An Affordable, Usable and Sustainable Preventive Healthcare System for Unreached People in Bangladesh

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Introduction

Through aggressive IT development in medicine, health care in developing countries will possibly take a different path than advanced countries. We are conducted a pilot study of a preventive medical service combining e-health checkup and telemedicine in developing countries to evaluate stratification rules and short-term effects of the intervention prior to a large scale research study.

Methods

We provided e-health checkup in a village and in several companies in Bangladesh. Individual health condition was automatically categorized into 4 grades: Green (healthy), yellow (caution), orange (affected), and red (emergent) by international diagnosis standards of diseases. We provided telemedicine for orange and red, and tele-prescription for hypertensive patients. We rechecked orange and red subjects 2 months later.

Results and Conclusions

The first checkup was provided to 791 subjects and categorized green15%, yellow66%, orange17%, and red3%. At the followup, 96 (62% of orange and red) were visited and categorized into green2%, yellow43%, orange43%, and red13%. The result shows the system’s potency to deliver effective healthcare in developing countries. We completed 4919 first visits by November 2012. We will continue this e-health service in its second annual survey in June 2013.

References


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