Telemedicine in digestive diseases during the COVID-19 pandemic

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Technology in medicine has become an integral part of medical practice. It has transformed the way in which patients and health-care professionals interact. First, it was used to shared knowledge and experiences from specialists to primary-care providers, the main experience developed by ECHO Institute in the fight against hepatitis C. After that, telemonitor has been shown to facilitate chronic disease management, and many publications have been written for different specialties including gastroenterology and hepatology.

The 2020 COVID-19 pandemic has forced to change the way how to practice medicine, and looked for new ways to provide and support care to the patients. The COVID-19 pandemic has forced us to avoid gathering of people, as physical distancing is needed. Although face-to-face contact is the basis for the physician-patient relationship and allows physicians to assess the overall condition, it also carries a risk of infection not only for the patients, but also for physicians.

Telemedicine and teleconsults give access to healthcare services, avoid driving time, avoid both waiting time and the gathering of people to decrease the COVID infection risk. Telemedicine allows enhanced patient-to-physician communication, allowing select patients at risk of developing more severe disease to go to the emergency room for physical evaluation, and to finally ensure prescription.

Telemedicine is also ideal for chronic disease care management: inflammatory bowel disease, irritable bowel syndrome, liver disease, chronic pancreatitis, dyspepsia, and others.

References


Links: https://giondemand.com/
https://gi.org/2020/03/20/top-five-things-gastroenterologists-should-know-about-telehealth/