

Making house calls when everyone's staying home: COVID-19 pandemic in Tokyo

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The COVID-19 pandemic has changed the way people eat, work, shop and go to school. Now, researchers from Japan have found surprising differences in the way people use healthcare services—including house

calls from doctors.

In a study published this month in BMC Emergency Medicine, researchers from the University of Tsukuba have revealed that patterns in illness type and severity did change during the [pandemic](#)—with unexpected trends that may tell us about how people use [health care services](#) when personal contact carries inherent risk.

In Tokyo, private after-hours house call services (AHHC) provide in-home [medical service](#) outside of regular hospital hours. But as the COVID-19 pandemic developed in Japan, filling hospital rooms and straining [healthcare services](#), this service began to take on a new dimension. Would people with cold and flu-like symptoms use AHHC services more than before?

The largest AHHC service in Japan (Fast Doctor Ltd.) had large amounts of anonymized [scientific data](#) available to compare in a retrospective cohort study. By comparing data from before the pandemic (December 2018 through April 2019) against that from the pandemic exposure period (December 2019 through April 2020), the University of Tsukuba researchers were able to draw statistically significant conclusions about the changes in numbers and types of cases and calls. While the proportion of patients with moderate or [severe illness](#) increased during the pandemic, the proportion of calls owing to cold and fever symptoms went down.

"We initially thought that people with cold and fever symptoms might be hesitant to visit hospitals during the pandemic, driving up the number of calls to house call services," says lead author of the study Ryota Inokuchi. "This would also serve to alleviate some of the burden on emergency departments."

Of the more than 16,000 patients who contacted the AHHC [service](#) in

the two study periods, 82.6% in the pre-pandemic control group had fever or cold symptoms, versus 74.2% in the pandemic period. However, the proportion of patients with symptoms categorized as "severe" increased from 0.2% to 0.9% in the pandemic, while the proportion of patients with "moderate" symptoms nearly doubled in the pandemic, from 28.7% to 56.7%.

"The decrease in calls owing to fever and colds was clear and significant, possibly because of lower seasonal flu activity due to school closings and lockdowns," explains Professor Nanako Tamiya, senior author. "But an important question is to what degree reluctance to use medical services during the pandemic played a part, and whether this contributed to the observed increase in case severity."

Early detection is critical for treating COVID-19, and many other diseases as well. When this study was conducted, however, Tokyo's hospitals were dangerously strained, operating at 80% capacity. Given the risk of delays in seeking medical care, AHHC services may play a critical role in helping national healthcare systems handle these emergencies if health authorities and governments can develop policies and encourage social behaviors promoting their use.

More information: Ryota Inokuchi et al, Changes in the proportion and severity of patients with fever or common cold symptoms utilizing an after-hours house call medical service during the COVID-19 pandemic in Tokyo, Japan: a retrospective cohort study, *BMC Emergency Medicine* (2021). [DOI: 10.1186/s12873-021-00458-8](https://doi.org/10.1186/s12873-021-00458-8)

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