Editorial

Telemedicine and technology: A need for the health-care system

Human civilization has witnessed numerous changes to evolve itself since its inception. Every revolution that was taken either catastrophically or by gradual procedure by our ancestors themselves had evolved the generation for good, be it the straight posture of homo- sapiens, its colonization habits, or the human civilization itself. As every coin has both sides, despite many pitfalls, humans kept evolving themselves in pursuit of a more congenial future.

According to *Ayurveda* scriptures, one of the root causes of *Roga* (diseases) is the decline in the virtuousness of humanity, which is also a result of colonization.[1] As diseases manifested in the community, ancestors paved the way to keep themselves and their progeny healthy. As per the geographical distribution, race, and local ethnicity, numerous forms of medicine have evolved to sustain the beings all through the eternities.

In *Ayurveda*, the basic tetrapod of treatment contains *Bhishaka* (physician/surgeon), *Aushadhi Dravya* (medicines), *Upasthata* (caregiver), and *Rogi* (patient).[2] Different *Ayurveda* scholars ranked these elements' significance according to their wisdom. The relationship between the physician and the diseased is the most decisive among these four limbs. All the other factors follow the understanding of the physician about their patient's disquiet. Therefore, better communication skill of physician with their patient is highly acclaimed, which includes an unfussy, precise, and free-of-jargon questionnaire that essentially matches the patient's dialect. Physicians should also be conscious about the understanding of the patient and repeat their query if required.

Decent communication skills ease the course of treatment and contribute to understanding the patient within his or her unique psychosocial and cultural contexts. When patients' gratification is high, amenability with medical injunction increases, which is instrumental for physicians as well; this gives more job satisfaction, which helps in the reduction of burnout and job-related stress.

A waning relationship between these two vital elements has been witnessed of late majorly due to inappropriate and inadequate communication. Medics discourage patients from expressing their apprehensions and supposition as well as desires for more information. Inadequate doctor-patient ratio, hectic schedules, and insufficient time are some of the factors; that are practitioners' justification for this scenario.

If we look through these factors, still there are disparities in health services based on rural/urban localities, ethnicity, and social status of the patient. Long waitlists, inflexible appointments, difficult transportation, frequent follow-ups, difficulties in negotiating appointments and receptionists for migrants, the distress of waiting in the waiting room, and confidentiality qualms are some other factors that affect health services. These problems need to be addressed at their earliest to ensure real "health for all" rights of citizens of India.

There is a boom in communication technology humankind vouched in the twenty-first century, which reformed society in an unprecedented way. Be it grocery, eatery, medicines, transportation, different courses to learn and educate, or banking system; every service is at the doorstep with the convenience of the consumers' time. Now, its time to adopt telemedicine to shift medical care from institutions to homes and mobile devices. It is already being practiced and planned to adopt in mainstream health care in some developed countries.

In India first time, it was planned and executed by the Indian Space Research Organization (ISRO) in the form of a telemedicine pilot project in 2001.[3] Apollo hospitals, Ganga Ram hospital in Delhi, and Amrita Institute of Medical Sciences are some of the institutions where telemedicine services have been successfully established.[4] National Telemedicine Portal has been established by the Ministry of Health and Family Welfare with the objective of implementing a green field project on eHealth, including Telemedicine on the National Medical College Network for interlinking the Medical Colleges across the country with the purpose of e-Education and National Rural Telemedicine Network for e-Healthcare delivery.[5] In 2016, the Ministry of Ayush initiated telemedicine practices in collaboration with ISRO. However, there was ambiguity about legislation or guidelines, which was resolved in 2020 by issuing telemedicine guidelines for ASU practitioners.[6] Telemedicine was encouraged and practiced on a large scale in the current pandemic scenario, and satisfactory adaptations have been observed.

Among the numerous benefits of telemedicine, the most significant is its convenience and cost-effectiveness. These days mobiles, the Internet, laptop, and tablets are accessible to the majority of the population in India. These devices are more user-friendly and can be used by a vast population helping reduction in the communication gap to ground zero. It will strengthen health-care services' quality, enhance patient confidentiality security, and minimize operating and administrative expenses.

Urban–rural disparities would be bridged and shortened. With the proper communication channels in place, it is simple for a doctor to deliver treatment and care to a patient located anywhere at his/her convenience. The system enables the

physician to supervise the patient's history, diagnostic report, and current health status regularly. In addition, the doctor can communicate directly with the patient, recommend medical examinations, and prescribe medication. This will facilitate the retrieval of information. Data can be transferred to the patient or doctors for consultation. The patient can have access to medical records that can be accessed anywhere, at any time.

Therefore, we could hope for the era of telemedicine in our country, at least by integrating telemedicine with in-person care. Medical care away from institutions might be helpful in fewer admission; checking on unnecessary testing and consultation will also prove expedient and reasonable.

"Virtual patient care could not be a substitute for routine care, but it would certainly prove to be an accompaniment to the in-person care."

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