



# ***STUDY ON THE SCOPE OF TELEMEDICINE SERVICES DURING THE PANDEMIC***

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## **INTRODUCTION**

India, with a population exceeding 1.2 billion, stands as the world's second most populous country [1]. The World Health Organization suggests a doctor-to-population ratio of 1:1000 for India, but the existing ratio is merely 0.62:1000 [2]. This situation becomes more concerning during the pandemic, making telemedicine services a viable means of reaching patients in need, especially in certain regions of the country. Telemedicine, as defined by the WHO, involves healthcare service delivery where distance plays a crucial role, utilizing information and communication technologies facilitates the exchange of accurate information pertaining to the diagnosis, treatment, prevention of diseases and injuries, research, evaluation, and ongoing education of healthcare providers. All these efforts are directed towards enhancing the health of individuals and communities. [3]. The term "telemedicine" essentially translates to 'healing at a distance' and is commonly used as an overarching term encompassing healthcare delivery, education, research, health surveillance, and public health promotion [4].

Several successful examples of established telemedicine services in India include mammography services at Sri Ganga Ram Hospital, Delhi, oncology services at the Regional Cancer Center, Trivandrum; surgical services at Sanjay Gandhi Postgraduate Institute of Medical Sciences, Lucknow, and numerous others [4]. Private hospitals have also demonstrated interest in this field, with major players such as Narayana Health, Apollo Telemedicine Enterprises, Asia Heart Foundation, Escorts Heart Institute, Aravind Eye Care, and Amrita Institute of Medical Sciences actively participating in telemedicine services.

## **RATIONALE**

After the Covid-19 disease transmission people from both urban and rural showed interest in accepting things using the service of devices and online. This study was conducted to find whether the community had availed the Telemedicine services. The importance of treatment availability and treatment continuity was a major steppingstone for the success of healthcare delivery. The curtailing condition had wreaked

havoc in the total healthcare system delivery.

This study was also conducted to know the type of services they availed and the doctor specialist they consulted and if they don't use any type of telemedicine, then what was the major reason for that. The result would give some information about the areas to be focused more for expanding Telemedicine services further.

## **RESEARCH OBJECTIVES**

1. To assess the extent of telemedicine services amid the pandemic
2. To explore the perception of the community, have towards telemedicine services during the pandemic.
3. To assess the preferences among different medical specialties towards telemedicine services.

## **RESEARCH METHODOLOGY**

This was a cross sectional descriptive study, and it seeks to identify the growth of telemedicine services among the community. The major reasons for not being availing any type of telemedicine services was also aimed in this study. This study also aimed at identifying and understanding the type of specialties they consulted and the major problems they faced during the consultation, their awareness regarding the telemedicine services available. The study included the respondents with ages 18 onwards, with consideration of the respondents with ages 18 year onwards as the age group play a role while seeking telemedicine healthcare services. Diversity of the respondents in the sociodemographic factors gave a wide perspective and input about the telemedicine services. The diversity will also provide an insight on the use of technology for availing the proper healthcare services.

The primary data was collected from 200 respondents using a questionnaire. The participants were a mixture of different categories such as people from urban and rural areas, people of different age groups and people with different income. The database included the direct and indirect contacts of the author from the school, college, and

society. Special attention was taken to ensure a diverse mix to the extent possible, in terms of age group, gender and rural and urban community. The questionnaire was shared to the respondents with their consent, and the collected data was analyzed on MS-Excel. The study duration was three months starting from 22 March 2021 and ending on June 19,2021.

## **RESULTS & DISCUSSION**

The findings indicated that a majority of respondents (89%) were aware of telemedicine, with over half of them (55%) having utilized telemedicine services. Both rural and urban respondents demonstrated adequate knowledge about telemedicine. The primary reasons cited for not using telemedicine services were a preference for in-person consultations and a lack of awareness. Even individuals who contracted Covid-19 utilized telemedicine services, highlighted the importance of treatment accessibility. The community primarily used telemedicine for consultations with general specialty and super-specialty practitioners, with a majority seeking general medicine services (33 respondents). Technical issues and incomplete discussions emerged as significant limitations faced by respondents.

Respondent satisfaction levels were assessed using a Likert scale, revealing that a majority (43) expressed satisfaction, 39 were neutral, and 19 indicated the highest satisfaction level—completely satisfied. Only a small number (09) expressed dissatisfaction, and none marked the lowest level—completely unsatisfied. This suggests a generally positive acceptance of telemedicine services, with most experiences yielding favorable outcomes. While some cases did not achieve the best outcome, the overall acceptance suggests that improving service quality could enhance satisfaction levels. The proportion of respondents availing e-Sanjeevani OPD services was higher in rural areas compared to urban areas, indicating a positive trend of people utilizing public health services. This trend could contribute to a reduction in out-of-pocket expenditure on medical services.

## CONCLUSION

Telemedicine services have gained popularity across the community, transcending differences in residence, education, gender, occupation, and other sociodemographic factors. Individuals from all segments have utilized telemedicine services, with a higher uptake observed among respondents from rural areas. Telemedicine represents a viable healthcare delivery model, offering comprehensive, compassionate, and professional healthcare to individuals in the comfort of their homes. It effectively addresses healthcare inequalities by enhancing accessibility and availability, delivering services remotely through various channels. The community has actively embraced telemedicine services, with only a small portion remaining unaware of them. The community continues to express a willingness to avail themselves of such services if made available.

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