

ABSTRACT

Introduction: Primary care is faced with the challenge of ensuring a comprehensive and needs-based offer. Here, the video consultation could be a solution to relieve doctors. In order to be able to fully exploit the potential of telemedicine and to implement it sustainably into routine care, a clear assessment of the evidence as well as a user-oriented technology development is necessary.

Material and Methods: In addition to a literature-based part, the present work includes an exploratory, cross-sectional observation study with hypothesis-generating questions, for which qualitative methods of empirical social research (semi-structured, guided interviews) were used. The eleven General Practitioners (GP) interviewed were selected with a „convenience-sampling“ and questioned on adoption and acceptance of the video consultation. Data analysis was carried out with the thematic analysis according to Braun und Clarke [1].

Theory: Video consultation as a field of telemedicine basically includes the review of medical images of multiple, spatially and temporally distant participants using information and communication technologies to determine a diagnosis [2].

Results: The use of video consultation shows positive effects in terms of provider-reported, patient-reported and healthcare-related outcomes. In addition, it turns out that the respondents expect a positive performance of video consultations and a rather low effort. Furthermore, individually different social influences, currently (still) some inhibiting framework conditions as well as the influence of a clear evidence base on the use of the video consultation.

Discussion: With regard to the methodology, Helfferich's quality criteria for qualitative interviews [3] examine the limitations of the underlying survey and the strengths that exist. In the results, the high workload and desire for a higher work-life balance voiced by respondents is in line with the trend towards delegation of medical services to other health professions. Furthermore, the positive effects of video consultations on the patient-reported outcomes also match the statements of those surveyed. With regard to the healthcare-related outcomes, some questions still remain unanswered, such as the mortality rate, which is higher in case of using video consultations.

Conclusion: The degree of alignment with the needs of the target group(s) as well as the participation of as many user groups as possible is crucial for a successful implementation of video consultations in primary care. Regardless, the evidence of video consultations

Meyer zu Theenhausen / Die Videosprechstunde in der hausärztlichen Versorgung

should continue to be an important decision criterion for further development of this care instrument.