

Title:

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Implementation of a hepatology and gastroenterology teleconsultation for our penitentiary center

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Dear Editor,

The use of telemedicine in Penitentiary Centers (PC) is an effective measure to improve quality access to specialized care (secondary prevention) and reduces the inherent costs derived from physical consultations of inmates in hospitals¹.

Regarding to a project of our Community Health Service we have enthusiastically begun a Gastroenterology teleconsultation in our PC at the end of 2020. This modality completes the monthly/on-demand Hepatology consultation carried out in this PC since 2015.

In this sense, the Hepatology consultation has used shared accesses with the PC practitioner to the same Clinical App of our Health Service. This one has focused mainly on the early detection of hepatitis C (HC) and the achievement of sustained viral response (SVR) after optimal antiviral treatment. On the other hand, there have been barriers to get treatments, such as short-term sentences or frequent changes of PC². Thus, since 2015, a total of 126 patients have been treated with antivirals, achieving a SVR of 94.4% (119), consistent with the previously outcomes reported^{3,4}. In a coordinated attitude with the medical services of the PC, the main aspiration is the early diagnosis of HC for its eradication in the PC, given the high prevalence known in this collective. This measure has already proven to be cost-effective previously⁵.

The Gastroenterology teleconsultation uses the same bases taken advantage from the Hepatology one. In this case, it involves monthly consultations with the accumulation of susceptible patients for first evaluations, and of those already physically assessed previously. We hardly believe this new consult will achieve an indirect short-term

economic impact (avoiding inmate transient exits) and higher quality and more personalized medical care.

Finally, these kind of consults pursue a “tailor-made” medicine for each different collective that really requires, which is the trend in current medicine.

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