Tele-dermatology: A real support for doctor, patient and welfare?

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Abstract

Several authors recently made the distinction between two development pathways for mobile health:

In the management of acute diseases: to improve differential diagnosis and to limit inappropriate use of emergency room and secondary inter-hospital transfers.

In the management of chronic diseases (telemonitoring): to limit unnecessary in hospital visit for a better control of chronic disease, with a real-time follow-up, especially for patients who live far from the expertise center and who cannot move.

Given the benefits of home care for people with dermatological diseases, mainly chronic and rare diseases, and their caregivers, increasing access to telehealth through research, education and policy efforts has the potential to significantly improve the landscape of care.

Virtual monitoring seems furthermore to reinforce the doctor-patient relationship and the relation between primary care setting and hospitals.

Most findings suggest the positive impact of such tools on the patient’s quality of life, the management of isolated populations, and on the patient-doctor relationship and to improve access to care.

Our experience is in Dermatological Unit in National Institute of Infectious Diseases, where the people often come to emergency room with bullous cutaneous diseases suspecting infectious disease. In these case, such as measles or syphilis, teleconsultation would allow also a reduction in the risk of contagion with a gain for the health system and public health.

Our project of teledermatology, aim a better differential diagnosis, more timely and cheaper and, in line with European Reference Network - Skin, would allow the concentration of knowledge and resources with a huge benefit to rare disease patients.

Biography

Alessandra Scarabello Medical Doctor, Dermatologist, Physician Doctor on Dermoscience; Immunology and Allergology. Teledermatology Consultant, Associate Professor at Selinus University – Faculty of Natural Health Science.