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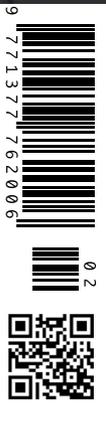
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# Digital Health After COVID-19

## #medicosfrentealcovid Experience

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Supporting the efforts to ‘flatten the curve’ of COVID-19 infections, a company in Spain has encouraged health professionals to volunteer and offer teleconsultations to the population using its telemedicine platform free of charge. An expert who led the project explains why this was necessary from a business perspective and how telehealth is here to stay and grow.



### Key Points

- Today, eHealth is a powerful ecosystem that can reconfigure and disrupt healthcare.
- The COVID-19 pandemic has made many people realise how useful digital tools can be.
- With many new technologies available, eHealth will continue to develop and thrive.

I am a doctor, but over the years I have developed my career in innovation and specifically in digital health. A few days ago, I remembered an article from 1997, in which I talked about what would be the future of electronic prescription that we were conceiving at that time. I ended up saying that:

“...[it] will be part of a truly comprehensive care process, articulated around powerful information technologies shaped as large telematic networks that will allow to maintain a personal and unique medical history as a reflection of the health biography of any citizen and that will be accessible from any point and time it is required” (Lorca 1997).

This is exactly what we have achieved today, “an ecosystem that creates powerful

forces that can reconfigure and disrupt industries.” In healthcare, it has the potential to deliver a personalised and integrated experience for consumers, improve providers’ productivity, engage formal and informal caregivers, and improve outcomes and affordability.

In Spain, during this long period of lockdown due to COVID-19, we have seen a surprising growth in citizens’ initiatives to help the community, ranging from local networks to support the elderly with grocery shopping to performances on many balconies. On the business side, there has been a great effort to adapt daily activities to the virtual environment. And, of course, we have had the best health professionals who have been struggling under these extreme conditions and to whom we are grateful.

A symbol of this would be a case of a retired doctor, Dr Josep Maria Sala, who, like so many others, volunteered to support COVID-19 patients following an offer from the SEMI and SEMFYC scientific societies. As Dr Sala says, “I came to provide about 40-50 consultations a day. I got up in the morning, turned on the application and did not stop. I worked with the application ‘Quiero Cuidarme Más’ 12 hours a day, people were very grateful, and I felt useful. Also, I had never had such grateful patients, and the lockdown flew by because I was working all day long.”

Indeed, the COVID-19 pandemic has certainly been a turning point for eHealth. During this time the need for health care

and advice has increased exponentially, but traditional accessibility was compromised because of the risk of contagion and because physical health clinics and hospitals were overwhelmed by demand.

Until now, both patients and professionals were unsure of the efficiency or potential of eHealth services. Spain has a primarily public health system, and for many people this digital type of medical care has never been the first choice. But in the last three months of running our free-for-all project #medicosfrentealcovid (‘Doctors in front of COVID’), it has generated 30,000 consultations, and I firmly believe that this has opened the eyes of many people.

This encourages us to continue on the path of predicting the future... by defining it. And that is what we are going to do from now on in our new Laboratory of Innovation in digital health at Barcelona Health Hub headquarters, Old Hospital de Sant Pau. With the #smartpositivehealth movement we aim for a model of innovation driven by utility that allows to transform the available knowledge into sustainable value, thanks to the enabling power of the new technologies of virtualisation, ubiquity and artificial intelligence. ■

### REFERENCES

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