

Remote patient monitoring may reduce need to hospitalize cancer patients

June 4 2021, by Joe Dangor

A study by researchers at Mayo Clinic Cancer Center has found that cancer patients diagnosed with COVID-19 who received care at home via remote patient monitoring were significantly less likely to require hospitalization for their illness, compared to cancer patients with COVID-19 who did not participate in the program. Results of the study were presented Friday, June 4, at the American Society of Clinical Oncology Annual Meeting and published in the *Journal of Clinical Oncology*.

"For our study, we evaluated 224 Mayo Clinic patients with cancer who were found to have COVID-19 through standardized screening prior to receiving [cancer treatment](#), or due to symptoms or close exposure," says Tufia Haddad, M.D., a Mayo Clinic medical oncologist and the study's senior author. Researchers followed the patients March 18-July 31, 2020.

Dr. Haddad says that at the outset of the COVID-19 pandemic, Mayo Clinic rapidly developed and implemented a remote patient monitoring program to support Mayo Clinic patients who were diagnosed with COVID-19 and at risk for [severe illness](#).

The program featured the use of in-home technology to monitor [oxygen levels](#), [vital signs](#) and symptoms of COVID-19 infection, and a centralized virtual care team of nurses and physicians to manage patients. Dr. Haddad says the program had served more than 8,000 patients in rural and urban locations across 41 states by November 2020.

Researchers found that among patients who did not require urgent hospitalization at the time of their COVID-19 diagnosis, those whose care was managed by the remote patient monitoring program were significantly less likely to require hospitalization for their illness, compared with those who were not managed by the program.

"After balancing the two groups of patients who were or were not managed by the remote monitoring program for factors known to impact COVID-19 outcomes, such as old age, male gender and obesity, there was a 78% reduction in the risk of hospitalization (a 2.8% risk for patients on the remote monitoring program, compared to 13% for patients not on the program) attributed to the remote monitoring program," says Dr. Haddad.

In addition, Dr. Haddad says that when [cancer patients](#) who had been managed through the remote [monitoring program](#) were hospitalized, they experienced fewer hospitalizations of more than a week, ICU admissions and deaths.

"It is possible that our results were due to early detection of adverse symptoms and vital sign trends that enabled earlier care interventions to alter the trajectory of disease." Dr. Haddad is encouraged by the results, but she cautions that further research will be necessary to confirm them.

Provided by Mayo Clinic

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