Role of Telemedicine in Improving access and equity of asthma care: A narrative review

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Introduction

Regular monitoring of asthma patients reduces the risk of severe complications. When COVID-19 pandemic forced in-person consultations to be unfavourable, telemedicine services gained a role in bridging the gap.

This study aims to assess the role of telemedicine in improving access and equity in asthma care by reviewing the existing literature.

Method

Articles were searched from PubMed database (January 2020 to February 2023), using the terms (((telemedicine) OR (telehealth)) AND (asthma))).

We screened the titles of 272 published papers, then reviewed the abstract and fulltexts of 43 articles. We included 23 original articles for the narrative review.

Results

Approximately 57-88% of telemedicine patients reported high level of satisfaction, yet deemed telemedicine to be inferior to face-to-face consultations. Willingness to use telemedicine improved during pandemic but slightly dropped after the pandemic. Patients opted to wait for physical visits unless there was no specialist in their local area.

Patients' concerns included technology gaps, not getting full attention, lack of physical examination, and self-measuring. Physicians were concerned with technology quality, effectiveness of communication, and doctor-patient relationship.

Findings on asthma control outcome of telemedicine and physical visits were inconsistent. Adding telehealth follow-up to physical visits improved asthma outcomes. Despite improved accessibility, patients reported not having social support and difficulty in obtaining medicine.

Discussion and Conclusion

Clinical outcomes varied by type of available telemedicine. Telemedicine has the potential to address barriers in access to care, with the improvement of support services, training on asthma monitoring, provision of handheld spirometry. Synchronized telemedicine is crucial. Not only clinical services, improvement in digital service availability among the underserved population is essential.

Telemedicine for asthma is yet to be a replacement but a complementary in improving access and equity.

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