Letter to the editor Telehealth in Peru during the pandemic

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Dear Editor:

After reading the study by Marquez on teleconsultation in Colombia, the relevance of using digital platforms for providing health care services was made evident, as well as the need of assessing its potential benefits in South American countries.

Several countries were declared in a state of emergency due to the COVID-19 (Coronavirus Disease 2019) pandemic, and this event led to declare a compulsory lockdown as the main health prevention measure. This new circumstance has become a challenge at social and economic levels, but especially a challenge for health systems. The current pandemic has limited face-to-face care in order to prevent the spread of the disease and, for this reason, many countries have implemented digital health (1,2).

Peru, like other countries, has been forced to implement an accelerated teleconsultation system. However, one of the main difficulties for using these platforms properly is the limited access to the Internet. This has affected the exchange of images and videos for effective monitoring, mainly in rural areas. Another limitation is the scarce technological knowledge, particularly among the elderly.

According to a report by the National Institute of Informatics Statistics (INEI), in 2018, the Peruvian region with the most Internet access was the Coastal region, with 63.3 %, followed by the Andean region, with 36 %, and the lowest access rate was observed in the Peruvian Amazonia (33 %).

This year (2020), electricity generation and information services (radio and television) were affected by the pandemic. However, a 7.29% growth has been observed, compared to 2019, in the telecommunication service industry (mobile telephony and Internet) (3).

Currently, in Peru there are no studies on the favorable and unfavorable results of such digital health platforms during the pandemic, nor of the benefits of their use in the general population. This is explained by the fact that there is not a sufficient number of people served by this modality.

Although the Ministry of Health (MINSA) approved a directive to implement the development of telehealth during the pandemic —which was established in the Ministerial Resolution No. 146-2020-MINSA of March 31, 2020— and defined the criteria for its application in all health care service providing institutions, there is still limited public awareness of this implementation. Indeed, this is one of the main problems and challenges faced by our health system in the development of the telehealth platform (4).

There is no doubt that the different regions of Peru are fighting the pandemic to continue providing health services to the population. And those services have been delivered through technology by creating multiple applications such as CoronaISH (https://salud.regionsanmartin.gob.pe/).

CoronaISH was created by the Regional Government of San Martín (Peru) and allows medical personnel to monitor suspected cases of COVID-19 through a questionnaire. Also, the Peruvian Government created the application *Perú en tus manos*, available on Google Play. This app allows establishing the areas with greater probability of contagion by COVID-19. All these options would be very useful if they were implemented, monitored, and informed to the population (5).

On the other hand, in the telemedicine web application of MINSA (https://teleatiendo.minsa.gob.pe/), 4 310 requests have been made through INFOSALUD —in the line 113— to access teleconsultation services between April 13 and 25; 2 363 people were assisted by telephone and 1 947 through the mobile application. These numbers are expected to continue to increase over time (6).

Analyzing favorable and unfavorable results associated with the use of these platforms in the different specialties is necessary, as well as collecting information through the available application using a survey. The aim is to know the level of satisfaction of the patients and doctors who participate in teleconsultations.

Currently, teleconsultations are prioritizing patients with COVID-19 who have risk factors. Therefore, other diseases are being left aside and are barely monitored on-site. On the other hand, the limitations mentioned above must be considered to achieve an adequate use of this service. Investment and in the telecommunications sector and the dissemination of this system are also needed to strengthen the Telehealth area in the country in order to continue providing this service during the pandemic.

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