

Telemedicine for the socially most vulnerable people

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In Hungary 800 out of 5549 GP practices are vacant because of shortage of doctors. There are more GPs over 60y than under 60y. We are facing a great number of underdiagnosed patients, screening for prevention and followup medical activities are missing. The most vulnerables are the socially disadvantaged groups in the north-east and south west part of Hungary. Therefore telemedicine became one of the most important innovation to provide primary health care to these people. The Hungarian Maltese Charity Service started a pilot program with an EU funding (EFOP-2.2.24-22-2022-00002) to set up a modern laboratory, a personalised medicine supply centre and medical care based on telemedicine tools. The central building of the *Attila Naszlady Health Development Programme* was built in Bicske in one year time. As part of the programme, 8 mobile doctors' surgeries and 4 other specialized vehicles were set up with the "state of the art" telemedical technology and info communication to provide health care in the poorest small villages, which had been lacking doctors for years. By July 2023 telecardiology, by August 2023 teledermatology and telepulmonology and by September mobile ultrasound service were set up and nearly 4,000 examinations had already been carried out in 36 catch-up villages, while 9,000 paediatric eye screenings were carried out in 76 villages and 1,100 visually impaired children were fitted with glasses. Blood and urine samples taken at the site within the mobile clinic, carried back to Bicske and analysed in the new laboratory, where the medicines prescribed by the doctor working in the telemedicine clinics will be put into personalised sachets. The building can analyse 200 laboratory samples per shift and prepare 3,600 personalized sachets of medicines to the patients and transfer it to them, and also coordinates care in the municipalities.

The model will also bring a paradigm shift in care, bringing health care to areas where there is the greatest shortage.