

HEALTHCARE

State launches telemedicine in rural areas

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The government yesterday began development of its telemedicine programme at 32 hospitals in rural areas in eight provinces, encouraging adoption of new technologies and remote medical care.

The programme, a joint effort of the Public Health Ministry and the National Broadcasting and Telecommunications Commission (NBTC), is a vital part of addressing concerns over rising medical costs and deficient healthcare access in rural areas.

Under the telemedicine concept, community hospitals or primary medicine clusters can serve patients in remote areas more efficiently in the event they need a quick consultation for simple ailments.

Additionally, telemedicine is expected to reduce expenses for both patients and state-run hospitals by a combined 38 billion baht annually after full implementation within four years.

NBTC secretary-general Takorn Tantasith said the regulator has budgeted 180 million baht to purchase and install digital equipment for telemedicine in



The telemedicine programme aims to provide healthcare services efficiently to patients in remote parts of Thailand. AP

the pioneer phase.

The budget is part of the NBTC's five-year funding for the operation of hospitals. The broadband internet infrastructure required to operate telemedicine will run through the NBTC's USO (universal service obligation) Net.

The USO Net infrastructure will cover 3,920 remote villages nationwide or 600,000 households by June 2019.

"The NBTC will not involve itself in decisions of related equipment procurement, as that is up to the individual hospital," Mr Takorn said. "People will

benefit from better standards through telemedicine, which will directly help people in remote villages.”

He said the initial 32 hospitals will start offering telemedicine services by the fourth quarter of this year.

The project will focus on four illness types: high blood pressure, diabetes, eye disease and skin disease. These account for over 70% of hospital cases.

The eight provinces seeing the service first are Chiang Rai, Kamphaeng Phet, Kanchanaburi, Kalasin, Phetchabun, Surin, Songkhla and Surat Thani.

The 32 hospitals comprise 15 sub-district health-promoting hospitals, five community hospitals, eight provincial hospitals and four primary care clusters.

According to World Health Organization standards, communities should have one doctor for every 439 people, but in Thailand there is only one doctor for every 2,065 people.

“Using digital infrastructure to provide public health services is crucial for Thailand, which is rapidly ageing and will take just 20 years, from 2002 to 2022, to go from an ageing to an aged society, the fastest among developing countries,” Mr Takorn said.