

# Home based telehealth does not improve quality of life for patients with long term conditions

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Telehealth does not improve generic health related quality of life or psychological outcomes for patients with long term conditions over 12 months, finds a study published on *BMJ* website today.

As such, the researchers say "it should not be used as a tool to achieve improvements in generic health related quality of life or [psychological outcomes](#)."

Telehealth uses technology to help people with [health problems](#) live more independently at home. For example, blood pressure or [blood glucose levels](#) can be measured at home and electronically transmitted to a health professional, reducing the need for hospital visits.

For long term conditions, telehealth has been promoted to reduce [healthcare costs](#) while improving health related quality of life, but evidence to support this is mixed.

So, a team of UK researchers set out to assess the impact of second generation home based telehealth on generic health related quality of life, anxiety and [depressive symptoms](#) over 12 months in patients with long term conditions.

The study is part of the Whole Systems Demonstrator Trial - one of the largest and most comprehensive investigations of telehealth and telecare

ever conducted.

Just over 1,500 patients with COPD, diabetes or [heart failure](#) from three regions of England (Cornwall, Kent and London) took part in the study.

Generic health related quality of life, anxiety and depressive symptoms were assessed using recognised scoring scales at the start of the study and again at four and 12 months. Results for those receiving home based telehealth were compared with those receiving usual care.

Overall, the findings show that, compared with usual care, second generation telehealth had no effect on generic health related quality of life, anxiety, or depressive symptoms for patients with [chronic obstructive pulmonary disease](#), diabetes, or heart failure over 12 months.

Further analyses across different measures did not alter the results, and the findings suggest that concerns about potentially deleterious effect of telehealth are unfounded for most patients, say the authors.

"More research is required to understand the many potential beneficial and harmful mechanisms by which telehealth could affect patient reported outcomes," they conclude. However, our findings strongly suggest no net benefit from telehealth; therefore, it should not be used as a tool to improve health related QoL or psychological outcomes.

**More information:** [www.bmj.com/cgi/doi/10.1136/bmj.f653](http://www.bmj.com/cgi/doi/10.1136/bmj.f653)

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