Commentary

## Usefulness of Android Technology for Diagnosing Asthma

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## ABOUT THE STUDY

Opportunities to patient for self-administration and instruction about their disease, asthma applications intended for use on an Android working framework can have positive health results across the scope of socioeconomics that use mHealth applications. A list of applications was gathered utilizing the search component of the Google Play Android platform and utilizing the words and expressions "Asthma", "Lung Function" and "Peak Flow." Each application was coded for its way to deal with asthma self-administration, which depends on the Global Initiative for Asthma and the National Asthma Education and Prevention Program. Maximum of the asthma applications' essentially focused on patient self-monitoring and self-evaluation. Utilizing the HON Code, we tracked down low health data quality across all asthma applications.

Android asthma applications can have positive results in aiding patients as they give freedoms to self-administration and instruction about their sickness. Asthma is a condition described by an airflow obstruction for short periods that controls airflow in the intrapulmonary airways. Reports show that more than 300 million individuals internationally and of all age experience the ill effects of asthma. The kind of asthma has an immediate connection to the administration, diagnosis and potential prevention of the infection. A main consideration in characterizing kinds of asthma is the presence of airway inflammation, which is variable and has particular but overlapping patterns reflecting different aspects of the disease, for example, intermittent versus constant or intense versus persistent appearances. Acute asthma generally emerges from bronchospasm and requires and responds to bronchodilator treatment in a couple of hours, while the chronic inflammatory type responds to anti-inflammatory drugs over longer periods of therapy. In the course of recent years, there have been research studies on asthma mHealth applications. Scientists recognized 114 applications for asthma in English, of which, 39 were for asthma self-administration. Scientists conclude there are no applications that give dependable and thorough conditions to

self-administration. Different studies have examined the effects of mHealth asthma applications. Another review shows on the utilization of mHealth applications for the administration of asthma. The researcher conducted an observational study utilizing electronic peak flow monitoring and portable innovation more than a 9-month time span in a UK general practice population.

The mHealth applications assisted patients with observing and get instantaneous feedback on their asthma control which would assist patients to integrate management into regular day to day life, draw them completely in their care and consequently develop their asthma control. Research has shown that when asthma patients follow an activity plan and are personally engaged in their care, results come into less asthma attacks, reduced absence from work/school days, and reduce the dependency on medication. In addition, self-administration plans help in reducing or keeping away from emergency trips to healthcare centres and hospitals, prompting an increase in the personal satisfaction for patients, their families and the local area overall. Asthma Buddy, the Android application created by NACA, helps record patient medicine plans, gives a daily agenda in instances of emergency, give facility to consult your doctor on the advancement of your management plan, and records details of all emergency contacts and medical services providers to the patient being referred to. As more mHealth asthma applications are made, there is a need to assess their purpose and the nature of the healthcare data they give. The reason for this work is to conduct a content study of asthma mHealth applications to survey the health information received and their part in asthma treatment and self-administration.

Future examination should proceed to monitor and assess the development and utilization of mHealth Asthma Applications. In light of these discoveries, and their sign of a gap in existing research, resulting studies can keep on assessing the development of events and utilization of mHealth Asthma Applications with expanding strategic consistency to work on the nature of in-app health data.

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