LETTERS TO THE EDITOR

WhatsApp: a telemedicine platform for facilitating remote oral medicine consultation and improving clinical examinations—some considerations

To the Editor:

We would like to congratulate Dr. Petruzzi and Dr. De Benedittis for their study and Pentapati et al. for raising the debate regarding remote oral medicine consultation. We believe that the role of information technology in assessment remains debatable and that this gap has led to a lack of scientific-based evidence. Nonetheless, our preliminary and recent experience revealed some meaningful improvements in information technology used to assess oral lesions and provide clinical support for physicians and general dental practitioners. Our service, EstomatoNet, offers oral assessment and management recommendations to primary health care workers who have no access to oral medicine or oral medicine specialists. This service is an initiative of TelessaúdeRS-UFRGS, a project developed by the Brazilian Ministry of Health, Rio Grande do Sul State, in collaboration with the Universidade Federal do Rio Grande do Sul. The service aims to improve primary health care quality and avoid unnecessary referrals to specialized services and, consequently, reduce referral queues.

Unlike the experience reported by Petruzzi and Benedittis,² our service relies on a cloud-based platform that stores information related to each case. In our opinion, this structure is better for organizing data and enabling auditing, which are important measures for distant assessment services. In accordance with the authors' opinion, before service launch, we were not confident that it was feasible for the service to support assessments via smartphone photos. To increase the possibility of success, we created a protocol with basic clinical information and a photo recording tutorial for applicants using the service. After a tele-assessment report, offered by EstomatoNet, a 30% reduction in the intent of applicants to refer patients to specialists was observed. Furthermore, approximately 90% of applicants were either very satisfied or satisfied with the service. We will endeavor to further assess the accuracy of the service in order to determine its importance.

In our initial experience, we had no specific requirements with regard to the devices used. Therefore, a certain number of poor-quality photos submitted for evaluation were expected. However, among the first

100 evaluated cases, 94% of photos presented good quality for evaluation. This corroborates the findings of Petruzzi and Benedittis,² who considered few photos to be of poor quality and not suitable for analysis. Therefore, we disagree with Pentapati et al.¹ and assume that the type of device used does not interfere with photo quality and the possibility of evaluation.

Vinicius Coelho Carrard, DDS, PhD
Marco Antonio Trevizani Martins, DDS, PhD
Department of Oral Pathology School of Dentistry
Universidade Federal do Rio Grande do Sul (UFRGS)
Porto Alegre
Brazil

Cynthia G. Molina-Bastos
Family Physician
TelessaudeRS-UFRGS
Porto Alegre
Brazil

Marcelo Rodrigues Gonçalves
Professor
Vice-coordinator of TelessaúdeRS — UFRGS
Department of Social Medicine
School of Medicine
Universidade Federal do Rio Grande do Sul (UFRGS)
Porto Alegre
Brazil

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App, Cloud, and more: in reply to Prof. Coelho Carrard and Prof. Trevizani Martins

In reply:

We thank Professors Coelho Carrard and Trevizani Martins for their consideration of our article and

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appreciate their comments. Their service, EstomatoNet, confirms the importance of data sharing in oral medicine in order to provide an initial assessment of and support for patients and health care workers who do not have access to oral medicine or oral medicine specialists.

Using a cloud-based platform could improve the effectiveness of tele-assistance offered to colleagues and patients to reduce diagnostic delay related to specialists (the so-called *doctor delay*) and to share submitted cases with other specialists.

Recently, a new specific application for smartphones dedicated to oral medicine has been launched: DoctorOral, available in the iTunes and Google Play app stores. It is a free app that aids patients and general dentists to define oral lesion and share opinions among a panel of experts.

The evolution of medicine (not only oral medicine) cannot ignore the data-sharing phenomenon. Awareness and correct use of clinical data exchange will be

essential for the health services offered to doctors and patients in the so-called global society.

Massimo Petruzzi, DDS, PhD
Michele De Benedittis, MD, DDS, PhD
Università degli Studi di Bari "Aldo Moro"
Clinica odontoiatrica -Sezione di Malattie
odontostomatologiche
Piazza Giulio Cesare 11
70124 Bari
Italy
massimo.petruzzi@uniba.it

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