

Understanding Barriers to Telemedicine Use at an Academic Pain Medicine Practice



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INTRODUCTION

Telemedicine allows the delivery of healthcare, regardless of location, via communication technologies.¹ Utilizing audio and/or video interactions, healthcare providers can perform consultations, diagnose, and monitor patients remotely.¹ Commonly cited advantages include reduced cost of traveling, reduced time burden and convenience for patients, while well-known barriers include lack of comfort with the use of telemedicine technologies on behalf of the patient or the provider.² The recent expansion of telemedicine use has raised questions regarding its appropriateness and utility in the field of chronic pain. In particular, due to limitations such as the inability to perform a physical exam, telemedicine use requires careful patient selection.³ However, when appropriate, the convenience of telemedicine use may help to bridge gaps in healthcare delivery. Though a recent retrospective study at our academic center revealed that younger, white, privately insured patients were more likely to use telemedicine.⁴ This study aims to determine potential barriers to the adoption and utilization of telemedicine at our practice in an effort to optimize the delivery of healthcare.

METHODS

The NYU Langone Health IRB approved this study as a quality improvement project. An anonymous, voluntary questionnaire was distributed among patients who had completed an in-person encounter at an academic pain medicine clinic. The questionnaire assessed patient demographics, understanding and utilization of as well as barriers to telemedicine use.

RESULTS

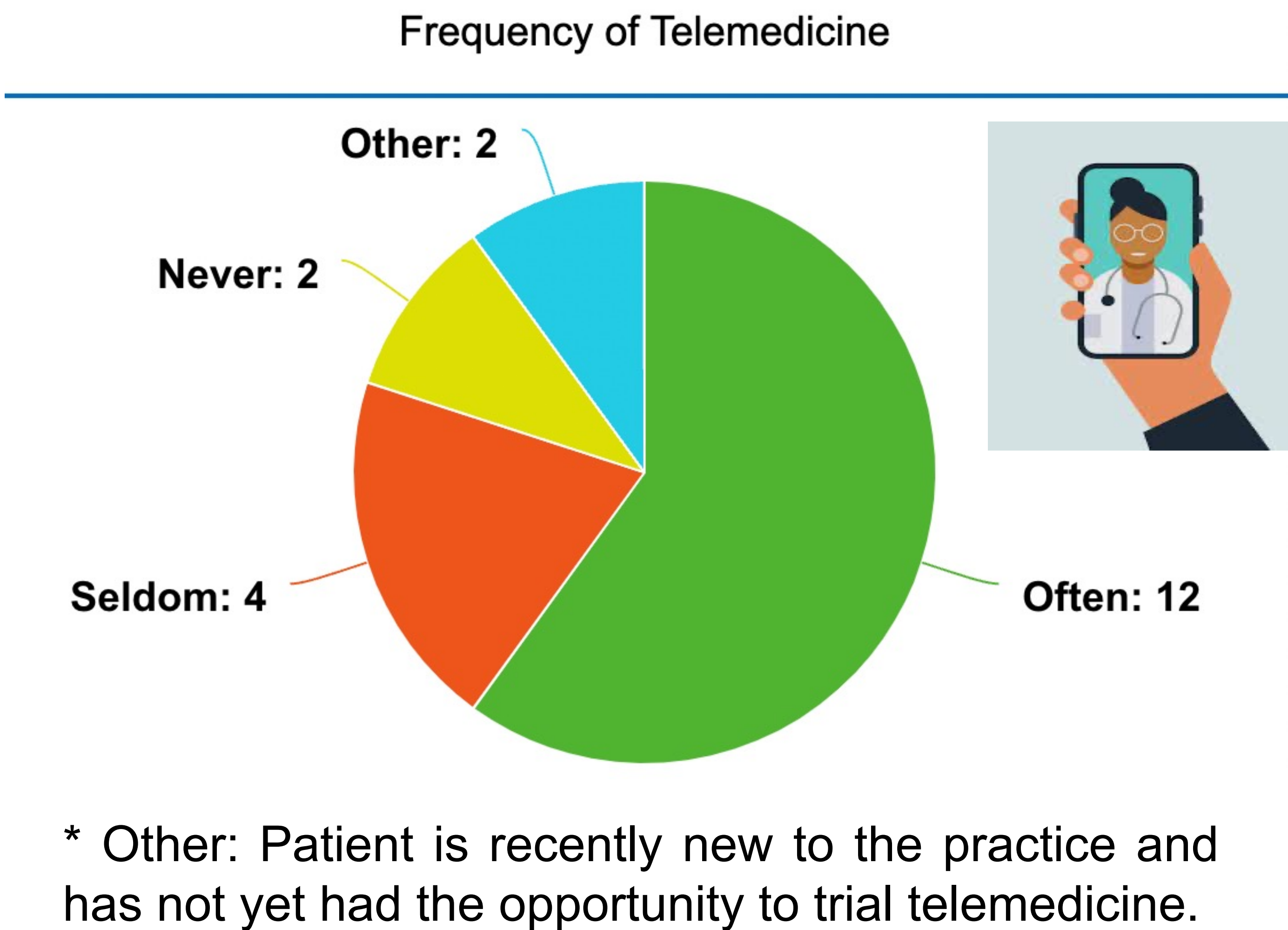
Preliminary results from 20 patient responses were analyzed. The majority of patients reported having been offered telemedicine visits (16), were aware that they can utilize telemedicine for certain healthcare visits (17), and felt comfortable using it (17). However, **only 11 patients preferred to use telemedicine.**

While all patients reported having a smartphone and internet access, only 16 patients reported having at least a desktop, laptop, or tablet. Barriers to using telemedicine were reported as: **lack of comfortability with technology (2), personal preference against it (1), lack of access to a computer (1), and poor telemedicine scheduling communication (1).**

DISCUSSION

This project reveals that there is an opportunity to attenuate provider related barriers such as offering telemedicine visits when appropriate while respecting patient related barriers such as personal preference.

The decision to use telemedicine may require consideration of patients' perception of care to augment delivery of healthcare, whether via telemedicine or in person. Additional results may further shed light upon the most prevalent risk factors for disparity in utilizing telemedicine allowing for our pain medicine practice to create a more equitable and favorable patient experience.



LIMITATIONS

A major limitation is the current small sample size of surveyed patients. Additionally, the vast majority of surveyed patients were primarily English speakers. As the number of surveyed patients increases, it is possible that a less biased distribution of responses will result.

REFERENCES

1. Emerick T, Alter B, Jarquin S, Brancolini S, Bernstein C, Luong K, Morrisseyand S, Wasan A. Telemedicine for Chronic Pain in the COVID-19 Era and Beyond. Pain Med. 2020 Sep 1;21(9):1743-1748. doi: 10.1093/pm/pnaa220. Erratum in: Pain Med. 2021 Sep 8;22(9):2142. PMID: 32914858; PMCID: PMC7543644.
2. Gajarawala SN, Pelkowski JN. Telehealth Benefits and Barriers. J Nurse Pract. 2021 Feb;17(2):218-221. doi: 10.1016/j.nurpra.2020.09.013. Epub 2020 Oct 21. PMID: 33106751; PMCID: PMC7577680.
3. Peng PW, Stafford MA, Wong DT, Salenieks ME. Use of telemedicine in chronic pain consultation: a pilot study. Clin J Pain. 2006 May;22(4):350-2. doi: 10.1097/01.ajp.0000169671.55276.87. PMID:16691087.
4. Rockholt, M. M., Addae, G., Chee, A., Chin, W., Cuff, G., Wang, J., Umeh, U. O., & Doan, L. V.(2023). Implementing Telemedicine During the COVID-19 Pandemic: Disparities in Utilization in an Urban Pain Medicine Practice. Journal of pain research, 16, 2763–2775. doi: 10.2147/JPR.S415415