## Commentary: Telemedicine in ophthalmology: No distance too far, no future too distant

Access to healthcare is a fundamental human right.<sup>[1]</sup> The possibility to be able to provide the right advice at the right time to our patients forms the basis of remote telemedicine. From time immemorial, care has been limited by the access to the physician and also dependant on the patients seeking it. With the advent of technology tools, the possibility of connecting to patients has increased over the past couple of decades. The concept of telemedicine over the years has evolved from being an ancillary service to now integrating automated diagnosis<sup>[2]</sup> and also to assist in post-surgical care.<sup>[3]</sup> The earlier need of telemedicine significantly focussed on bridging the gap of provision of healthcare services to the rural communities and

seeking expert opinion from the care givers in tertiary care centres.<sup>[4]</sup>

The ongoing global COVID-19 pandemic brought to fore the most significant challenge of providing care to our patients. The lockdown of entire nations brought normal life to a standstill as we know it. The interpersonal transmission of the novel coronavirus has further widened the gap between the patients and their care givers. With the concept of social distancing, we are suddenly faced with a *new normal* and adapting to the same across the ophthalmology fraternity.<sup>[5]</sup> Telemedicine whilst on the side lines in the past has now become an important modality to continue to deliver care for our patients. The Ministry of Health and Family Welfare of India published the Telemedicine guidelines<sup>[6]</sup> and the Telemedicine Society of India began offering online courses for healthcare providers to be certified before offering teleconsultations as a service to the patients.<sup>[7]</sup> The need of telemedicine is now greater in mainstream medicine and evident by the honorable Indian Prime Minister's tweet encouraging the extensive use of the same to provide healthcare services.<sup>[8]</sup>

In the current article, the authors have described a survey performed to assess the use of teleophthalmology in a government medical university. In their experience, the three most common diagnoses were computer vision syndrome/ dry eyes, conjunctivitis, and refractive error and a significant percentage of patients were follow-up patients.<sup>[9]</sup> Effective communication of the availability of such telemedicine services by the care providers is required to cater to the new patients seeking care. Various institutions providing eyecare services have adapted to the provision of the teleconsults when faced with the unique challenges of social distancing.<sup>[10]</sup> One should be mindful of tracking the same to ensure they are also catering to the vulnerable groups such as children, women, elderly patients, and those presenting from distant locations who are unable to travel due to the lockdown restrictions. The AIOS-IJO guidelines also provide a comprehensive overview of the routine conditions that can be managed on teleconsults and effective triaging of the patients who have presented to the hospital.<sup>[11]</sup> This is very crucial for care givers to implement and track because it can effectively convert the routine patients into teleconsults in due course of time by comparing the trends of presentation.

The care givers must also be mindful of the cultural factors of the geographic region and also the digital literacy of the population among the metropolitan, urban, and rural segments in India.<sup>[12]</sup> Teleconsults while having the benefits of saving time, money, and increasing access to a specialist also has limitations such as dependency on connectivity and the access to smart devices. From a clinical perspective, the inability to perform other ocular examination procedures such as visual acuity, IOP measurements and diagnostics through the phone limits its usage and hence is used significantly for follow-up patients where this clinical information is available from the previous medical records.

To conclude, telemedicine has become one of the most important modality to provide eye care services in the new normal in the COVID-19 era. It is important to embrace this new opportunity and to also evolve with the relaxation of the government guidelines which will create an influx of patients into the hospitals which will still have the limitation of patients that can be seen due to the social distancing measures. The tool of telemedicine decreases the distance between the patient and care giver. The future of patient care is already HERE and the time to embrace this new norm is NOW!

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Access this article online	
Quick Response Code:	Website:
	www.ijo.in
	<b>DOI:</b> 10.4103/ijo.IJO_1879_20

**Cite this article as:** Das AV. Commentary: Telemedicine in ophthalmology: No distance too far, no future too distant. Indian J Ophthalmol 2020;68:1385-6.