

Opportunities and Challenges for the use of Video Consultations in Primary Health Services

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Internet-based video technology has in recent years evolved from complicated studio-based technology reserved for a few larger organisations to technology used by everyone. Grandmothers “skype” their grandchildren, and even if you are in an apartment on the other side of the world, you can show your friends what it looks like, both inside the apartment and the beautiful view from the window.

This technology can also be used in health services. The studio-based technology has been used for many years both in psychiatry and in somatic health services. Primarily, this has been done between health institutions. In this area, the technology is still in development. As an example, it is now possible for Norwegian surgeons to get real-time guidance from the United States in complicated operations using relatively advanced technology.

In the US, the number of video consultations in health services is 19.7 million per year (2015). It is expected to reach 158.4 million in three years. The US now has separate regulations for the safe use of such consultations.



Internet-based video technology can also be used in health services. Photo: Colourbox.com

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<http://hitconsultant.net/2015/06/25/report-tele-health-video-visits-to-reach-158m-by-2020/>

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<https://www.ssb.no/helse/statistikker/fastlegetj/aar/2015-06-12>

Norway is lagging

Norway is second in the world in the use of the Internet after Iceland. 98 percent of the Norwegian population uses the Internet. Video conversations with patients at home are now approved for use in specialist health services under certain conditions. We see opportunities for significant savings in transport costs. Such consultations give the same remunerations as regular consultations. It is therefore a paradox that the technology is not used more often between patients and primary health services.

The benefits are substantial, mostly for patients, employers and municipal home care services.

There are currently 13 million regular doctor’s appointments made in Norway. If only one percent of these could be carried out on video, transport and waiting in connection with 130,000 appointments would be saved for the patients and in some cases their employers.



For municipal services, a video conversation with the general practitioner could in some instances clarify whether a resident needs strenuous and expensive transport to the general practitioner or to the hospital for further examination.

Lack of encouragement and direct obstacles

Unlike the US, where health service providers are very cost-conscious, no encouragement is given to general practitioners in Norway to use video. For doctors, a video installation is an added expense. It may be challenging to organise video consultations in a busy day. The tariff system regulating payments for general practitioners has explicitly forbidden charging consultation payments for video consultations.

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