

LETTER TO THE EDITOR

Tablets: The New Prescription?

Jason Arora, MD, MA¹, Imran Mahmud, MD, MA²

¹Department of Global Health and Population, Harvard School of Public Health, Boston, Massachusetts; ²Department of Health Policy and Management, Harvard School of Public Health, Boston, Massachusetts.

We are pleased to see positive results from the use of tablet computers (tablets) in engaging patients, as presented by Greyson and colleagues.¹ Patient engagement is correlated with better patient-reported health outcomes.² But how do we justify any additional costs in the current climate?

The answer lies in the value delivered.³ Achieving high-value care means delivering the best outcomes at the lowest cost. Indeed, a growing number of studies are demonstrating improved outcomes with mobile technology. In Cleveland, tablet-based self-reporting in cancer patients improved communication of symptoms to physicians.⁴ In Australia, chronic obstructive pulmonary disease patients engaged in tablet-facilitated physical rehabilitation reported improved symptoms and exercise tolerance.⁵ In Haiti, tablet-delivered education sustainably improved knowledge of human immunodeficiency virus prevention and behavior among internally displaced women.⁶

What the extant literature is lacking, however, are studies demonstrating the cost-effectiveness of mobile interventions. Digital platforms are unlikely to gain traction without these data. Some exceptions exist, but they are in the minority.⁷ It is clear that engaged

patients demonstrate better outcomes. However, future studies exploring the use of digital platforms would be well advised to include measures of cost-effectiveness to build a true value-based rationale for their integration into daily practice.

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Received: March 8, 2014; Accepted: March 20, 2014
2014 Society of Hospital Medicine DOI 10.1002/jhm.2209
Published online in Wiley Online Library (Wileyonlinelibrary.com).