# Case Report

# Tele Consultations in Dermatology — New Experience and A Report of Lockdown Dermatology in COVID 19 Scenario

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Amidst unprecedented lockdown for last 40 days, because of global pandemic of Corona virus, patients as well as clinicians of multiple specialities were at a loss. But medical council and various associations stepped in to allow teleconsultation. I did a survey on my dermatology patients and results were that what we perceive as emergency, is not by patients. Sexually transmitted diseases did not go down in lockdown. [J Indian Med Assoc 2020; 118(12): 64-5]

### Key words: Teleconsultation, Covid 19, Lockdown, Dermatology.

eleconsultation is defined as synchronous or asynchronous consultation using information and communication technology to omit geographical and functional distance. Its goals are for diagnostics or treatment between two or more geographically separated health providers1. the objective of teleconsultation projects is to increase access to and quality of healthcare delivery in a cost efficient manner<sup>2</sup>.

The janta curfew was declared by Prime Minister on 22 march with total number of cases in India reported was only 45 per day, the state of west Bengal went into lockdown from next day and well before 24 may, when national lockdown was announced.

Patients and doctors started to shut their clinics over concerns of safety of patients, staffs, family members as the situation grew grimmer. There was a call for something, and a forbidden fruit (teleconsultation) was reintroduced.

# CASE REPORT

Various platforms like medsign, lybrate, docon, navya, medisign all came into picture selling doctors a platform for videocalling and keeping online records.some, like me made an innovation asked patients to send clinical photo on whatsapp no, enumerate her problems, pay teleconsultation fees on pay Tm, google payand bank transfer, consultation was given on email, whatsapp or mailed to patients from platforms. The patients across globe consulted including Nepal and Bangladesh, though very few. Patients were frantically calling for consultation from lockdown zones also.

We registered at platforms like DOCON and lybrate. whereby patient paid fees and problems discussed on video call. prescriptions done online and mailed by platforms. The otherway was patients whatsapped clinical photo, paid fees on pay T m, phone pay or did a bank transfer provided by the doctor. The doctor then called the patient on google

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#### Editor's Comment:

- During lockdown when the patient doctor contacts were severly jeopardised in the context of fear, social distancing teleconsultations have become an important tool in the setting of this pandemic.
- The government and medical council of India, premium institutions like All India Instituteof Medical sciences, New Delhi, PGI chandigarh all resorted to teleconsultations.
- It may not be a substitute of physical consultation, but despite limitations it is an useful tool in pandemic set up.

Duo or made normal calls, had discussion the prescription was then written on normal prescription pad, scanned and send on mail and whatsapp (Figs 1 & 2).

#### RESULTS

Request or enquiry were made by patients on whatsapp or mobile no seventy percent were follow up patients. Remaining were new patients who got information from other patients, referred by other doctors or got from internet including social media Actual teleconsultation was done in 44 percent of patients enquiring, rest refused as they were sceptical of teleconsultation, did not have digital payment ways. One patient who had consulted earlier, called up and said he was stuck in interior of Assam and had difficult times was provided free consultation.

In a span of 30 days, 7 days post lockdown we started to record the cases seen via teleconsultation and DOCON PLATFORM. The total number of cases seen were 94 in a 30 days period, which was approximately 13-14 percent of normal patients seen in this period. We analysed the data, out of 94 patients 38 were female patients and 56 were male patient (Table 1).

The misclenous group included a potpourri of cases of scabies (4), popular urticaria (3), ingrowing toe nail (2), herpes zoster (3), urticaria (5), hair disorders namely alopecia areata (2), Telogen effluvium (6). Trichitillomania (1). Interestingly, we had 3 cases of TSDF topical steroid damaged face. Four cases, of autoimmune collagen vascular disorders (3 of scleroderma and one of dermatomyositis) reported for treatment. The remaining



Fig 1 — Secondary syphilis lesion with Biettes collarette



Fig 2 — Tinea corporis in a lady in waist region

cases included acute paronychia, folliculitis, bed sores, miliria rubra and one case of hirsutism.

To our assessment only 18 out of 98(18.36%) had compelling reasons to call (acute paronychia, hidraneditis suppuritiva, scabies, urticaria and popular urticaria had compelling reasons to seek teleconsultations. If you take STD cases – one was a 19 year old boy with MSM (men having sex with men) activity presenting with palmar lesions with Biettes collarette and subsequently confirmed with VDRL positive in 1:32 titre and TPHA POSITIVE. He was however HIV negative. Two had candidial balanitis, one was

Table1 — Distribution of Cases		
Diseases	New/old	Percentage of total
Dermatophytosis Psoriasis Hidraneditis suppuritiva Dermatitis Acne, melasma and other cosmetic problems Misclenous STD	9/5 2/5 1/3 18/22 4/7 10/50 2/6	14/98-14.28 percent 5/98-5.1 percent 3/98-3.06 percent 22/98-22.44 percent 7/98-7.14 percent 50/98-51.02 percent 6/98-6.12 percent

old and one new, both diabetic for more than 3 years. Two males (both follow up) was on recurrence of herpes lesions. One female patient complained of vulvovaginal discharge and was treated by syndromic management.

#### DISCUSSION

Teleconsultation remains a useful tool in post COVID 19 lockdown management. But its use can be extended to patients who stay in other parts of country and cannot regularly follow up. In todays busy world even patients cannot report for regular visits, so customising teleconsultation will be a step forward. Besides in post covid era, it will remain a safe way of consultation.

The dermatologist perception of emergency and patients perception are different. Some consider even melasma as an emergency. But people are not yet digital friendly as less than one third od queriesdid convert to digital practice. This is due to fear of digital payments, wheather doctor will see him properly. More public awareness will be required in post covid scenario in popularising teleconsultation, look after its legalities and use judiciously.

The android smart mobile phones can very well be used by doctors to facilitate and review good quality images and save valuable time of all to provide treatment<sup>3</sup>, more important in this COVID 19 scenario.

But in some cases like aesthetic procedures, managing SJS, dreadly diseases like DRESS, Type 2 lepra reactions, this will never be useful. The author is of opinion that teleconsultation can be a good follow up and useful in primary diagnosis in a limited number of cases.

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— Hony Editor