



ITU/BDT Regional Economic and Financial Forum of Telecommunications/ICTs for Arab States

Session 3: ICTs and e-health services

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ICT and e-health services



- **E-health objectives and challenges**
- **Main e- health domains and systems**
- **E-health cases and benefits**





ICT and e-health services: Objectives

- To provide **better health** service and quality to the community
- To improve **health care efficiency** and accuracy
- To provide health services in **difficult to reach areas**
- To **reduce need** for Health care workforce and waiting times
- To update data and **knowledge sharing**
- To **reduce costs** per patient



ICT and e-health services: Challenges (I)

- How to **reach cross-border healthcare**, health security, solidarity, universality and equity
- How to provide **better support to chronic** disease and multimorbidity
- How to encourage **organisational changes** by promoting innovation, patient/citizen-centric care and citizen empowerment
- How to improve **legal and market** conditions for developing e-Health products and services
- How to **remove inertial** behavior on the health chain



ICT and e-health services: Challenges (II)

- How to **Reduce high child and maternal mortality Rates**
- How to solve lack of access to safe water supply and **insufficient sanitation facilities**
- How to reduce **Infectious Diseases** spread (HIV/AIDS, Tuberculosis,...)
- **How to solve lack of personnel**, institutions and medications in public health and medical systems
- How to facilitate difficult **access to health care** institutions



ICT and e-health services: Involved Organizations

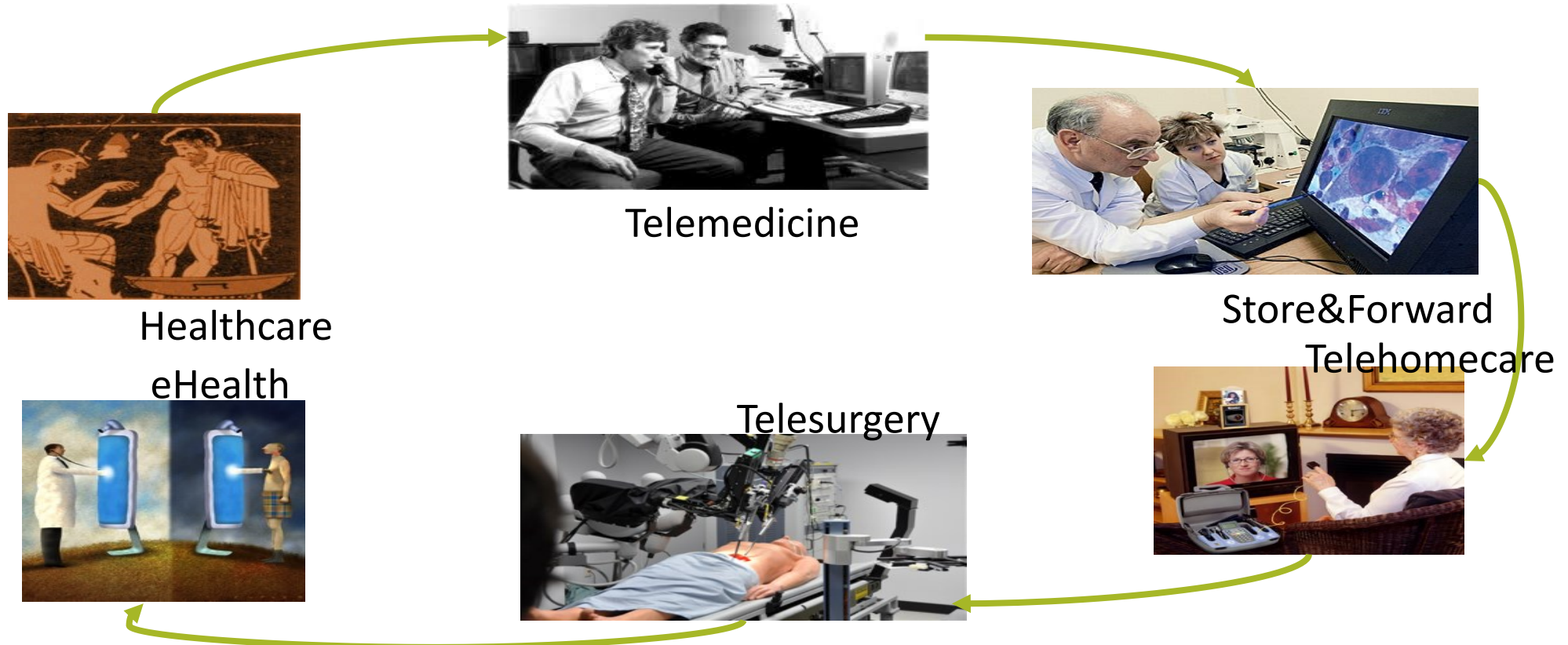
- **State** (Ministry of social affairs)
- Health care **professionals** organisations
- **Patients** organisations
- Health care **legislation**
- **Privacy** legislation
- **Social sector** organisation
- **Private sector** (health insurance)
- **Pharmacies**



ICT and e-health services

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ICT and e-health services: Evolution of health services



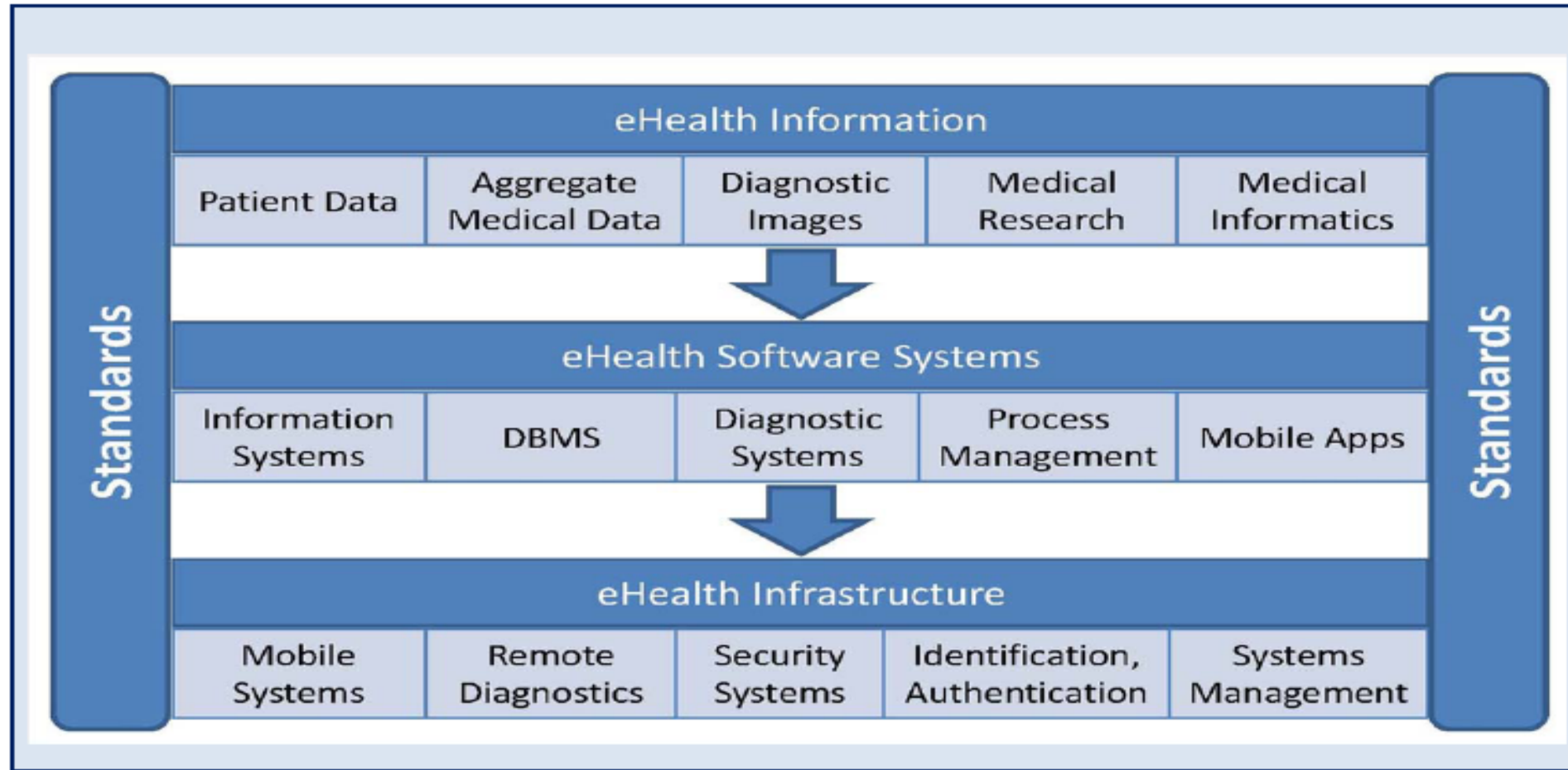
First limited projects started at the 60s
Important advances at the 80s with participation of NASA



ICT and e-health services: ICT involvement

- Communication networks, connectivity, Internet, mobile terminals, wearables and applications
- Healthcare telematics
- Medical records and data bases
- Telemedicine
- Digital imaging
- Re-organisation of the healthcare activities

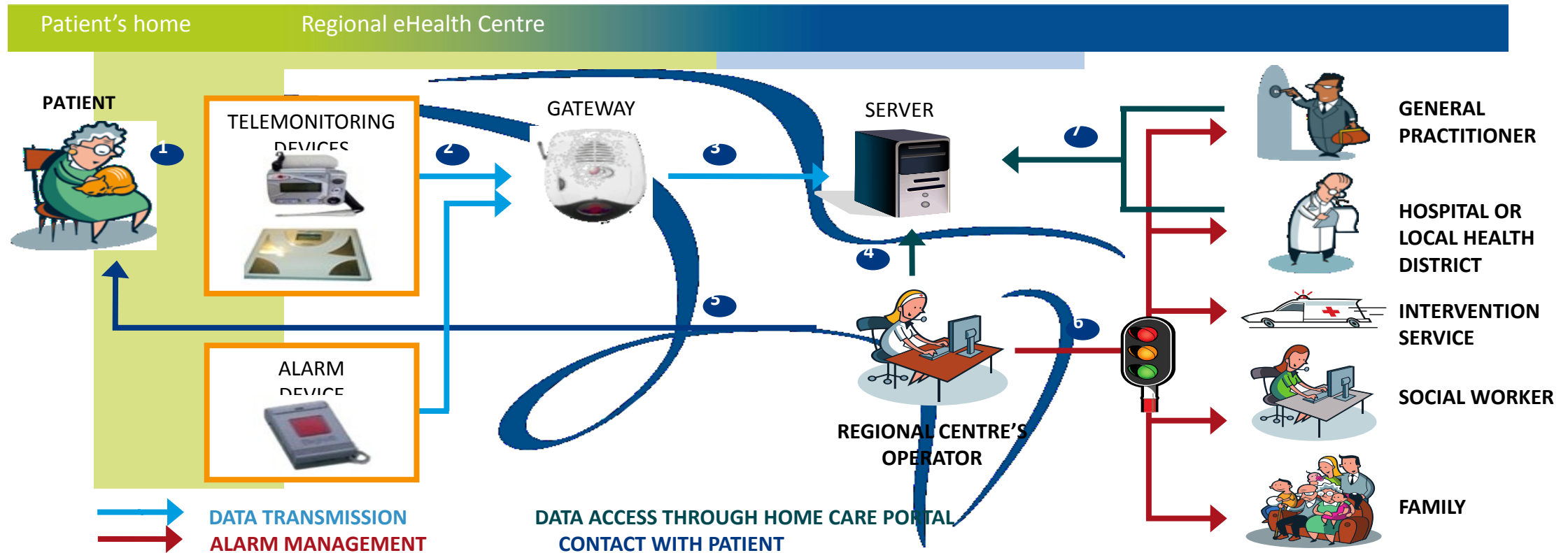
ICT and e-health services: Domains and standards focus



DBMS: Data Base Management Systems **Source:** ITU-T Technology Watch, Standards and e-Health

ICT and e-health services: Telemonitoring of chronic patients

Example of an ICT Network that allows physician to manage the chronic patient (COPD, Diabetes, CVD) in remote way



COPD: Chronic Obstructive Pulmonary Disease
 CVD: Cardio Vascular Disease

Source: CESI- Confédération Européenne des Syndicats, Academy

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ICT and e-health services: Technical subsystems

- **Connectivity**
- **Security** and en encryption with PKI
- **Authentication**
- **Databases** (certified sources)
- **Naming systems/** defining terms, codes, ...
- **Portal site**
 1. a search engine
 2. integrated users- and access management
 3. a content management system
 4. managing logins
 5. personal electronic mailbox for each health care worker
 6. time stamping



ICT and e-health services: Legal aspects

Laws and regulations now based on paper

- Progressively more understanding for **electronic documents**
- Protection of the **individual's privacy**
- Electronic **signature**
- **Specific laws** required, otherwise: blocked

(i.e.: telemedicine vs. recognised intervention requiring physical presence)



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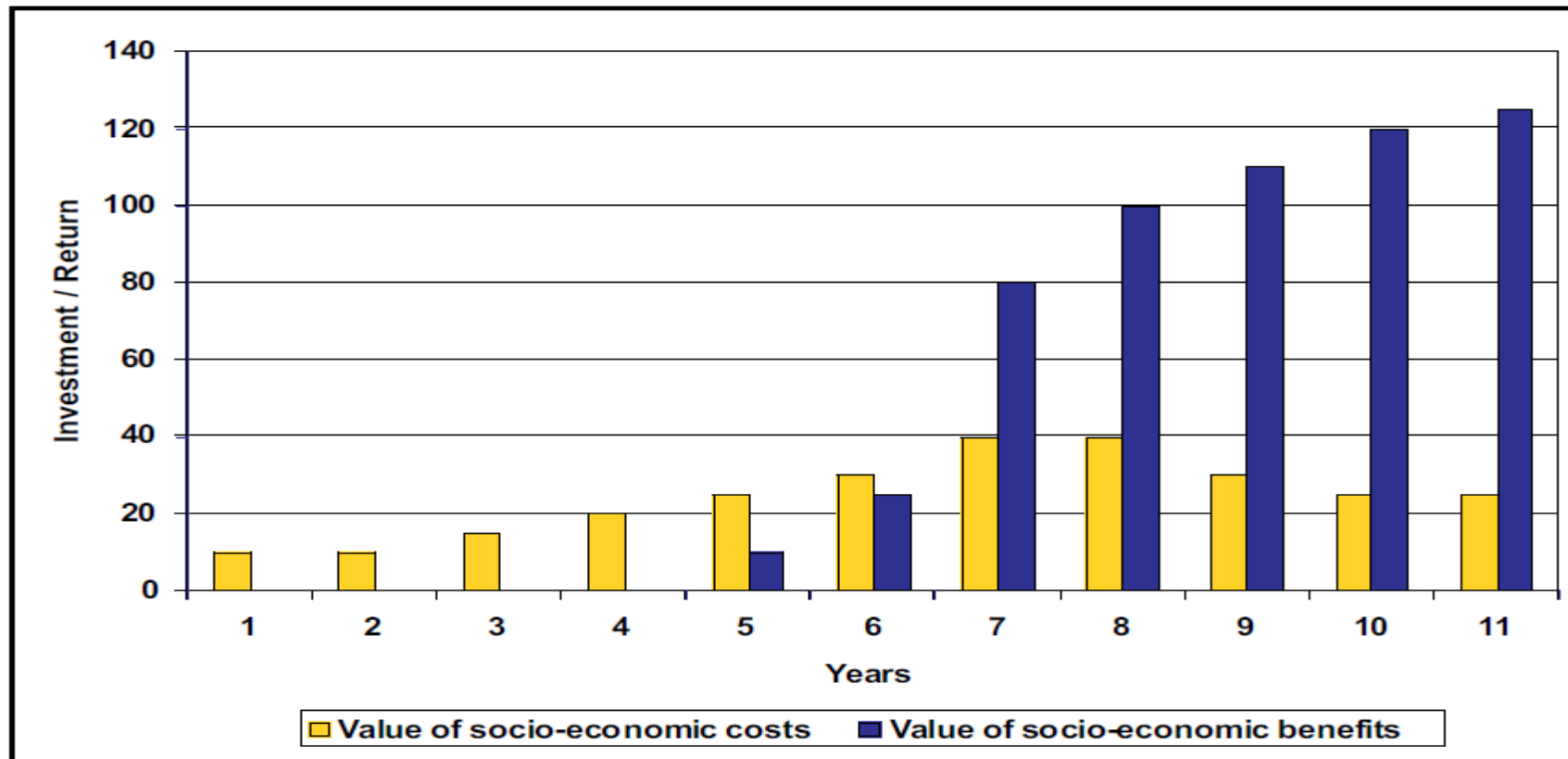


ICT and e-health services: E-health in Europe

- E-health included on the Ministerial agenda
- Activity on research
- Participating on the European and International Standards
- Effective field realisations
- Transnational projects:
 - *European Patients Smart Open Services epSOS* (prescriptions and summary records)

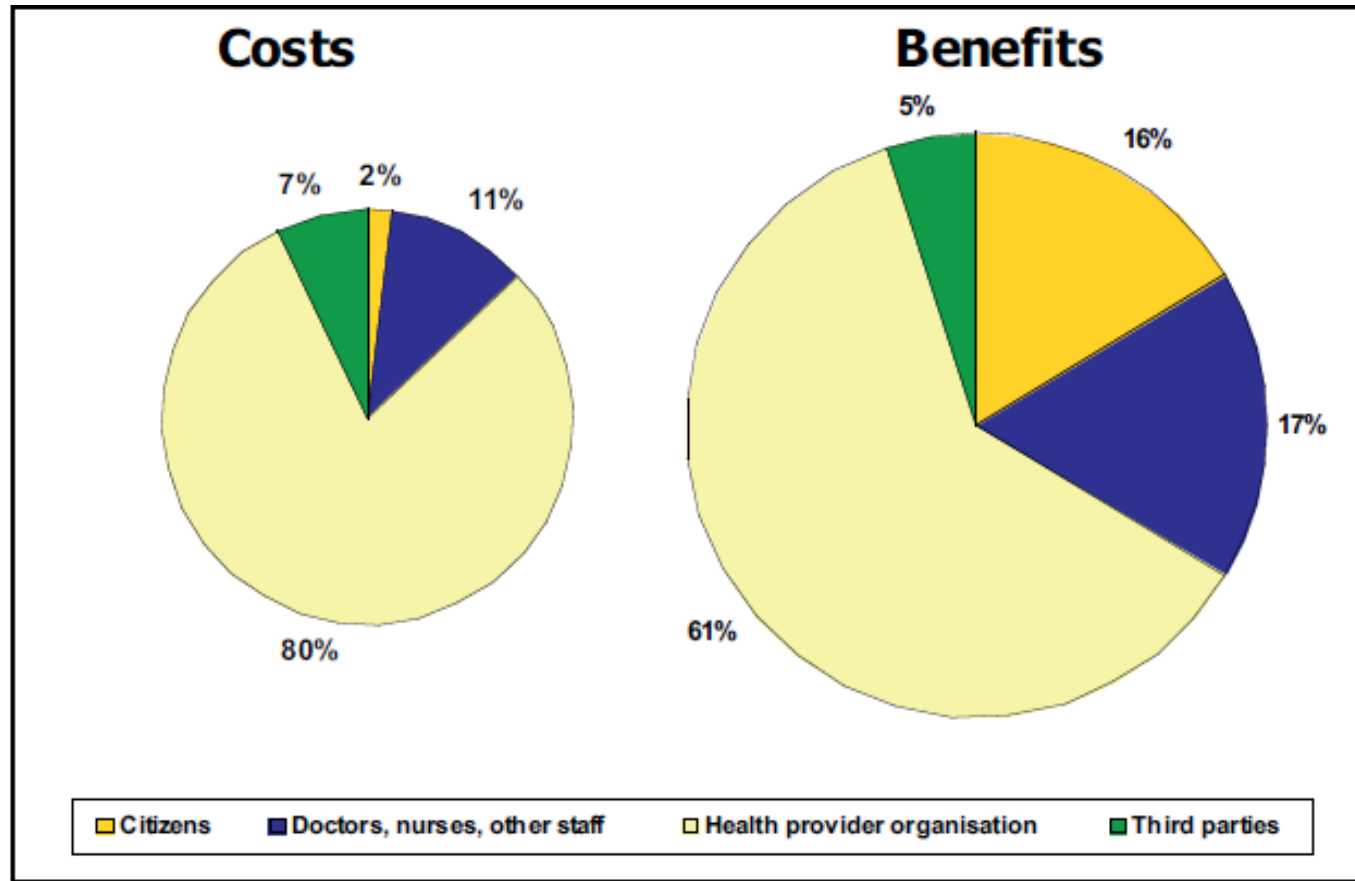
ICT and e-health services: E-health in Europe: Benefits

The **economic benefits** of implemented e-Health Records (EHR) at ten European sites



Source: European Commission: EHR IMPACT study, 2010

ICT and e-health services: E-health in Europe: Benefits

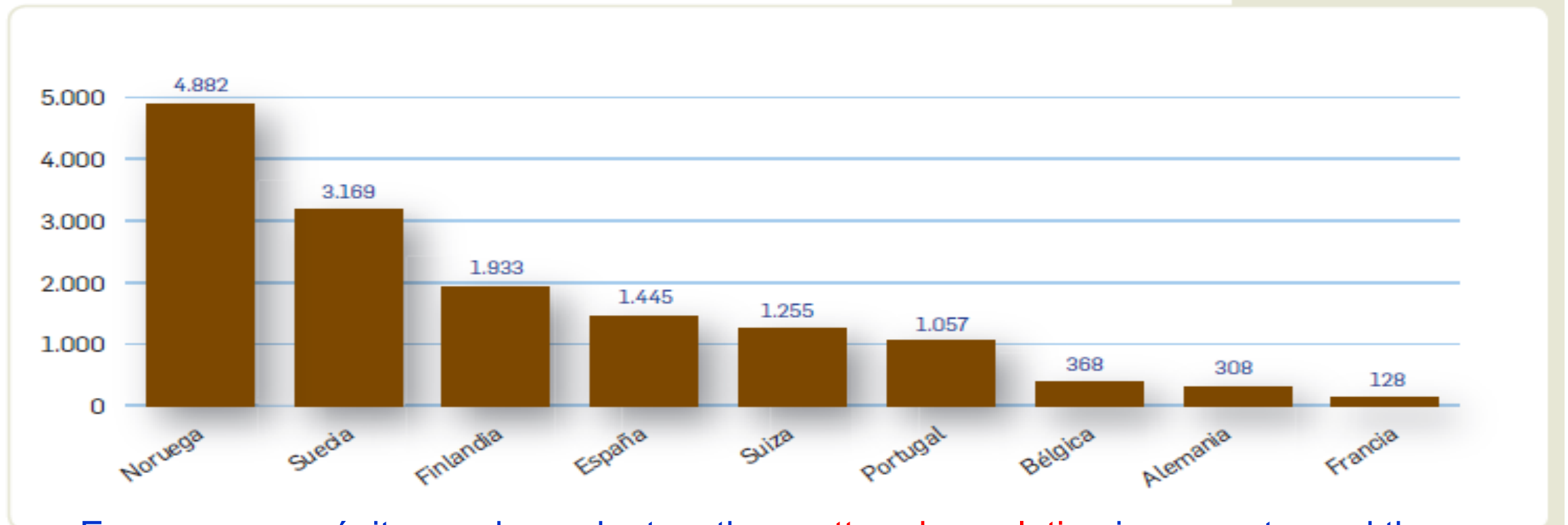


Average distribution of costs and benefits per involved group in the implemented e-Health at ten European sites

Source: European Commission: EHR IMPACT study, 2010

ICT and e-health services: E-health in Europe: Expenses

E-health **expenses** per cápita in 2011 (euros) by Eurostat (EU)



Expenses per cápita are dependent on the **scattered population** in a country and the degree of systems **modernization**

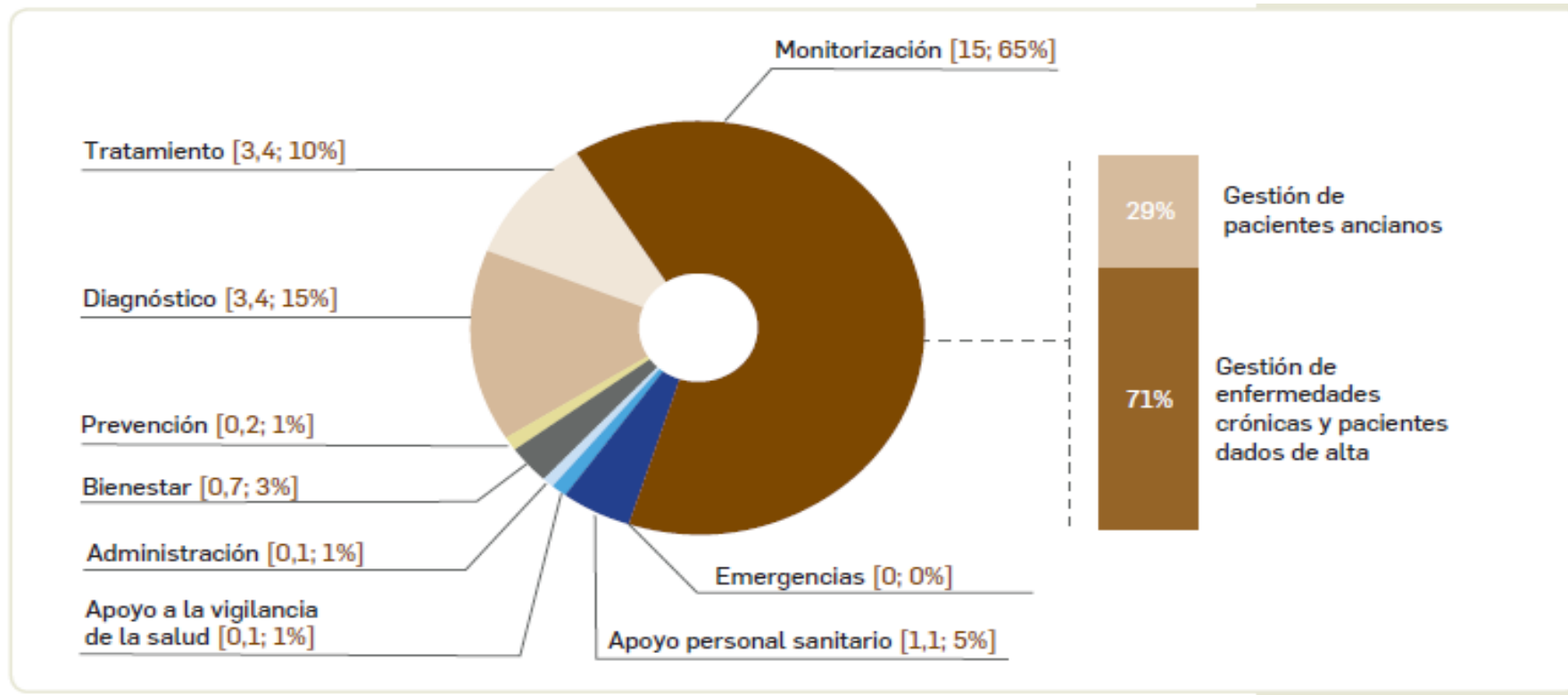


ICT and e-health services: World

- World Health Organization (WHO): Report and **working group**
- World wide initiatives
 - Open Clinic vs Open Medical Record System (**MRS**)
 - **Réseau en Afrique** Francophone pour la Télémédecine), (Geneva Univ. Hospital + Africa)
 - Eb@le-santé at République Démocratique du **Congo**
- Activity on **Standards**
- Effective **field realizations** versus national policies

ICT and e-health services: World

m-health overall global market distribution of expenses per service type in billions of dollars. PWC report for the EU



Source: PWC socioeconomic impact of mHealth. Assessment for the EU, 2017



ICT and e-health services: Case in Italy-Veneto region

Digitalization and Management of clinical reports

ICT allows to **eliminate paper** for clinical report, guaranteed legal validity (signature, certification, storage, distribution, extraction, conservation, delivery via on line)

Results:

- **Less trips**: 120 M€/years saved for citizens
- Reuse of human resource (33)
- Opportunity to process or **share data** in order to better treat the patient
- 60% of **downloaded clinical reports**



ICT and e-health services: Case in Italy-Veneto region

Telemonitoring of chronic patients

- 3,332 enrolled patients in Veneto Region
- Over 7,000 enrolled patients at European level
- From 10 to 23 involved LHA in Veneto Region
- Clinical Staff involved:
 - Cardiologists
 - Electro physiologists
 - Pulmonologists
 - Diabetologists
 - Nurses
 - GPs

LHA: Local Health Authority



ICT and e-health services: Case of Tunisia telecom

Tunisia Telecom started in 1996 and has focused on the preparation of **data centers** to host many TT and customers' platforms

- **Kasbah Data Center (First TT DC)**
 - Area: 280 m², 92 42U Racks
 - **Redundant power** and redundant air conditioning
 - Hosts TT **SaaS platform** and **Cloud Platform** (nearly)
 - Used for Corporate Housing TT offers
- **Carthage Data Center**
 - A second Data Center (For load balancing) : Ready since October 2013
- **Kairouan Data Center**
 - Data Centre for «Disaster Recovery»



ICT and e-health services: Case of Tunisia telecom

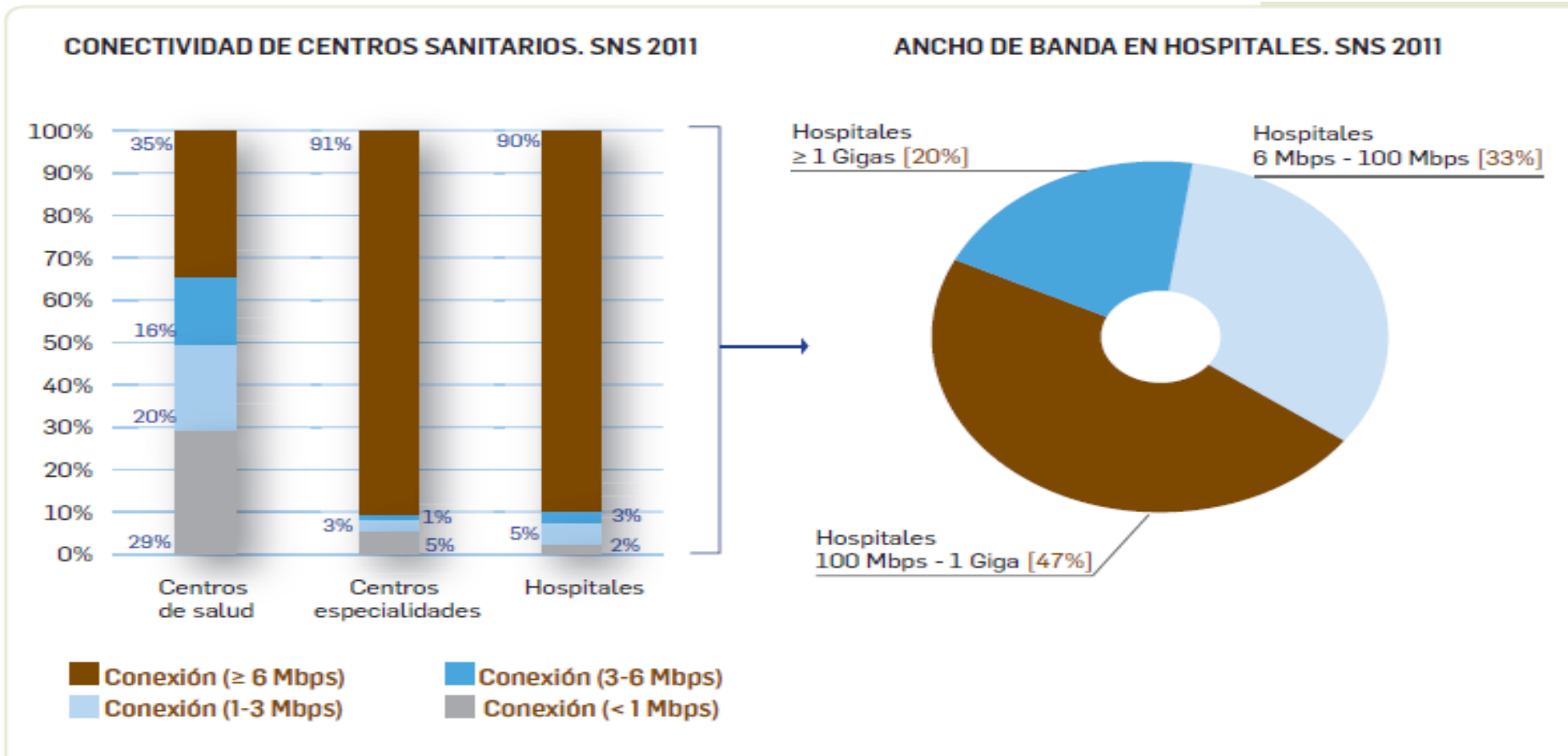
- **Many services are provided within the current technical solutions**
 - Voice supplementary services
 - Directory
 - Virtual mobility
- **e-health solution is scalable and able to support more VAS**
 - One unified number
 - Telepresence
 - Webex for healthcare
 - Audio and video Conference
 - WiFi - RFID



ICT and e-health services: Case of Spain

- Medical infrastructure with high capillarity reaching all the provinces and villages at **three levels**: Specialized centers, Hospitals, Primary health centers with a total of **more than 4000 centers**
- **Started with Telemedicine at 1996 for military projects** by Videoconference
- Major services with priority to
 - Electronic **prescription**
 - Chronic patients **follow-up**
 - Remote Monitorization** for Diabetes and heart care
 - Intercenters access** to patients databases
 - Diagnosis
 - Emergency** medical aid
 - Support** to health professionals

ICT and e-health services: Case of Spain



Today bandwidth has increased by on order of magnitude

Source: Informe red.es, las TIC en el sistema nacional de salud

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ICT and e-health services: Case of Spain

Innovative Project SAVANA (directed to professionals)

- **Medical information** and diagnosis **duplicating every 5 years** (200 times the doctors capability to follow-up)
- **Savana** gather, analyze, resume and presents medical information based on a large set of clinic histories for a further **reutilization**
- **Standard terminology and trained statistics** with medical know-how and evolution of treatments applied to real time support
- **Advanced research on Artificial Intelligence (AI)** and **Analytics** applied to the **Big Data processing** on the health sector to help **robust diagnosis** based on thousand of cases: access to important information in **15 seconds**



ICT and e-health services: Case of Spain

Innovative Project Mediktor (directed to patients)

- Artificial Intelligence applied to the prediction of illness pre-diagnosis to help patients in identifying potential problems, focus on specialist to be addressed and advance information while waiting for attention .
- Presented this year at the Mobile Worldwide Congress by the collaboration of two hospitals in Barcelona and Madrid
- Applied up to now to more than 1,3 million evaluations with a success rate higher than 90% in the performed diagnosis .



ICT and e-health services: Benefits

- **Benefits on Personal Access** by any device: Smartphone, tablet or computer
- **Benefits on Errors reduction** with electronic records, you can check to make sure all information is correct
- **Benefits on communications** by Patient Portals to medications, doctor notes, test, etc.
- **Benefits on access to Doctors** from anywhere and remote areas particularly in emergency situations
- **Benefits on Information Exchange** for all of your health information to be in the same place
- **Benefits on Maintenance Reminders** can help the doctor and office staff keep track of when you are due for preventive and periodical examinations services
- **Benefits on Medication Interaction** by quick scan of the the medications a person is taking and determine if there are any potential drug interactions
- **Benefits on Big Data Analytics** by the great potential for this data to look at a broader population of people or Big Data
- **Benefits on Health Care Savings** electronic health records may translate to cost savings for the health care system as a whole and eliminate duplications at various doctor offices



ICT and e-health services: Standards benefits

Ensure **interoperability** among healthcare systems

- facilitate information exchange
- avoid single vendor lock-in

Decrease the risks related to new technologies development

Minimize costs by stimulating market competition and eliminating expensive and personalized solutions

Widen the spread of **solutions' adoption**

Address **specific concerns about e-Health issues** (privacy, security, patient recognition,...)



ICT and e-health services: Outcome

- E-health systems and applications are the **natural evolution** of current processes in order to:
 - Benefit from the **ICT capabilities**
 - **Reduce high child and maternal mortality rates**
 - Provide **important services to scattered** and remote populations
 - Apply the **latest health advances** to anybody
 - Reduce health **provision services costs**