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COUNTRY BUILDING EFFORTS FOR THE DEVELOPMENT OF WORLD USING TELEMEDICINE: THE EXPERIENCE OF EL SALVADOR

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The aim of this short paper is to present current healthcare information about El Salvador as well as to illustrate our contemporary telemedicine applications and results. A 12 minutes video showing our "1a Gran Jornada Fonomedica" has been also be included in the presentation. This event (1a Gran Jornada Fonomedica) took place Feb 12th, 2005 where during 5 hours doctors responded to over 1,000 POTS based at distant consultation units.

There are many companies using telemedicine applications in El Salvador, but their principals and society at large do not define these applications as telemedicine.

One well known telemedicine company is FONOMED S.A. It was extensively presented at Med-e-Tel 2005 (the International Trade Event and Conference for eHealth, telemedicine and Health ICT, www.medetel.lu) (fig. 1).

Since it was founded in May 2001, more than 100,000 different patients have been assisted by this company using POTS (Plain Old Telephone Service); nonetheless the population – and the medical community – has not fully embraced the evident benefits that telecommunications have brought to patient care improvement. Telemedicine in El Salvador has been a very difficult idea to transmit from a conceptual point of view. Most telemedicine applications are seen as competition by the medical community and as a foreign process by many patients. The prevailing thought is that a physical examination is necessary for the resolution of any health issue, and that interconsultation and remote readings of local images are an affront to the treating professional's intellect and capacity. However, due to the immense market penetration of telephone services in El Salvador (75% of the population has access to a phone line), and the meager national healthcare coverage (50% of the population), patients have used this service very frequently, but as a last resort, when visits to local doctors, pharmacists, pharmacy employees, healers, and self-medication have failed to identify the proper course of action for their health issue. Those that have experienced first hand the extreme convenience of prompt medical advice over the phone – when the patient needs it, not when the health care professional can deliver it – have remained active users of FONOMED.



Fig. 1 Fonomed S.A. at Med-e-Tel 2005

The full educational and preventive aspects, as well as those that relate to timely health queries, that would obviously result in decreased redundancy and duplication of efforts, lower costs to the patient and the national health care system, identification of the appropriate entry level into the health care system, proper referrals to specialists, laboratories and/or images, and other well known elements that pertain to the very favorable cost/benefit result that characterizes our telephone service, have not been fully understood by our population as yet.

In El Salvador, the national healthcare system is fraught with problems, as is the case in all underdeveloped countries. Health care coverage is at approximately 50% of a total population of 6 million; doctor's are overworked, underpaid and under-trained; nurses are ill-prepared to administer primary care; universities have very limited resources and use antiquated technologies and procedures; medical teachers are unsympathetic to their students; there is no minimum performance level required to enter into a medical university program, nor an evaluation that establishes minimum performance upon graduation and prior to medical practice; there is very little continued education; hospital infrastructure is deteriorated, and the list goes on and on.

This situation is to be expected: almost all healthcare is nationally funded and the tax base in an underdeveloped nation is meager at best. In this sort of environment, telemedicine can really shine.

In this context there must be a continued marketing and advertising effort that improves understanding of this system by the patients, the results of which can be measured in a tangible form:

- Questions over the telephone become more precise,
- Patients consult at the onset of symptoms with increased frequency,
- Patients understand that many health issues can be managed from beginning to end over the telephone system, and finally,
- The number of patients increases.

And so, our effort continues, with the added fuel of belonging to the International Society for Telemedicine, which we hope will add to the necessary critical mass required for successful implementation of our telemedicine programs, which are in the process of expansion – adding to POTS other more expensive, technology intensive applications. We are very aware of the importance of promoting organizations such as ISfT, as well as local Telemedicine associations, and of the need for that promotion to be reciprocal. The areas that most require attention are in my opinion, adequate funding, standardization of health care and technology protocols, staffing profiles and business models. I believe ISfT is a good vehicle to put together events that can properly address these issues.

Key words: Telemedicine Applications, Business Model, Tele-consultation