



EmERGE

mHealth platform



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TITLE:

EmERGE Project - Community responses about access to and importance of telemedicine by PLHIV and clinical staff in the EU

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BACKGROUND:

As part of the EmERGE project, EATG conducted a survey in July 2019 about the frequency and purpose of HIV clinic visits amongst PLHIV and HIV clinic staff in the EU. The survey included questions about access to telemedicine (e.g. mobile and web-based services). The overall aim was to understand the diversity of practices and the context in which telemedicine solutions were being rolled out across EU countries.

METHOD AND METARIALS:

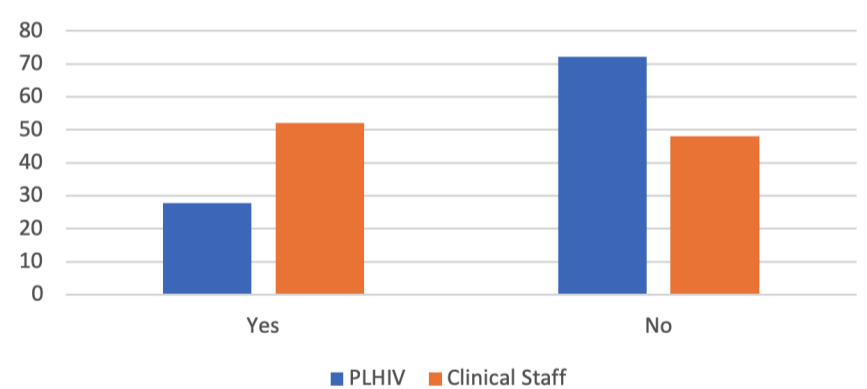
Online surveys to PLHIV and clinical staff containing 10 questions were published in 16 European languages and disseminated widely by EATG partners' community networks and EACS. Eligibility criteria for PLHIV respondents were being stable on ARV therapy (with an undetectable viral load for at least 6 months). Clinical staff were defined as those treating PLHIV stable on ARV therapy. The data were collected and processed anonymously.

RESULTS:

A total of 407 responses from PLHIV from 26 countries and 153 from clinical staff from 22 countries were received.

- In total, 27.8% (n113/407) of PLHIV indicated that they had access to telemedicine services compared to 52% (n78/153) of clinical staff (Graph1).
- Using a chi-square test, clinical staff access to telemedicine services was found to be significantly higher than the access levels of PLHIV.
- Over all regions, telemedicine services were mostly found to be either very important or quite important to healthcare by both PLHIV and clinical staff, with no significant differences between the median answers of the two groups.

Access to telemedicine by PLHIV and clinical staff (%)



(Graph1)

CONCLUSIONS:

In general, telemedicine solutions are found to be important to healthcare for those who have access to them, yet only a quarter of PLHIV and one half of clinical staff reported such access. Reported access between the two populations varies extensively. Given the changes to service delivery instigated rapidly in the context of COVID-19, the use of telemedicine and access to telemedicine should be explored through further research which should additionally capture the reasons influencing access discrepancies such as regional differences, healthcare structure, awareness and personal preferences, as these factors may impact the effective roll-out and uptake of telemedicine solutions in a wider European context.

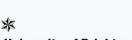
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• European Aids Treatment Group (EATG) - Germany



• University Of Brighton - United Kingdom



• Institute of Tropical Medicine Antwerp - Belgium



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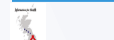
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