

Patient portals could widen health disparities

April 28 2015

Online sites that offer secure access to one's medical record, often referred to as patient portals, are increasingly important for doctor and patient communication and routine access to health care information. But patient portals could widen the gap in health disparities among the most vulnerable patients, according to a new Northwestern Medicine study.

Patients with low <u>health literacy</u>, less education and who are African American were much less likely to use these patient portals compared with <u>white patients</u> and those who were more health literate. Thus, they lose the opportunity to easily engage their doctor about health concerns or medications, to quickly refill prescriptions and get lab results.

"Patient portals that offer access to electronic medical records could help individuals better manage their <u>health care</u> and personal needs, but people with less access to and comfort with computers are at risk of not receiving these benefits and will eventually be left behind," said Michael Wolf, corresponding study author and a professor of medicine at Northwestern University Feinberg School of Medicine.

"It's a big concern as the <u>patients</u> that already are, perhaps, less engaged in their health and experiencing worse health outcomes may be further marginalized," Wolf said.

The study was published April 25 in *Journal of the American Medical Informatics Association* and was presented at the Annual Society of Behavioural Medicine Conference in San Antonio, Texas.



The study showed white patients were 2.5 times more likely to be registered as portal users than African American patients. Patients with good health literacy skills were 3.5 times more likely to be registered with the portal than those who didn't have those skills.

"If we now further complicate what it means to be a patient by asking people to be engaged outside the doctor's office—on the web or by mobile phone—and if these same groups of patients are not as capable or ready to assume these new roles, we may further exacerbate the disparities that already exist," said co-author Sam Smith, who worked on the paper when he was a <u>postdoctoral fellow</u> student at Feinberg. He is now a cancer research UK postdoctoral fellow at Queen Mary University of London.

These patients may experience delays in getting information and instructions about their health care, and their doctors may be less informed about their conditions.

Underserved populations may need greater support in using online patient portals for <u>patient care</u>, the authors said. Patients may need simple instructions on how to register for an account, as well as support in how to use the available functions.

For the study, researchers linked existing cohort data from a National Institutes of Health (NIH) funded study to routinely collected patient-level data at Northwestern Memorial Hospital.

The NIH study is LitCog (Health Literacy and Cognitive Function among Older Adults). It is a cohort of community dwelling older American adults recruited from a Northwestern internal medicine clinic and five federally qualified health centers (FQHCs) in Chicago.

For this paper, only the Northwestern patients were included because no



patient portal was available at the FQHCs. This left a sample of 534 adults aged 55 to 74 years at the baseline interview. The cohort data were linked to patient portal usage data recorded between 2006 to 2014.

Provided by Northwestern University

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