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Title: The evaluation of a tele-monitoring model (Teleheath) as an aid in the case management of patients with COPD

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Body: Introduction One of the many challenges for health care systems is to reduce the impact of chronic diseases like COPD on health care resources. Distant monitoring systems are increasingly being used for this purpose Methods Potential COPD patients were identified through their Case Managers (CMs). Those who met the inclusion and exclusion criteria were invited to participate. Those consented received a telemonitoring device (Telehealth) with instructions and education and were remotely monitored by CMs as part of case management process. Data on hospital admissions and Health Care Utilisation (HCU) was collected for 12 months before and after initiation of Telehealth. SGRQ and HAD questionnaires were completed before recruitment and 12 months after Telehealth. Results: Total of 16 patients were included in the analysis. Following the introduction of Telehealth, Hospital admissions halved from 20 to 10 with reduction in the number of bed-days from 134 to 96. Total cost of admissions had subsequently dropped by £20,000 (€23,400). HCU data showed a drop in the number of home visits to patients (50 to 30) but a small increase in the number of telephone consultations (68-76). SGRQ scores for QoL showed average of 3.3 points improvement which is below the clinically significance threshold. HAD data is presented in table1.

HAD data

	Baseline (n=16)		After 1 year (n=15)	
	Borderline	Abnormal	Borderline	Abnormal
Anxiety	5	2	5	4
Depression	7	3	6	3

Conclusions Telehealth appears to reduce admissions to hospital and some aspects of HCU in primary care. There is a need for more trials looking into the difficulties encountered during the implementation and evaluation of such complex technology.