

**ORIGIN AND
THE
EXISTENCE OF
TELEMEDICINE
AS AN
EFFECTIVE
HEALTHCARE
SOLUTION IN
INDIA**



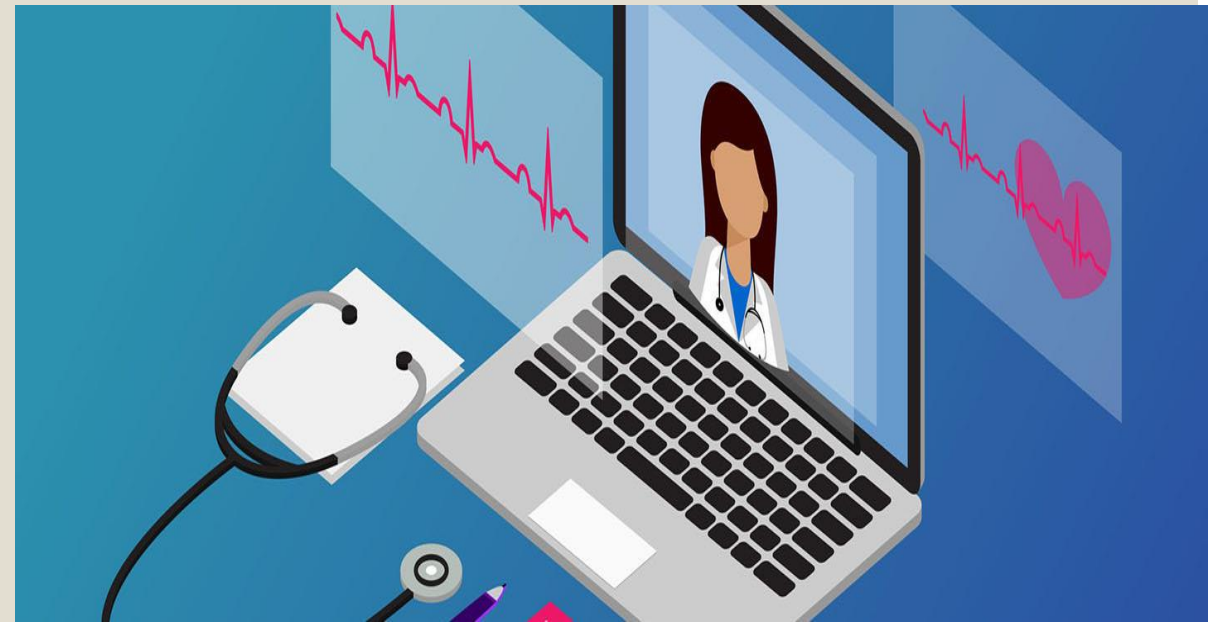
LIHMR UNIVERSITY

Overview of the presentation

- Introduction
- Utility of telemedicine
- Current situation of telemedicine in India
- Teleophthalmology Projects
- Case studies
- Recommendation
- Government initiatives
- Limitations
- Healthcare startups
- Conclusion

TELEMEDICINE

- The Centres for Medicare & Medicaid Services (CMS) a federal government website funded by USA defines telemedicine as the “provision of clinical services to patients by practitioners from a distance via electronic communication”.



UTILITY OF TELEMEDICINE

Home care and ambulatory treatment.

Reduce the time and costs of patient transportation

Disaster management.

Tele mentored procedures-surgery using hand robots.

An asset for follow up cases, routine monitoring and various therapies such as counselling sessions.

CURRENT SITUATION OF TELEMEDICINE IN INDIA



- National health stack {NHS}

CURRENT SITUATION OF TELEMEDICINE IN INDIA



Teleophthalmology Projects

12 villages.

The cost for conducting one camp was 18000 INR.

At least 150 patients are screened per day using this mobile.

129 out of 132 people were satisfied with the tele health program conducted in the tele screening .

Telemedicine activity between base hospital and camp van



Case 1

Evaluation of patient and doctor perception towards telemedicine in India.

Specialist experience

94 % doctors got desirable results

94% of providers were open to promoting telemedicine.

90% of the specialists reported telemedicine beneficial for them.

61% patient's inflow increased since the commencement.

Patient experience

90% were convenient with the scheduling of appointment.

About 82% of the participants were satisfied with the treatment and that they would recommend further to others.

Fifty-four percent of the patients acknowledged that they did not have a problem in understanding the usage of telemedicine.

Problems encountered in telemedicine

Problems faced by the patients

Questions	No Problem	Technical	Information Inadequency	Can't understand TCC doctor	Uncomfortable in the face of camera	Lack of face to face contact with doctor
n	38	17	3	3	4	6
%	54	24	4	23	31	46

Problems faced by the doctors

Problem	n	%
Technical issue	24	47
Time scheduling	20	39
Communication lapse	7	14

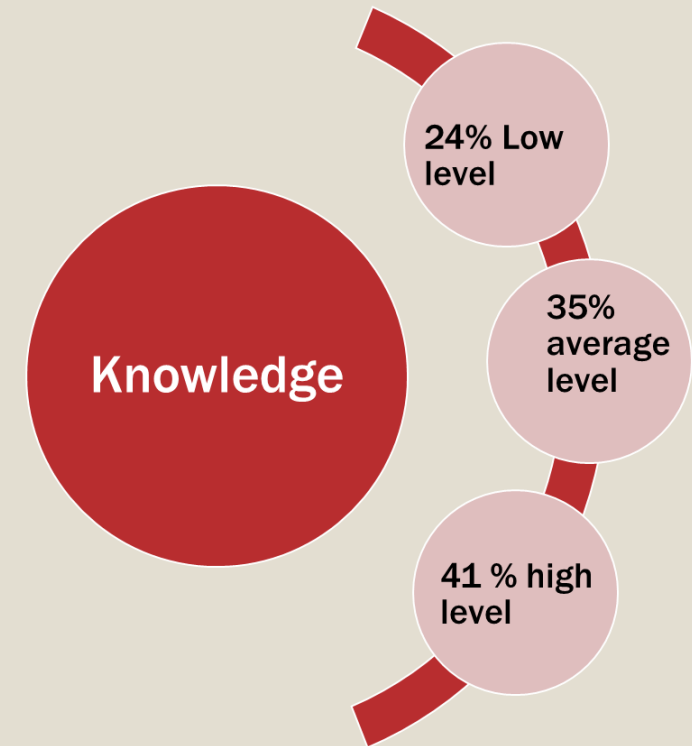
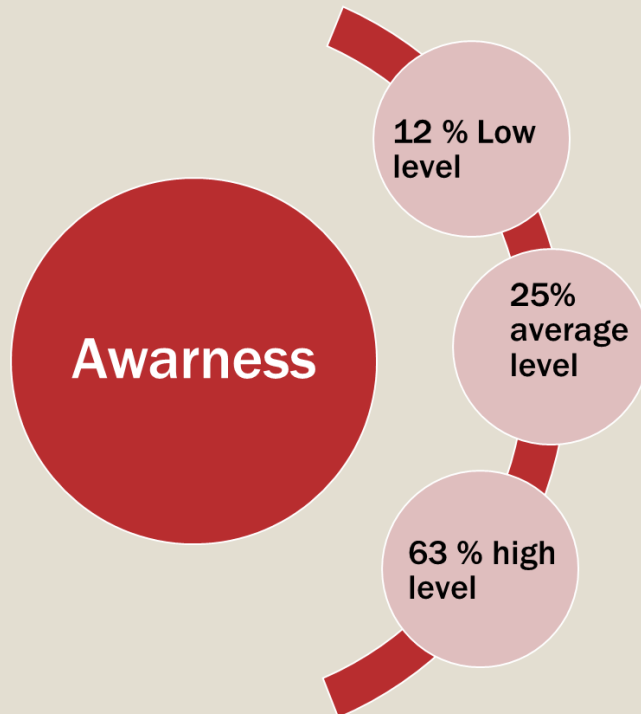
Cost-effectiveness on telemedicine

About 89% of the patients stated that the treatment was both feasible and convenient;

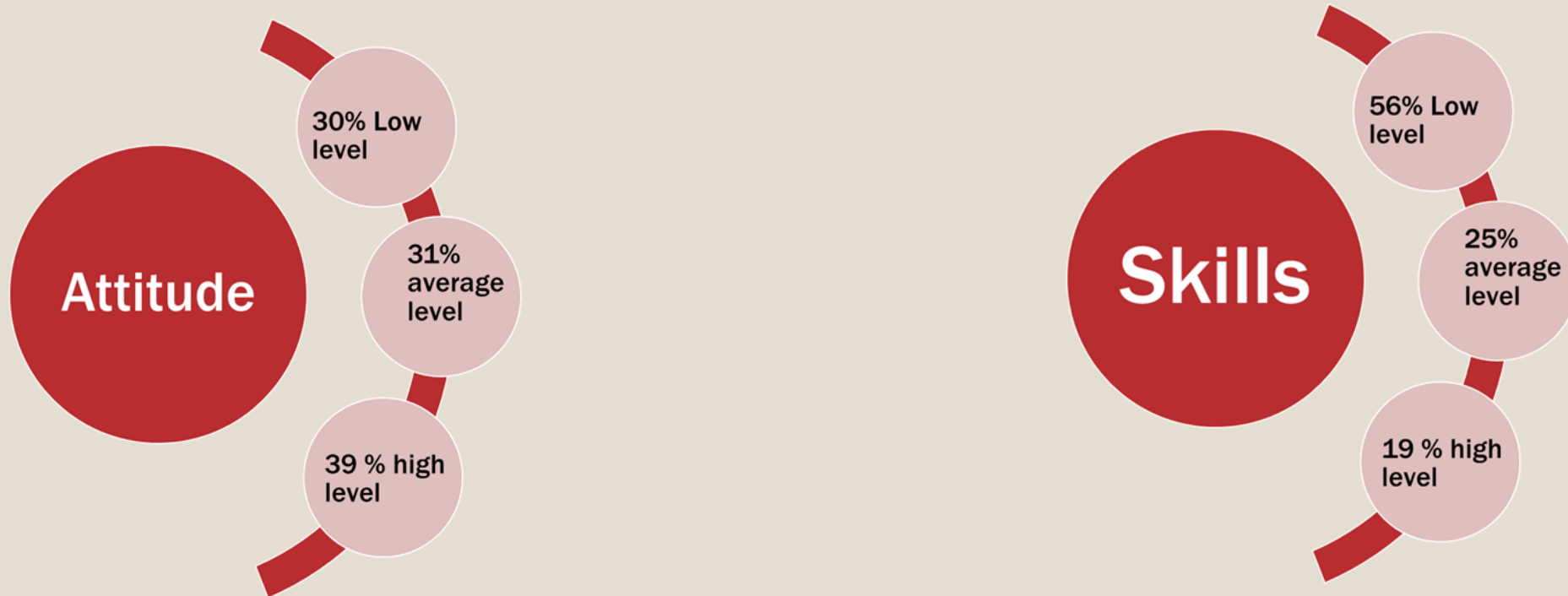
7% felt treatment through telemedicine was costly for them but convenient, and 4% of the participants felt it was economical but not convenient.

CASE 2

“ The attitude knowledge and skills of telemedicine among the health professional faculty working in teaching institutions”



“ The attitude knowledge and skills of telemedicine among the health professional faculty working in teaching institutions”



RECOMMENDATIONS

- Implemented compulsorily in all State capitals .
- Professional credits, financial incentives could be extended for practicing telemedicine.
- Training programmes.
- Telemedicine could be made mandatory during internship and must be included in the UG and PG curriculum.
- Proper infrastructure should be made mandatory as part of Medical Council of India Regulations.

GUIDLINES TO BE FOLLOWED IN INDIA

Initiated by



Registration number



सत्यमेव जयते

NITI Aayog



Kidney Disease



Cancer



Diabetes



Heart Disease



Lung Disease



Alzheimer's

Limitations



Limitations



HEALTHCARE STARTUPS: THE FUTURE OF TELEMEDICINE IN INDIA.



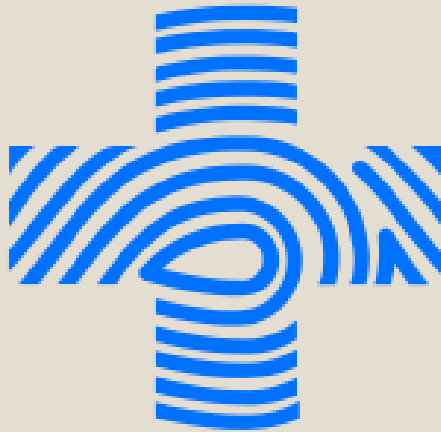
Telerad Tech[®]
Smarter Healthcare On Demand



Rijuven

5C Network

 **Medical**



MEDCORDS

CONCLUSION

- Mix approach
- Ethical issues.
- Security and confidentiality of patient data .
- Intensify training workshops for health professionals.
- Provides an aperture, to strengthen the infrastructure which could prove an asset to achieve a robust healthcare for its citizens.

AN INTRODUCTION TO GLOBAL
HEALTH

Overview of the presentation

- Introduction
- How changing policies impact global health?
- Epidemiological transition and demographical transition.
- Sexual Rights and Migrants and health
- Financing universal health coverage
- Global Health coverage

Introduction

- Global health is defined as “An area of study, research and practice that places a priority on improving health and achieving health equity for all people worldwide“.
- Also defined as “Those health issues that transcend national boundaries and governments and call for actions on the global forces that determine the health of people"

IN THE PAST DECADES ,SIGNIFICANT PROGRESS IN HUMAN HEALTH, ESPECIALLY TO CONTROL OF INFECTIOUS DISEASE.

Life expectancy has increased

Fertility rates have dropped

The quality of life improved for millions.

INSPIRE OF PROGRESS

Extreme poverty.

Lack of most basic amenities such as water and sanitation

Poverty, malnutrition, infectious diseases and reproductive health

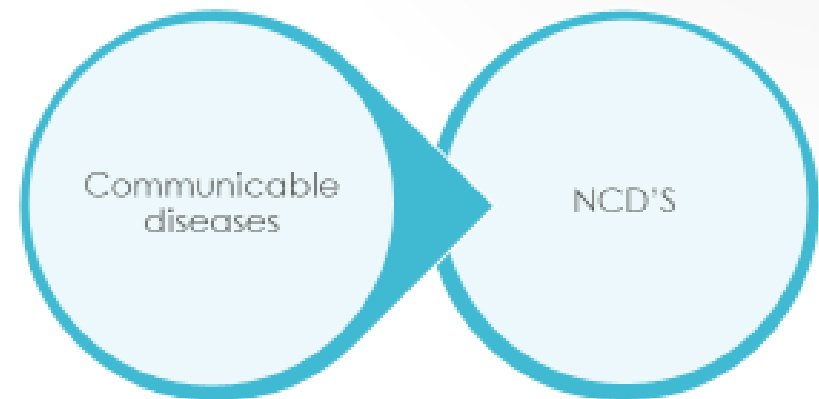
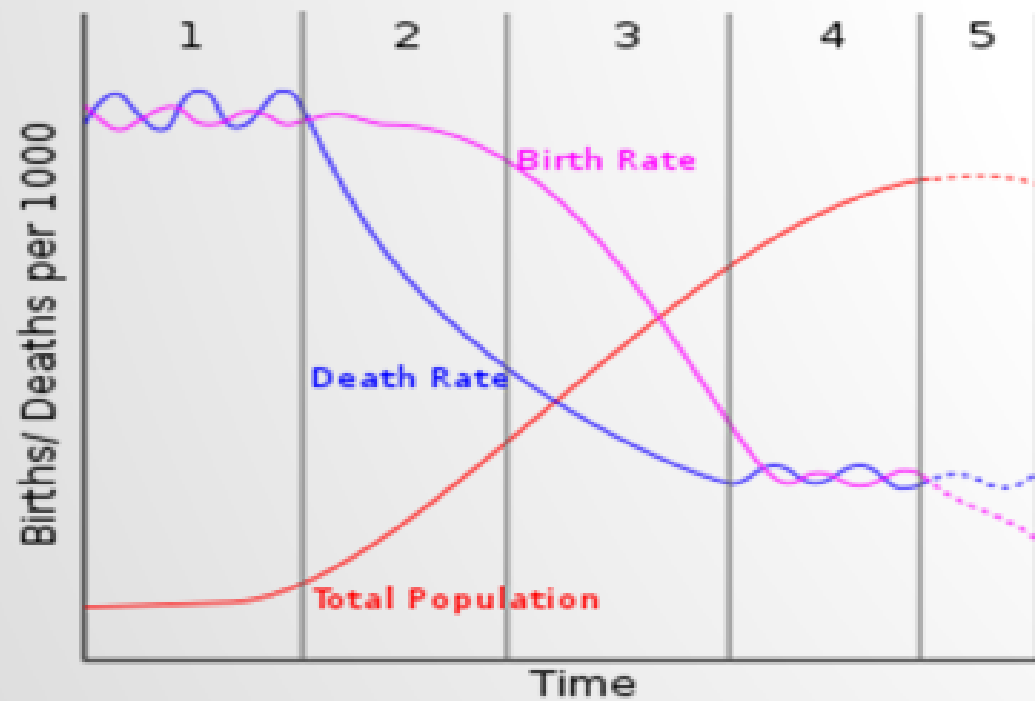
Some people don't have proper shelter due to wars and conflicts

Urbanization and changing diets are among the drivers of an epidemic of non-communicable diseases

HOW CHANGING POLICIES IMPACT GLOBAL HEALTH?



EPIDEMIOLOGICAL AND DEMOGRAPHICAL TRANSITION



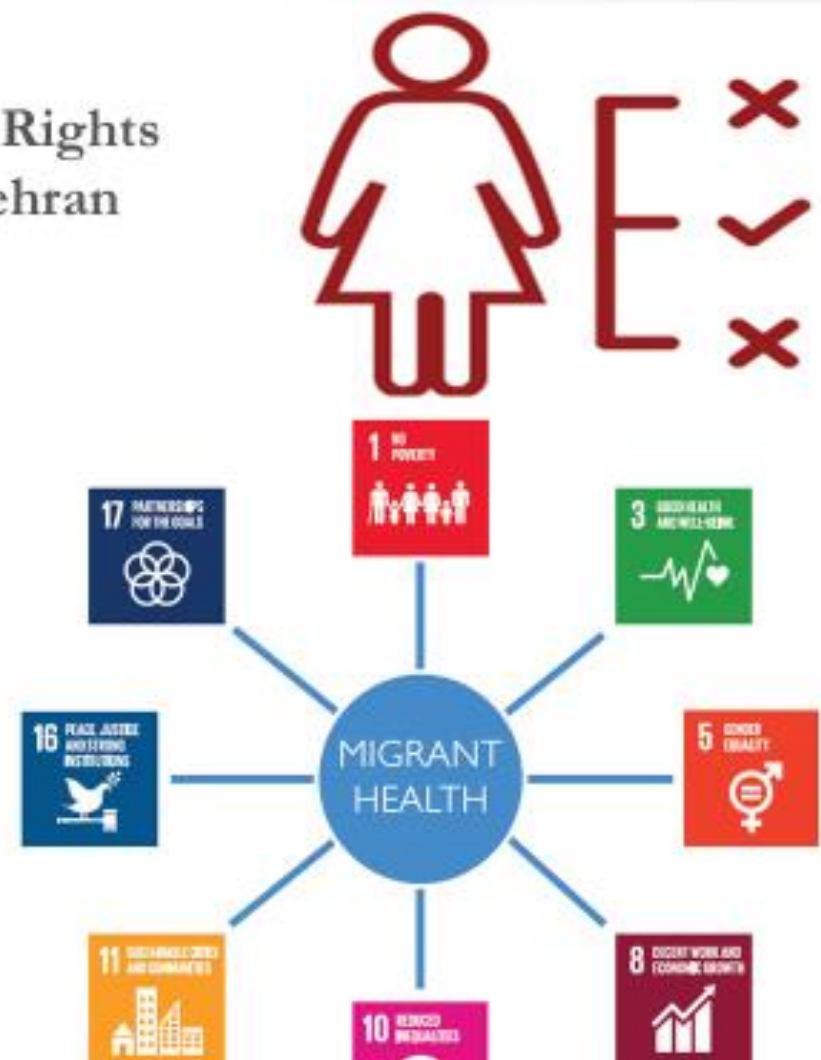
- Sexual and reproductive rights



1968, The Human Rights Conference in Tehran

- Migrants and their health

- The 1951 Refugee Convention states that refugees should enjoy access to health services equivalent to that of the host population.



FINANCING UNIVERSAL HEALTH COVERAGE



SIN TAX



GLOBAL HEALTH GOVERNANCE

- Managing the solutions to global health challenges.

Technical standards
for classification of
diseases



