

Public wants medical info, mobile conference told

By: **Howard Solomon** On: 26 Jan 2011 For: CIO Canada 

Increasingly, the medical community is allowing patients to get access to personal information on mobile devices. Read why one Ontario doctor is getting into business herself

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Now in addition to her medical duties, **Wendy Graham** is president of **Mihealth Global Systems**, a company that has developed a mobile personal health records system for patients that she hopes will have a commercial launch in April.

“The consumer desire for medical information is grossly underestimated,” Graham told a Toronto conference on mobile healthcare on Tuesday.

“I believe the time has come for a data [health] package for mobile phones to be offered to patients.”

<http://video.itworldcanada.com/?bcpid=7044989001&bctid=767960045001>

Graham was one of several representatives of healthcare institutions presenting case studies at the two-day conference showing how smart phones and tablet computers can be used by medical professionals and patients to make the delivery of health services more efficient.

As Dr. **Bernard Segal**, associate professor at McGill University’s medical school and conference co-chair put it, Canadians wonder why they can do all sorts of things for themselves on the Internet, but not if it has anything to do with their health care.

The fact is, he said, “there is an explosion in the M-health (mobile health) area.”

Across North America doctors, clinicians and hospitals are testing and in some cases implementing solutions that allow staff and patients to take advantage of mobile devices. In some cases they are as simple as being able to review appointment schedules. Others are

like Mihealth, Google Health or **Telus Corp.'s soon-to-launch Health Space** records portal that allow patients to keep track of their medical records from anywhere.

There's no shortage of iPhone and Android applications people can use to help track episodes of a variety of illnesses, the conference was told. Ontario urologists have created an iPhone social network application allowing them to share information online.

Going further, one company makes a wristband that can display personal medical information, while others are researching "smart" pills that signal when medication has been taken.

The reasons mobile health care has become of interest are varied, Segal told the conference, ranging from the hope it will help physicians be more efficient to empowering patients.

Ideally, a mobile health care strategy will fit in with an overall electronic health records strategies that Ottawa and the provinces are trying to create, Dennis Giokas, chief technology officer of Canada Health **Infoway**, told the conference. Infoway is a not for profit corporation funded by the federal government aimed at helping governments adopt EHRs.

In addition to the obvious advantages of helping patients remember important facts, mobile health solutions could give patients the ability to email or text clinicians with simple questions to answer rather than make office appointments, Giokas said.

Widespread implementation of EHRs across Canada in hospitals that can be interconnected is still yet to be realized. In fact, one speaker noted that electronic record keeping in doctors' offices has a long way to go. It is estimated that 60 per cent of Alberta doctors' offices are electronic, compared to perhaps 40 per cent in Ontario.

Still, citing the various emerging mobile healthcare solutions, Giokas said doctors and application developers have to start looking at health data as a valuable resource to be leveraged.

"We have to start thinking beyond the EHR and really view this as a platform for innovation," he said.

In this country, the conference heard, organizations are approaching mobile health care in a variety of ways. Toronto's **University Health Network**, a coalition of several hospitals, started in 2006 by giving BlackBerrys to a number of medical residents who had been using pagers to get messages from nursing staff. At the same time UHN changed the way it treated patients, moving to a team-focused approach.

Sherman Quan, a UHN health informatician, said staff found advantages to the shift, including increased efficiencies. But, he warned, smart phones are a fundamental change in how staff communicate, so some ways of working had to change.

Sharon Goodwin, vice-president and chief practice executive at the **Victorian Order of Nurses**, which employs 4,960 home care nurses and support staff across the country, told of a recent trial that equipped some 300 nurses in Nova Scotia with BlackBerrys for linking to the organization's scheduling application.

Goodwin is about to report to the VON on the trial so couldn't share detailed results. But she said for nurses who often work out of their homes and don't come into offices, the handhelds proved popular.

However, she warned IT staff in the audience, any new wireless technology had better be reliable or the users will find it frustrating.

After Graham, a member of North Bay's, Blue Sky Family Health clinic, saw the U.S. military mobile application she learned it had been created by Toronto's Diversinet Corp., a software developer, using its MobiSecure platform. Diversinet ended up creating Mihealth for her, which can run on a wide range of mobile devices.

A recent trial of 120 Blue Sky patients was successful enough for Graham to strike a deal with Diversinet for the Canadian distributor rights.

She said initially it will be offered through doctors in the North Bay area to patients for about \$1 a week. It could also be offered to carriers, who, like Telus, are increasingly interested in health care solutions, for sale to subscribers.

Mihealth allows a participating doctor to give a password to a patient for a Website that can be populated with personal information from the physician's files. The patient can allow others full or partial access to the data. The encryption, Graham said, is military-grade.

In addition to data portability, Mihealth has slashed into the 188 patient phone calls Graham used to get every Monday morning, she told the conference, now that patients can send her staff email queries.

She hopes to next add the ability for the application to push out messages to certain patients – for example, telling them to get certain tests done before their next appointment so the results will be ready when they come in.

"What's really important to people," she also told the audience, "is the look and feel. They need things that are engaging, that are fun. Health care generally is very sad – you're not in a doctor's office because you want to be."