An Affordable, Usable and Sustainable Preventive Healthcare System for Unreached People in Bangladesh

Kashiwa Naoki, Nohara Yasunobu, Ashir, Kuroda Masashiro, Inoue Sozo, Ghosh Partha Pratim, Islam Rafiqul, Hiramatsu Tatsuo, Kobayashi Kunihisa, Inoguchi Toyoshi, Kitsuregawa Masaru

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*Medical Information Center, Kyushu University Hospital, Fukuoka, Japan, bFaculty of Information Science and Electrical Engineering, Kyushu University, Fukuoka Japan, cGrameen Communications, Dhaka, Bangladesh, dNational Institute of Information and Communications Technology, Tokyo, Japan, eGraduate School of Engineering, Kyushu Institute of Technology, Kitakyushu, Japan, fGraduate School of Medical Sciences, Kyushu University, Fukuoka, Japan, gFukuoka University Chikushino Hospital, Chikushino, Japan, hInstitute of Industrial Science, University of Tokyo, Tokyo Japan

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Introduction

Through aggressive IT development in medicine, health care in developing countries will possibly take a different path than advanced countries. We are conducted a pilot study of a preventive medical service combining e-health checkup and telemedicine in developing countries to evaluate stratification rules and short-term effects of the intervention prior to a large scale research study.

Methods

We provided e-health checkup in a village and in several companies in Bangladesh. Individual health condition was automatically categorized into 4 grades: Green (healthy), yellow (caution), orange (affected), and red (emergent) by international diagnosis standards of diseases. We provided telemedicine for orange and red, and tele-prescription for hypertensive patients. We rechecked orange and red subjects 2 months later.

Results and Conclusions

The first checkup was provided to 791 subjects and categorized green15%, yellow66%, orange17%, and red3%. At the followup, 96 (62% of orange and red) were visited and categorized into green2%, yellow43%, orange43%, and red13%. The result shows the system’s potency to deliver effective healthcare in developing countries. We completed 4919 first visits by November 2012. We will continue this e-health service in its second annual survey in June 2013.

References


Address for correspondence: nnaoki@info.med.kyushu-u.ac.jp