Telemedicine marches on: The efficacy of remote telecolposcopy

From its beginnings in the late 1950s, telemedicine has grown to encompass services ranging from remote psychotherapy to teleradiology. Despite increasing penetration of telemedicine services, a recent Cochrane Review of the relative effects and costs of telemedicine versus face-to-face care suggests that more studies are warranted before policymakers fully embrace this technology.

In this issue of the Journal of Family Practice, Ferris and colleagues (pages 298–304) demonstrate the feasibility and efficacy of telecolposcopy, providing another demonstration of telemedicine services to remote and rural populations. Of note, telecolposcopy performed better than cervicography and almost as well as on-site colposcopy, with no significant difference in sensitivity or specificity, and similar likelihood ratios for detecting all degrees of cervical intraepithelial neoplasia. What are we to make of such data?

Given the increasing burden on physicians serving rural communities and populations at risk, such findings are great news. While satisfaction with telemedicine is generally high, the initial cost of capitalization, reimbursement, and licensing challenges, as well as the threat of malpractice, continue to be substantial barriers to the diffusion of this technology.

While informatics continues to advance and reimbursement policies change, access to specialized teleservices remains a challenge for many patients. Ferris and colleagues are to be commended for providing further evidence that telemedicine is feasible and results in high-quality care.

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REFERENCES