



Remote patient monitoring in COVID 19: a critical appraisal

Henri Gruwez ^{1,2,3,4}, Emma Bakelants^{4,5}, Pauline Dreesen¹, Jolien Broekmans⁴, Maarten Criel⁵, Michiel Thomeer ^{1,5}, Pieter Vandervoort^{1,2} and David Ruttens^{1,5}

¹Faculty of Medicine and Life Science, Hasselt University, Hasselt, Belgium. ²Dept of Cardiology, Ziekenhuis Oost Limburg, Genk, Belgium. ³Dept of Cardiovascular Sciences, University of Leuven, Leuven, Belgium. ⁴Faculty of Medicine, University of Leuven, Leuven, Belgium. ⁵Dept of Respiratory Medicine, Ziekenhuis Oost Limburg, Genk, Belgium.

Corresponding author: David Ruttens (david.ruttens@zol.be)



Shareable abstract (@ERSpublications)
Is there any evidence for #telemonitoring in #COVID19? Read more: https://bit.ly/3p1YXBi

Cite this article as: Gruwez H, Bakelants E, Dreesen P, et al. Remote patient monitoring in COVID 19: a critical appraisal. Eur Respir J 2022; 59: 2102697 [DOI: 10.1183/13993003.02697-2021].

This single-page version can be shared freely online.

Copyright ©The authors 2022.

This version is distributed under the terms of the Creative Commons Attribution Non-Commercial Licence 4.0. For commercial reproduction rights and permissions contact permissions@ersnet.org

Received: 12 Oct 2021 Accepted: 20 Nov 2021 To the Editor:

With great interest, we read the article by GRUTTERS *et al.* [1], in which they share their results of the largest patient cohort of coronavirus disease 2019 (COVID-19) home monitoring to date. Based on these results, remote patient monitoring (RPM) was praised and was claimed as a tool to reduce the hospital stay of COVID-19 patients by 5 days.



