



Risk & Danger

- RISK & DANGER, *L. DONOSO BACH*
- THE RISKS AND BENEFITS OF MEDICAL TREATMENTS, *A. FREEMAN*
- IMPROVING RISK LITERACY, *M. JENNY*
- HEALTHCARE & ENTERPRISE RISK MANAGEMENT, *P. KEADY*
- CYBER INFECTION CONTROL, *J. MUCKLOW ET AL*
- BLOCKCHAIN TECHNOLOGY THE SOLUTION TO HEALTHCARE'S DATA WOES?, *S. KLEIN ET AL*
- WEARABLES RISK, *J. BOCAS*
- RADIOLOGY SPECIALTY AT RISK? *S. BAKER*
- RISKS OF CONTRAST AGENT ADMINISTRATION, *H. THOMSEN*
- WHISTLEBLOWING IN HEALTHCARE, *P. WILMSHURT*
- WHY I BECAME A RADIOLOGY WHISTLEBLOWER, *S. CHOWDHURY*

FUTURE OF IMAGING, *P. SIDHU*

THE LATEST IN BREAST IMAGING, *G. FORRAI*

SERVANT LEADERSHIP: A JOURNEY, NOT A RACE, *L. BELTON ET AL*

HOW TO ENERGISE COLLABORATIVE THINKING, *D. MAGBOULE*

PROTECT YOUR MEDICAL DEVICE SYSTEMS, *ECRI*

MEDICAL DEVICE SECURITY

TESTING LABS LAUNCHED, MEDICAL STUDENTS & EHR USAGE *L. ROBSON*

5 BUSINESS ANALYTICS TOOLS TO IMPROVE OPERATIONS, *J. SCHWARZ*

LAB AUTOMISATION & NEW REVENUE DOORS, *S. POLHILL*

RESPONSIBLE RESEARCH INNOVATION, *P. KAPTEIN*

REVOLUTIONISING CARDIOVASCULAR MEDICINE, POINT OF CARE

FOUNDATION, *D. HILMI*

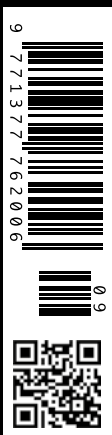
NEW INDICATIONS FOR CORONARY CT ANGIOGRAPHY, *V. SINITSYN*

ULTRASONOGRAPHY IN CLINICAL PRACTICE: NEW ROLES FOR AN OLD ACTOR?, *S. S. ÖZBEK*

ATRIAL FIBRILLATION, *R. WAKILI*

PERSON-CENTRED APPROACHES, *C. WRIGHT*

AFRICA HEALTHCARE FEDERATION, *A. THAKKER*



Revolutionising cardiovascular medicine

The European Society of Cardiology (ESC) on eHealth and how it is disrupting the usual way patients and healthcare professionals interact.



Dalia Hilmi

Staff Editor,
HealthManagement.org
dh@healthmanagement.org
@ehealthmgmt
healthmanagement.org

In recent years, the way in which one can access information in healthcare has hugely transformed, particularly for the younger generation. The European Society of Cardiology (ESC) Congress in Barcelona last month paid special attention to this theme and how the ESC has invested in its future and the ways in which healthcare professionals can benefit from the influx of innovative technologies and workshops.

eHealth opens up a new doorway in healthcare especially with the increasing demands on healthcare systems. However, the use of information and communication technologies (ICT) to treat patients, conduct research, educate healthcare professionals, track diseases and monitor public health is a concept which is not yet become normalised for some (esccardio.org 2017).

Indeed, this subject continues to draw engagement, and Professor Martin Cowie (Imperial College, London, UK) led a key session at the congress on this subject, which was attended by HealthManagement.org

Prof. Cowie explained that healthcare has become more internet-based and that patients can access expert medical advice remotely as well as by going to see a specialist. However, there are still many challenges that remain for increasing patient empowerment remotely (European Heart Journal 2017).

“The most obvious example in cardiovascular medicine would be heart failure. But it is difficult for people with a chronic condition to know exactly how to manage it, how to modify their treatment or adjust the diuretics up and down,” Prof. Cowie explained. “There have been many studies in that area to try and find some system that actually improves patient outcomes.”

“The ESC thinks that cardiologists should see how the world is changing. Some of these things are undoubtedly going to bring benefits; others may have issues. As cardiologists, we should be the ones raising these issues, because those creating digital health solutions haven’t yet thought of them.

“If there is a new technology that works well and is a better, more convenient way of delivering the best healthcare, particularly if it saves money, we should know about it, and be enthusiastic.”

He described how eHealth has been encompassing a range of technologies, from electronic medical records and electronic prescribing, to wearable technology, and remote monitoring for implantable devices. It also includes apps on smartphones;

with one such app, a device is clipped onto the back of a smartphone to perform an ECG. A PDF of the reading, via the app, can then be sent to a cardiologist for review.

“There are many digital healthcare technologies that work and make a difference. The ESC aim to normalise the concept of eHealth. Anything different can seem threatening, but we need to know about it.” Prof. Cowie said.

The ESC wants to play a leading role in all aspects of the eHealth agenda, helping to develop, assess and implement effective eHealth innovation to support cardiovascular health (esccardio.org 2017).

However, there are of course a few issues in eHealth that need to be addressed, including data security and validity, as well as how and whether outside information should be imported into a standard medical record.

According to Prof. Cowie, many new technologies have not been tested in trials, so eHealth can help with advice and empowering patients with the ability to access expertise anywhere in the world. A new technology needs to demonstrate that it will make a difference, and, that it is worth the money needed to produce it.

The ESC is also working with the European Commission, providing insights and representatives from the cardiology community to ensure the interests of cardiovascular healthcare professionals and their patients are well represented.

eHealth is expanding rapidly and is now the third largest industry in the European health sector, after pharmaceuticals and medical devices. So what can we expect and what are some of the hurdles that lie ahead?

The European Union has an eHealth action plan for 2012-2020. It provides a roadmap to empower patients and healthcare workers, to link up devices and technologies, and to invest in research towards the personalised medicine of the future. It has identified several barriers to widespread adoption of eHealth, including: limited awareness of, and confidence in, eHealth solutions; lack of interoperability; limited large scale evidence of cost-effectiveness; lack of legal clarity and transparency on data utilisation; lack of reimbursement; and regional variation in access (ec.europa.eu 2017).



REFERENCES

<https://academic.oup.com/eurheartj/article/38/7/468/3048626/The-e-health-revolution>
<https://www.escardio.org/The-ESC/What-we-do/Initiatives/eHealth-and-Cardiology>
<https://ec.europa.eu/digital-single-market/en/news/ehealth-action-plan-2012-2020-innovative-healthcare-21st-century>