Homerton University Hospital NHS
NHS Foundation Trust

AN ASSESSMENT OF PATIENT SATISFACTION WITH TELEPHONE REVIEW OF VULVAL DISEASE DURING THE LOCKDOWN FROM MARCH 2020

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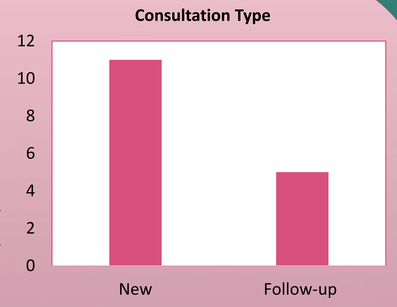
Background and aims

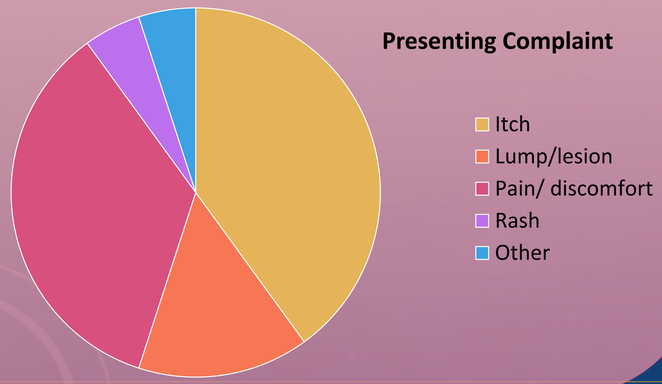
The recent pandemic has significantly impacted how we manage patients in the outpatient setting with many clinics moving to telephone consultation to reduce patient and staff exposure to Covid-19. We designed a questionnaire to better understand patients experience of vulval care during the London lock-down of 2020.

Methods

Patients who received an outpatient telephone vulval consultation in 2020 at Homerton University Hospital East London were identified

A telephone questionnaire was developed to collected data on women's opinion about preference for telephone or face to face consultation, as well as their view on the potential of sending a vulval photograph as part of their remote assessment.

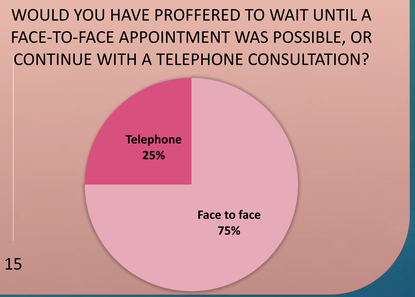




Results:

28 women were identified who received a telephone vulval consultation during the Covid pandemic of 2020. Of these, 20 were contacted and 16 women agreed to complete a telephone questionnaire.

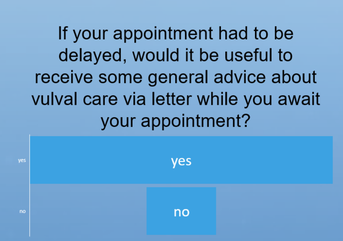
Patients included a mixture of new and follow-ups. The most common presenting symptoms were vulval pruritis and pain.

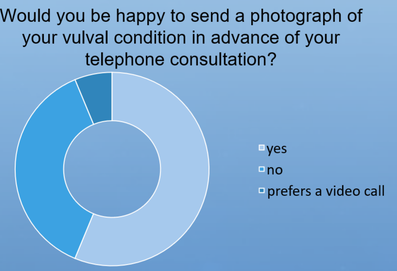


While the majority of patients reported that they were satisfied with the telephone consultation they received, 75% reported that they would have preferred to wait for a face-to-face consultation.

Those giving preference to telephone consultations were, in the majority, follow up patients under long term surveillance with Lichen Planus and Lichen Sclerosus. Those presenting with a new lump or lesion were more likely to report being unsatisfied with their consultation.

Around half of patient reported that they would be happy to send a photograph of their vulva if this could be done in a confidential and secure manner.





What patient's had to say...

- Happy as it is. and some reassurance from speaking to someone but wanted a face-to-face follow up after this. Felt that covid shouldn't have stopped face-to-face appointments
- I'd prefer a video consultation
- I don't feel that telephone clinics would be useful in most cases
- My appointment has been delayed until face-to-face available. I feel that covid shouldn't have stopped face-to-face appointments
- I'd like more time at the clinic to ask/answer questions.
- I'm happy as it is
- I'm happy as it is
- Some written information regarding continuing topical steroid creams - was very nervous about using. Would need specific advice on how and what to photograph
- Would not have been able to attend face-to-face as shielding
- I'd be happy sending photos
- I didn't know who to call to chase results and follow-up

Conclusion

Telephone consultations pose challenges, particularly for specialty areas that rely heavily on physical examination, such as vulval disease. Our survey suggests that successful remote clinics carried out in this context require careful case selection.

While photographs can be a useful adjunct to remote diagnosis in specialties such as dermatology, the sensitive nature and the practical challenges of obtaining high quality images in vulval cases are likely to limit their use.