sub-Saharan Africa medical centers.

Through a particular software enhanced by BS-Innova™, the local doctor can live submit a request to the GHT volunteer specialist attaching clinical question, triage, anamnesis, previous medical examinations and laboratory exams, essential instrumental tests, pictures and videos. Simultaneously, through an SMS, the Italian specialist receives the tele-consultation request, inviting him to log in the platform in order to proceed to reply. The requesting doctor immediately receive the required advice.

Currently the active branches are sixteen: cardiology, neurology, ophthalmology, internal medicine, radiodiagnostic, infectious diseases, general surgery, nutrition, ophthalmology, hematology, orthopedics, urology, endocrinology, hepatology, vascular diseases and dermatology. Twenty-one GHT centers opened in Central and Southern Africa: four in Mozambique and Tanzania, three in Malawi, two in Kenya and one in Angola, Cameroon, Centrafrican Republic, Democratic Republic

of Congo, Guinea Conakry, Nigeria, Swaziland and Togo. Each GHT center supports already existing medical centers and is equipped with basic instrumentation, as electrocardiograph, pulse oximeter, back light panels, scanner for X-ray film and internet access for sending tele-consultation requests. In thirty months activity we provided more than 2500 (2569) tele-consultations, receiving an average of 30 weekly requests. Cardiology is the most required branch with 2000 tele-consultations (77%), followed by infectious diseases with 230 (9%) and radiology with 105 (4%). Most of these came from Arusha-Tanzania (1257 requests, 49%) and from Beira-Mozambique (750, 29%) which are the first GHT opened centers. The GHT volunteer doctors involved in the project are fifty, working in different Italian cities and contexts, and the average response time is about 17 hours.

Our experience clearly shows that the increase in life expectancy in developing countries in which we are involved, caused the increase of chronic, and before unknown, degenerative diseases, as the cardiovascular and the metabolic one. Some of these diseases need a local outpatient treatment, and receiving an expert second opinion, as a telemedical one, would positively impact the patient outcome.

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