Collaboration is the key to promoting Telemedicine and m-Health in Sri Lanka

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Telemedicine and m-Health is gaining its momentum in Sri Lanka. Education and training is an important approach to bring about change. Obviously, medical doctors are one important cohort of stakeholders in healthcare services, and therefore, the M.Sc. degree programme in Biomedical Informatics (introduced at the Postgraduate Institute of Medicine of the University of Colombo, Sri Lanka) had built basic capacities that will certainly bring Sri Lankan healthcare practices to the next stage of its development.

This issue represents a series of successful projects conducted under the above mentioned degree programme. The Leading Article[1], 'Implementation of District Health Information Software 2 (DHIS2) in Sri Lanka', documents a successful utilisation of DHIS2 in Sri Lanka. DHIS2, initially developed by the Health Information Systems Programme (HISP) at the University of Oslo, was customised to fit into Sri Lankan healthcare environment. This article is a collection of case reports which illustrates the customisation process considering relevant adjustments made at various levels to address different needs in Sri Lanka.

The Original Article[2], 'Development of a Community Based Web-Mobile Platform (CBWMP) for Diabetes Care in Sri Lanka' is one important project, conducted under the above mentioned programme, with the intension of improving communication links between various stakeholders of patient care including patient, doctors, specialists, laboratories and hospital clinics. This system was based on an holistic care concept especially considering the need to improving diabetic care as well as the need to reduce the direct and indirect cost incurred. The cultural diversity and preserving privacy and confidentiality were some important key issues that were considered in developing CBWMP which are, of course, particularly relevant to Sri Lanka. Eventhough the feasibility of using private-public sector partnership in developing the CBWMP is evidenced, community evaluation is still needed to provide overall evidence of its effectiveness.

The short report,[3] 'Symposium on eHealth– Opportunities and challenges' documents a series of symposia conducted throughout the country in 2012 to promote eHealth.

There are two articles on personal views in this issue. The first article on 'Introduction of Web based Continuing Professional Development (CPD) to Sri Lanka'[4] is a key project started with the view to expanding education to the needed areas of practices in the Sri Lankan health care system. CPD is a major requirement for healthcare professionals. Even in countries like USA, a lack of 'continuum of medical education' has been reported[5]. In countries such as Sri Lanka, a lack of postgraduate opportunities for healthcare workers may have had further aggravated the problem. In that context, the article on 'Introduction of Web

based Continuing Professional Development (CPD) to Sri Lanka' elaborates how ICT could be incorporated to deliver CPD programmes particularly on a distance mode. This article further highlights some potential challenges for the above approach in Sri Lanka.

The second article on 'An Electronic Public Health Information System for Sri Lanka: a Proposal to Enhance Current Practice'[6] provides a review of the Sri Lankan public health information system, together with a proposal to utilise ICT to improve the public health information system in Sri Lanka. This article highlights key aspects which could possibly enhance the information flow to address several unmet needs of our public health information system in Sri Lanka.

The case report[7] in this issue is on 'DocCall: a mobile phone based medical advice service to accommodate healthcare unmet needs in Sri Lanka'. It showcases another feasible but overlooked potential of providing healthcare in Sri Lanka. Interestingly, the technologies used in this exercise were very simple, but the evidence of its impact would be of greater importance. This project reiterates the potential for including mobile phone as an effective means of providing healthcare at a distance, especially considering the timeliness and (relative) low cost and most importantly user friendliness.

In brief, this issue demonstrates a successful ground level involvement in promoting telemedicine and m-health in Sri Lanka by providing training to a critical mass of medical doctors through international and national level collaborations.

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