

Disrupting technologies: a look into the crystal ball

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It is coming up to the end of the year and traditionally we think about and reflect on recent events. Equally, we also look forward to what the future may bring including technological changes that could impact on our clinical practice in the near future.

We have already witnessed some incredible changes over the past few years, including the widespread use of mobile phones, computers and mobile devices as well as the internet. We are likely to see more of us benefiting from fast mobile internet, connecting to our tablets and smartphones. For doctors, we can have nearly instant access to large volumes of medical information, which can be used for both learning and reference. We are now able to communicate to our colleagues and staff more easily and effectively.

Excellent examples of this are described in a recent *New York Times* article.¹ Of course no software or hardware will replace a healthcare professional, certainly in our professional lifetime. The consultation with a patient is still likely to be the cornerstone of a patient interaction, though there may be some changes. For example, we may be communicating more often with technologies such as Skype, but the basic skills of history taking and clinical examination will remain unchanged (though it is hard to do a full examination on a video call). Some of the comments contributed by readers in the *New*



York Times article¹ make some very good points. One person noted that their doctor made impressive use of the iPad but hardly looked at them. A valid observation that serves as a useful learning point for all of us.

Technology can have a disruptive influence. For example, an article published online by *Time* magazine² looked at a website service called ZocDoc³—this is a free service that allows a patient to choose a doctor, based on reviews and location and then book an appointment. Doctors pay the site a fee so that they can expand their patient base. This is a service based in the US and some of the principles may not always apply to UK practice. However, the idea behind the site, where the patient is in charge of choosing their doctor and booking their appointment based on data supplied, could stimulate interest from healthcare providers in this country.

This could be a more productive and efficient way of matching patient demand to resources and it could

be cost effective. It could equally disrupt the professional monopoly we currently enjoy and could drive down costs and empower patients. In turn, this could put pressure on staff pay as we scramble to compete for patients in this virtual market place. Harnessing patient power in a transaction like this could have a substantial impact on the patient-doctor relationship.

Despite all the amazing technologies that are becoming available, we still rely on our expertise, knowledge, clinical and communication skills and though technology is helpful, we still cannot beat the human input—yet!

1. <http://www.nytimes.com/2012/10/09/science/redefining-medicine-with-apps-and-ipads-the-digital-doctor.html?pagewanted=1&r=1&ref=thedigitaldoctor>
2. http://ideas.time.com/2012/10/08/the-disrupters/#slide/bre-pettis-makerbot/?&_suid=135111149650505105283683247285
3. <http://www.zocdoc.com/>