

# Remote symptom reporting systems for patients may reduce outpatient waiting lists

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Digital systems for patients to monitor and report symptoms remotely may offer a solution to reduce outpatient waiting lists, according to a new review published by the *Journal of the Royal Society of Medicine*.

The review, led by researchers from the Centre for Patient Reported Outcomes Research (CPROR), Institute of Applied Health Research at the University of Birmingham, looked at international examples of the use of electronic patient-reported outcome (ePRO) systems to triage [clinical care](#).

ePROs allow [patients](#) to fill out questionnaires at home or location of their choice, with the results sent back to the clinician in near [real-time](#) to use in clinical decision-making. Studies of various groups of patients, including those with epilepsy, sleep apnea, type 1 diabetes, cancer, [rheumatoid arthritis](#) and HIV, were included in the review. In Denmark, Ambuflex (a generic ePRO system) has been used in over 40,000 patients across a range of chronic conditions and has led to substantial reductions in outpatient appointments. In epilepsy clinics, the system led to reductions of up to 48% in in-person outpatient appointments.

Lead author Dr. Lee Aiyegbusi, Associate Professor and Deputy Director at CPROR, said, "The use of PROs is well established in research settings to evaluate the effectiveness, [cost-effectiveness](#) and tolerability of interventions from a patient perspective. Clinicians are now interested in using patient-level symptom reporting for the clinical management of individual patients in routine practice."

The review provides evidence to support the implementation of ePRO systems for outpatient care, including significant reductions in outpatient appointments without compromising patient outcomes or satisfaction with care.

Dr. Aiyegbusi said, "ePROs for outpatient care could facilitate the tailoring of care to patient needs. Stable patients can be monitored remotely using ePROs, thereby avoiding unnecessary check-ups in outpatient clinics and associated costs, such as travel and time off work, without lowering the quality of treatment. This efficient use of scarce

health care resources could free up outpatient clinics for patients with high symptom burden or concerning symptoms, so they can be seen more quickly."

The authors say it is important to acknowledge that a proportion of patients, especially the elderly, may prefer face-to-face or telephone outpatient consultations regardless of their [health status](#) and may be concerned about or averse to the use of ePROs as a triaging tool.

They also say the findings demonstrate why it is crucial that the use of ePROs for outpatient care is carefully considered, planned and implemented to ensure that people from underserved populations are not further disadvantaged.

They conclude, "The use of ePROs in [outpatient care](#) could potentially allow a more responsive health care system, reduce demand for clinic appointments, reduce time to care with associated improved outcomes, and enhance cost-effectiveness of health care delivery—all of which are beneficial to patients, their families and society."

**More information:** Reducing the pressures of outpatient care: the potential role of patient-reported outcomes, *Journal of the Royal Society of Medicine* (2023). [DOI: 10.1177/01410768231152222](https://doi.org/10.1177/01410768231152222)

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