

DERMATOLOGY: GOING DIGITAL

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Digital dermatology has started and expanded exponentially due to the coronavirus disease 2019 (COVID-19) pandemic in 2020. The use of telecommunication among health care providers over distance was first documented in the 1950s.¹ The ideal setting of any form of medical practice is a face-to-face consult, but the pandemic led to virtual consults as an alternative. Teledermatology has shown excellent patient satisfaction with diagnostic concordance with face-to-face consultation.^{2,3} This shows the potential and acceptance of teledermatology among patients and dermatologists.

A study by Angeles et al,⁴ showed how dermatologists shifted to the practice of teledermatology. The data showed an increase of dermatologists doing teleconsultations from 14.1% before the pandemic to 70% thereafter. The type of teledermatology platform used was mainly chosen due to the ease of use for the patients and the dermatologists. Facebook Messenger was the most used platform according to the study. The lack of patient information security in using Facebook messenger will likely be a barrier for telemedicine. With the increasing popularity of teledermatology, obtaining consent for virtual consult, keeping patient information private, and finding secure communication platforms are still necessary to prevent data privacy violations.⁵

The continuing medical education landscape has been transformed as well, where most of the face-to-face meetings and conferences have been cancelled due to the current situation. With the stay-at-home orders and social distancing guidelines all over the world, there has been a pivot to virtual conferences as the new normal. This also applies to department conferences, continuing medical education activities, workshops, and examinations. Now, there is a virtual trend in endless knowledge-sharing capabilities among different training institutions. The virtual meetings have allowed sharing of information and education in a convenient and efficient manner wherever one may be in the archipelago. We used to travel long distances to attend a one-hour or one-day meeting, thus this “new normal” will be a valid alternative. On the other hand, we might feel overburdened by the series of online meetings/webinars and miss the social interaction during face-to-face meetings.

Although COVID-19 related researches have rapidly proliferated to help physicians understand and treat this new threat, researches not related to COVID-19 were then disrupted. This delay can be attributed to the closure of laboratory/clinical facilities, subsequently leading to the delays in non-COVID related clinical trials during this pandemic.⁶ This also poses a challenge to residents and researchers to adapt and pursue research amidst the pandemic. Qualitative or mixed method research can be implemented with modifications to data collection by using online platforms (social media/phone data collection/other online platforms). This pandemic has already changed the landscape of research especially in training institutions.

Going digital is the way this pandemic directs the practice of dermatology inside and outside the clinic. This kind of virtual world opens up new opportunities, and we have to choose wisely how to adapt to the change it offers.

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