REMOTE PRENATAL CARE IN COVID-19 CONTEXT

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Sr. Editor, We recently read the interesting topic on Remote Prenatal Care as a strategy against Covid-19 (1), which we want to contribute with relevant information about the topic, with information on how telemedicine is developing in some Latin American countries and specifically the use of telemedicine in Peru for prenatal care.

Among the group of patients vulnerable to contracting COVID-19 disease are pregnant women, even more so if they carry out their prenatal control in hospitals in large cities with a high infectious focus; In view of this, to reduce the risk of COVID-19 transmission, an alternative is obstetric teleconsultation, which is already underway in some establishments. Allowing to monitor pregnant women permanently.

The World Health Organization defines telemedicine as "Provision of health care services in cases where distance is a critical factor, carried out by health professionals who use information and communication technologies for the exchange of valid information, to make diagnoses, prevention and treatment of diseases, in order to improve the health of people and their communities. (2)

It is important to highlight the experiences in telemedicine expressed in the world, such as: The European Commission, in 2018, projected that the global telemedicine market would reach 37 million euros in virtual medical care by 2021, these projections are now projected with the COVID-19 pandemic to be overcome by the increased demand for health consultations due to the confinement experienced by the continent (3). Based on this information, the European continent shows the resolution capacity of connectivity in its population.

It is appropriate to highlight the application of telemedicine in Latin American countries, in order to frame a context of the Latin reality on the present topic; Chile used telemedicine for the exchange of information, diagnosis, treatment and prevention of diseases such as juvenile idiopathic arthritis consigned in children with chronic pathologies, improving the health of patients and the community environment (4). Therefore, telemedicine in Chile partially corrected the inadequate distribution of specialists in the Chilean geography favouring access to health.

In relation to the neighbouring country of Colombia, we can highlight the implementation of legal norms such as resolution 2654 of 2019, which establish as a primary purpose to facilitate access, the opportunity in the provision of services to the population, especially, which has limitations of access to basic services in remote areas of the country (5). It is important to highlight that there is a multisectoral work articulated with the guidelines of the Ministry of Information Technology and Communications to promote telehealth programs and interoperable electronic medical records.

Cuba, despite the economic and technological restrictions imposed by the United States government, is a power in medicine. In this sense, Cuba is no stranger to implementing telemedicine as a means of closing gaps in access to health; so much so that they are already developing telemedicine programs for export. Thus, the competent bodies have been evaluating policies for the development of computerization and the National Health System, determining what the country's potential is for exporting telemedicine services using applications

developed in its territory. There are studies that demonstrate the country's strength to develop exports of mobile telemedicine application services (6).

Peru has a varied, multicultural geographical relief, infrastructure deficit and low health personnel, however; have made telemedicine in these times obtain a more leading role in the care of pregnant women in urban areas, but not in rural areas. Progress in our country is very basic, which indicates that the delay is due to the fact that telemedicine is supported by internet broadband and if it is not good, it will not be possible to have an adequate diagnosis (7). Adding to the problem, pregnant women do not have a mobile phone with internet service, communication signals or the quality of the signal is poor, not allowing adequate communication between the pregnant woman and the health personnel, generating difficulty in implementing remote care in aid to pregnant women. Being a high priority challenge for different levels of government in the process of access to maternal health, manage and implement broadband communication antennas in rural areas and thus provide timely care, reducing the risk of exposure to pregnant women. (8).

The population that most accesses the internet are those in the urban area with 62.2% compared to the rural area that accesses 17.7% (**Table 1**) (9). The president of the Lima Chamber of Commerce pointed out that Peru has a great technological gap compared to other countries, that although there is an initiative by the state and private companies, it is still insufficient (7).

In short, telemedicine is especially important and fundamental tool in this time of isolation. Over time and as technology advances and offers us more instruments to work in this modality, specialization courses focused on improving this practice must be created in parallel, as well as standardized care protocols that guarantee that anyone in the world has access to these services. If a person needs a health professional, they can do so with confidence and security without leaving home, not meaning that the professional-patient bond is eliminated, but rather that it is used as a tool to help bring those who are far away (10).

Table 1. Population aged 6 years and overusing the internet, by geographical area, 2008-2018

		Proportion of the population accessing the internet										
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
Residence area												
Urban	40.2	42.8	43.5	44.9	47.3	48.3	49.1	49.6	54.6	58.2	62.6	
Rural	8.5	9.2	9.9	10.0	10.4	10.9	11.5	12.0	14.2	15.4	17.7	

Source: Instituto Nacional de Estadística e Informática. National Household Survey 2019.

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