

MICRO-CHIPS: TELEMEDICINE

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

“I don’t know if he’s going to get home,” said a robot to a dying man in a California hospital last month. Seventy-eight-year-old Ernest Quintana was admitted to Kaiser Permanente Hospital for chronic lung disease. On the day he was told that he was going to die, he was alone in the hospital room with his granddaughter. The machine rolled in minutes before a nurse popped in and told them that a doctor, who was on his rounds, will be present. The doctor did indeed show up, but in the robot’s monitor, while he was really seated hundreds of kilometres away. The incident, as predicted, sparked global outrage.

The question on everyone’s mind was: ‘How can a machine be used for a situation as delicate as this one?’ The hospital received a lot of flak, but it defended its use of telemedicine. Unfortunate that it is, this incident has brought the focus on telemedicine. The World Health Organization defines telemedicine as: ‘The delivery of health care services, where distance is a critical factor, by all health care professionals using information and communication technologies....’ Anything, right from using a mobile phone to communicate with a doctor to a video conference call between the patient and the doctor, falls into the category.

For developing nations like ours, that’s also among the fastest to be digitised, this technology is a blessing. People from interior rural areas, where healthcare is a luxury, may not find the act of simply opening an app on their phone to connect with a doctor, as overwhelming as say, changing two buses to reach the nearest Government hospital. There are several mobile apps that connect doctors and patients for the purpose. RingMD, for instance, provides services to people in rural, urban, as well as conflict-prone areas. Using the mobile app, users can connect to healthcare professionals through online video consultations from anywhere.

In its recently-released report titled ‘Digital India: Technology to transform a connected nation’, the McKinsey Global Institute says, “If telemedicine replaced 30 to 40% of in-person outpatient consultations, coupled with digitisation in the overall healthcare industry, India could save up to \$10 billion in 2025.” However, it can be argued that not everyone owns a smartphone, and not everyone will be able to explain his/her symptoms to a doctor over a call. But despite it all, this technology is among the fastest growing today.

In one of Tamil writer Sujatha’s popular short-stories, an old man brings his sick grandson to a Government hospital in the city. They are intimidated by the loud nurses and curt doctors. After a long day of running from pillar to post to no avail, they go back home, without consulting a doctor. However, a doctor who briefly interacted with them that day, frantically asks his assistant where the two of them were. “That boy is dying!” says the doctor. But it is too late. There is no way they can reach him.

The aforementioned story was written decades ago, but portions of it are scarily relevant. However, with telemedicine, the ending, may have been different today.

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