

# Surgical Skype

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In a country with limited resources, might social media be useful in the post-surgical care of patients in their own homes? That is the question researchers from India hope to answer with their research just published in the *International Journal of Telemedicine and Clinical Practices*.

Naval Bansal of Fortis, in Mohali, India, and colleagues Sanjay Kumar Yadav, Saroj Kanta Mishra, Gyan Chand, Anjali Mishra, Gaurav Agarwal, Amit Agarwal, and Ashok Kumar Verma of the Department of Endocrine Surgery, at the Sanjay Gandhi Post Graduate Institute of Medical Sciences, in Lucknow, India, discuss their feasibility study in this context. The team followed more than one hundred thyroidectomy [patients](#) who were offered some of their follow-up care via Microsoft's well-known voice over internet (VoIP) application, Skype. In detail, 76 of the patients had Internet access and of those 51 opted for conventional follow up and 25 patients consented to have tele-follow up using the software.

The team found that distance from the treating hospital was the most significant factor in choosing Skype follow up. Moreover, those who opted for Skype tended to be better educated, with a degree or postgraduate degree. Everyone who opted for Skype follow-up saved money and work days by avoiding the need to take time to re-visit the hospital. "Even in resource constrained countries, [social media](#) can provide an alternative mode of healthcare delivery," the team suggests. There remains a need to instill confidence in such an approach for the less well-educated and for those who see face-to-face care as a better choice.

Of course, there will be times when a Skype follow-up would be inadequate at which times patients would have to visit their healthcare worker or receive physical as opposed to virtual care in their home.

**More information:** Naval Bansal et al. Post-surgical continuity of care from home using social media in a resource limited country, *International Journal of Telemedicine and Clinical Practices* (2019). [DOI: 10.1504/IJTMCP.2019.100040](https://doi.org/10.1504/IJTMCP.2019.100040)

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