

Re: "I found it on the Internet" Preparing for the e-patient in Oman

Nasar Alwahaibi

رد : "لقد وجدتها على الشبكة الدولية"
الاستعداد للمريض الإلكتروني في عُمان

نصر الوهبي

To the Editor,

I read with great interest the article "*I found it on the internet*" *Preparing for the e-patient in Oman*,¹ published in SQUJ in August 2010. Briefly, this article reviews the e-patient, medical student and the relationship between them. I would like to share with you and the readers my views regarding the above article. In my opinion, an e-patient is easy to deal with as he/she listens, understands and does what his/her doctor asks him/her to do properly. He/she is not difficult. This is because I find e-patients similar to university students. University students have high levels of knowledge and good communication skills and therefore cooperate well. Their unanswerable questions may be of great benefit as they may lead the teacher to undertake more research. In my opinion, the issue of preparing medical students for the e-patient in Oman is not a demanding one. In general, medical students, from SQU or the Oman Medical College, are well educated and have wide training experience. In addition, there is no specific data on the number of Omani patients seeking for health information via the Internet as Dr Masters only gave figures for general Internet use in Oman. On the other hand, non-university students, like non-e-patients, have less understanding and are less inclined to cooperate.

I also think that e-patients should be faced with e-doctors. In addition to their existing knowledge, e-doctors can enhance and increase their medical knowledge using various and wide Internet resources. Thus they will strengthen their ability to answer many questions posed by either e-patients or regular patients. Thanks to the various number of medical websites, the e-doctor can now play an even more beneficial role in the consultation than the e-patient, in particular as regards the treatment plan.

A far more pressing concern in Oman is the number of patients going abroad for treatment, even for appendicitis or tonsillitis. The number of patients that are treated abroad at Ministry of Health expenses in 2009 was 452² and the number is on rise. Governmental and non-governmental sponsorships for medical travel abroad are limited. It is important to note that the majority of Omani patients who go abroad for treatment therefore do so at their own expense. E-doctors can play a major role in reducing the number of these patients. If I can trust my doctor, then he can start treating me. Trust in treatment starts with a patient or e-patient, and then it goes to friends and family, then community and finally the whole country. Trust is an easy word to say, but it is very hard to achieve and takes a longer time to take root. Prospective and retrospective studies should be undertaken to highlight currently hidden information about e-patients and e-doctors in Oman.

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Authors' Response

Dr. Alwahaibi's close reading of our article, and the resultant comments, are appreciated. He raises several points, and we would like to respond to each of them.

First, Dr. Alwahaibi's experience with e-patients is encouraging, and reflects a similar pattern that has been found elsewhere. In my own research,¹ I found some doctors relishing these consultations, finding them stimulating, and one even likened it to an enjoyable objective structured clinical examination (OSCE). To get patients to this stage, however, frequently requires patience and guidance from the doctor. It is this patience and guidance that our article wishes to encourage.

In addition, unfortunately, my own and other research has found that e-patients are not always like this. For example, some patients who would normally be confrontational have used the information found on the Internet to raise the confrontation to a new level, in an attempt to intimidate the doctor. Patients can also become confused or misled by the information they find on the Internet if their searches are not guided. And then, there are the so-called "cyberchondriacs." Our article is aimed at ensuring that medical students are alerted to these issues, and can manage the resultant situations competently.

Second, we agree wholeheartedly that e-patients should be faced with e-doctors. Indeed, the Medical Informatics courses taught to Sultan Qaboos University students in both Phase I and II are aimed at equipping the students with these skills. I currently teach on those courses, and I will gladly share the curriculum outline with Dr. Alwahaibi (or any other reader) on request.

Third, as Dr. Alwahaibi points out, our article does not provide figures on the number of Omani patients seeking health information on the Internet. Unfortunately, no research has yet been published on that topic. Indeed, part of the motivation for the paper was to provide the impetus for a research project to do just that. Until we have such data, however, there is no reason to believe that the proportion of e-patients (compared to Internet users) is significantly different in Oman from other countries, so proportions of total Internet users can be used as a guide.

Moreover, in our article, we made the prediction that the number of Omani Internet users would follow Roger's diffusion curve,² and was set to increase at an accelerated pace in the very near future. The latest figures³ indicate that this acceleration has occurred. Our article used 2009 figures, which estimated the number of Omani Internet users at a little less than 500,000. By 2010, this figure had increased to more than 1.2 million.³ In the light of this dramatic increase, the need to accommodate the e-patient is possibly of greater urgency than was the case when the article was written.

Finally, I am not qualified to comment on the reasons for Omani patients seeking medical treatment elsewhere, but I certainly agree with Dr. Alwahaibi that a student who has been well trained to deal with the information will undoubtedly inspire confidence in any e-patient. Further, I agree that studies of e-patients and e-doctors should be undertaken in Oman; if Dr. Alwahaibi would like to collaborate on such a project, I would welcome further correspondence on the subject.

Ken Masters

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