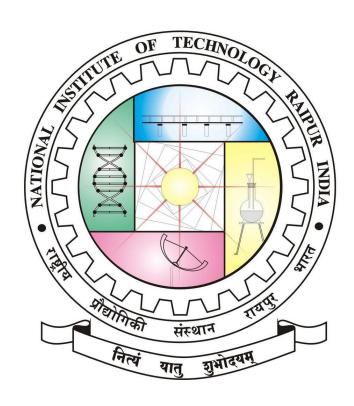
NATIONAL INSTITUTE OF TECHNOLOGY, RAIPUR



PROJECT REPORT ON Telepsychiatry

SUBMITTED BY:

Name: Apurv

Roll no: 21111012

First Semester, B.tech(2021-22)

Branch: Biomedical Engineering

Email: apurvdadu@gmail.com

Under the supervision of:

Saurabh Gupta Sir

Department of BIOMEDICAL

National Institute of Technology

Raipur

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Apurv
21111012,
First Semester,
Biomedical Engineering,
National Institute of Technology, Raipur.

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ABSTRACT

Telepsychiatry, in the form of videoconferencing and other modalities, brings enormous opportunities for clinical care, education, research and administration to the field of medicine. A comprehensive review telepsychiatry literature related to videoconferencing - was conducted using the MEDLINE, Embase, Science Citation Index, Social Sciences Citation Index and Telemedicine Information Exchange databases (1965 to June 2001). telepsychiatry, The keywords used were telemedicine. videoconferencing, Internet, primary care, education, personal digital assistant and handheld computers. Studies were selected for review if they discussed videoconferencing for patient care, satisfaction, outcomes, education and costs, and provided models of facilitating clinical service delivery. Literature on other technologies was also assessed and compared with telepsychiatry to provide an idea of future applications of technology. Published data indicate that telepsychiatry is successfully used for a variety of clinical services and educational initiatives. Telepsychiatry is generally feasible, offers a number of models of care and consultation, in general satisfies patients and providers, and has positive and negative effects on interpersonal behaviour. More quantitative and qualitative research is warranted with regard to the use of telepsychiatry in clinical and educational programmes and interventions.

INTRODUCTION

Telepsychiatry is a term that references the delivery of psychiatric diagnosis and treatment using telecommunications technology, usually video conferencing over the internet. Sometimes the term is applied to all mental and behavioral health care that is delivered at a distance.

While in the past, mental health-related specialties have been little affected by advancing technology, telemedicine is poised to have a significant impact on the delivery of behavioral health services because it offers significant benefits to patients, increases the availability of providers to underserved

Barriers to Mental Health Services

The U.S. Center for Disease Control and Prevention reports that at any given time 25% of American adults suffer from a mental health condition and that almost half will experience one at one point in their life. However, despite the prevalence of these conditions, there are barriers that keep many patients from getting the help that they need. People site cost, lack of nearby providers, and the enduring stigma associated with seeking help as challenges that get in the way of mental health care.

Telepsychiatry Can Improve Access

The full potential of telepsychiatry is health care at long last. There is already a significant collection of evidence to suggest that remote access to care can help overcome some of the barriers to quality mental health care. Here's how:

Cost — Telepsychiatry can reduce the cost of behavioral health care by providing an affordable platform for delivering service. Patients don't have to be concerned about transportation and childcare costs, lost wages, or other secondary expenses that come up when visiting a provider's office. In most states, insurers must cover video visits at a rate on par with that of an in-person visit, so patients benefit from their health coverage as well.

Distance — Video removes the geographical issues associated with providing mental health care services because the encounter can occur anywhere that both the provider and the patient have an internet connection. As with other healthcare services, rural areas are the most likely to be underserved by psychiatry practices. Telepsychiatry eliminates the additional time and cost associated with travel and makes it possible to intervene quickly in crisis situations. Remote visits can also be used to support intake into inpatient facilitiesShame — Sadly, there is still a stigma associated with seeking mental health care that can have the effect of discouraging people from getting the help they need. Telemedicine offers the ultimate in confidentiality for people who may not feel comfortable being seen in a psychiatrist's office. In addition, some people are able to open up and be more honest when communicating using electronic means rather than in-person...

CONCLUSION

Telepsychiatry: A game-changer during Covid-19 pandemic and a wave of future psychiatry in India

On March 30th, 2000, telemedicine was launched in Aragonda in Chittor district of Andhra Pradesh, India by Mr. Bill Clinton former president of the United States of America (Sharma, 2000). In 2004, The Schizophrenia Research Foundation (SCARF) pioneered the telepsychiatry services in India (Tharoor and Thara, 2020). On 25th March 2020, Government of India published telepsychiatry guidelines which were followed by on April 13th, 2020, e-Sanjeevani outdoor platform was launched (BOG, 2020; PIB, 2020). This led to a spurt of 302 percent in teleconsultation and 502 percent spike in the utilization of telepsychiatry in people above the age of 50 years in India during the Covid-19 pandemic (Ganguly, 2020). Centers for Disease Control recommended that clinical services should be provided through virtual means during the Covid-19 pandemic (CDC, 2020).

The Covid-19 pandemic has provided many lessons and revealed shortcomings in traditional health care systems. The pandemic provided an impetus for minimizing health disparities among the global population (Tandon, 2021a,b). The way the Covid-19 pandemic produced opportunities for telepsychiatry growth is an important task for all stakeholders. The online survey conducted by Indian researchers during the Covid-19 pandemic found a high prevalence of distress, fear, anxiety, depression in the general population (Grover et al., 2020). In India, the half-hearted approach by health authorities in telepsychiatry demands more sustained efforts and an increase the momentum gained in future post-pandemic time. This modality can be used to educate the public at large about issues relevant to mental health and illness. The real time sharing of information becomes crucial for health care professionals and policy makers in a crisis situation like Covid-19 pandemic (Tandon, 2021a,b). With optimal use of telepsychiatry services, the vulnerable population like the elderly, persons with comorbid conditions, minorities, and migrants can be better managed in India. Telepsychiatry assured patient's convenience, saving of time, finances, less stigmatizing, and less travel cost (Naskar et al., 2017; Malhotra et al., 2017, 2019; Khanra et al., 2021).

Referencers

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