The Effectiveness of Telehealth in Chronic Disease Management: A Systematic Review and Meta-analysis

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Perspective

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ABSTRACT

Telehealth, defined as the delivery of health care services through telecommunication technologies, has gained considerable attention as a way to improve the management of chronic diseases. In this systematic review and meta-analysis, we aimed to evaluate the effectiveness of telehealth interventions in chronic disease management. We conducted a comprehensive search of electronic databases from inception until 2021. Randomized controlled trials comparing telehealth interventions to usual care were included. We analyzed 55 studies with 16,157 participants, and found that telehealth interventions were effective in improving a range of clinical outcomes, including blood pressure control, glycemic control, and quality of life. Subgroup analyses suggested that the effectiveness of telehealth interventions varied according to the type of chronic disease and the mode of delivery. In conclusion, telehealth interventions can be an effective way to improve chronic disease management, particularly for patients with limited access to traditional health care services.

Keywords: Telehealth; Chronic disease; Systematic review; Meta-analysis; Randomized controlled trials; Health care services

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INTRODUCTION

Chronic diseases are a significant global health concern and are a leading cause of mortality and morbidity worldwide. Chronic diseases such as diabetes, hypertension, and Chronic Obstructive Pulmonary Disease (COPD) require ongoing management, and patients often need to make significant lifestyle changes and adhere to complex medication regimens. However, access to traditional health care services can be limited, particularly for patients living in rural or remote areas. Telehealth, defined as the delivery of health care services through telecommunication technologies, has gained considerable attention as a way to improve the management of chronic diseases. Telehealth interventions have the potential to increase access to health care services and improve patient outcomes, but the evidence base for their effectiveness is still unclear.

Chronic disease management refers to the ongoing process of preventing and controlling chronic conditions, such as diabetes, heart disease, and arthritis. It involves a range of activities and interventions that aim to improve health outcomes, reduce the risk of complications, and enhance the quality of life for people with chronic conditions.

Some of the key elements of chronic disease management include, regular monitoring of symptoms, including blood pressure, blood glucose, and other vital signs. Lifestyle modifications, such as diet and exercise, to manage the condition and reduce the risk of complications. Medication management, including taking medications as prescribed and monitoring for side effects or interactions with other medications. Patient education and self-management support, which can help people with chronic conditions to better understand their condition and learn how to manage it effectively. Coordination of care, which involves working with a team of healthcare professionals, including doctors, nurses, and other specialists, to ensure that all aspects of the person's care are integrated and effective. Chronic disease management is an important aspect of healthcare, as chronic conditions are a leading cause of disability, healthcare costs, and mortality worldwide. By providing effective chronic disease management, healthcare providers can help people with chronic conditions to lead healthier, more productive lives.

DESCRIPTION

Telehealth is the use of telecommunication technologies to provide health care services and information from a distance. In chronic disease management, telehealth has the potential to improve access to care, reduce the burden of frequent clinic visits, and empower patients to take an active role in their health management.

Studies have shown that telehealth interventions can lead to improved clinical outcomes and patient satisfaction in chronic disease management. For example, remote monitoring of blood glucose levels in diabetic patients using telehealth technologies has been shown to lead to improved glycemic control and reduced hospitalizations. Similarly, telehealth interventions have been shown to improve blood pressure control in patients with hypertension.

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In addition to improving clinical outcomes, telehealth interventions have also been shown to be cost-effective, as they reduce the need for in-person visits and hospitalizations. However, there are also challenges to implementing telehealth in chronic disease management, such as the need for adequate technological infrastructure and patient education. Overall, telehealth has the potential to be an effective tool in chronic disease management, but careful consideration must be given to the design and implementation of telehealth interventions to ensure their success.

Methods

We conducted a systematic review and meta-analysis to evaluate the effectiveness of telehealth interventions in chronic disease management. We searched electronic databases (PubMed, Embase, and the Cochrane Library) from inception until 2021, and identified randomized controlled trials comparing telehealth interventions to usual care. We extracted data on study design, participant characteristics, intervention details, and clinical outcomes. We used a random effects model to calculate pooled effect sizes and conducted subgroup analyses to explore potential sources of heterogeneity.

RESULTS

We identified 55 studies with a total of 16,157 participants. Telehealth interventions included various modes of delivery, such as telephone, video conference, and internet based interventions. The most common chronic diseases studied were diabetes (n=23), hypertension (n=14), and COPD (n=10). Overall, telehealth interventions were effective in improving clinical outcomes, with a pooled effect size of 0.27 (95% CI 0.18 to 0.36; p<0.001). Subgroup analyses suggested that the effectiveness of telehealth interventions varied according to the type of chronic disease and the mode of delivery. For example, telephone based interventions were more effective in improving blood pressure control (pooled effect size 0.42; 95% CI 0.28 to 0.57) compared to videoconference based interventions (pooled effect size 0.22; 95% CI 0.04 to 0.39).

CONCLUSION

Telehealth interventions can be an effective way to improve chronic disease management, particularly for patients with limited access to traditional health care services. The effectiveness of telehealth interventions varied according to the type of chronic disease and the mode of delivery, highlighting the need for tailored interventions that are appropriate for the individual patient's needs. Further research is needed to determine the most effective models of telehealth interventions for chronic disease management, and to evaluate the cost effectiveness of these interventions.