

“They care about us”: Assessment of telemedicine by people with HIV using this strategy in the public health system of Buenos Aires city

T. Kierszenowicz¹, M. Bullo², M.C. Acosta², M.J. Rolon³, M. Cabrini³, D. Cecchini⁴, C.G. Rodriguez⁴, P.G. Scapellato⁵, E. Bottaro⁵, M. Losso², M. Kundro²

¹The National Scientific and Technical Research Council, Buenos Aires, Argentina, ²Hospital J.M. Ramos Mejía, Buenos Aires, Argentina, ³Hospital Dr. Juan A. Fernández, Buenos Aires, Argentina, ⁴Hospital Dr. Cosme Argerich, Buenos Aires, Argentina, ⁵Hospital Donación F. Santojanni, Buenos Aires, Argentina

Background

- In 2020, telemedicine (TM) became available to be offered as a healthcare strategy to mitigate the effects of the COVID-19 epidemic in the follow up of chronic diseases in **Buenos Aires, Argentina**.
- The local Ministry of Health promoted telemedicine through virtual platforms of video-consultation.
- From **October 2020 to September 2022**, a research consortium by four HIV and infectious diseases units of general acute public hospitals of Buenos Aires city began an implementation study aimed to analyze obstacles and facilitators of telemedicine in the care of people living with HIV (PLHIV).
- The study started during the COVID-19 outbreak and continued until complete flexibilization of risk mitigation measures came through.



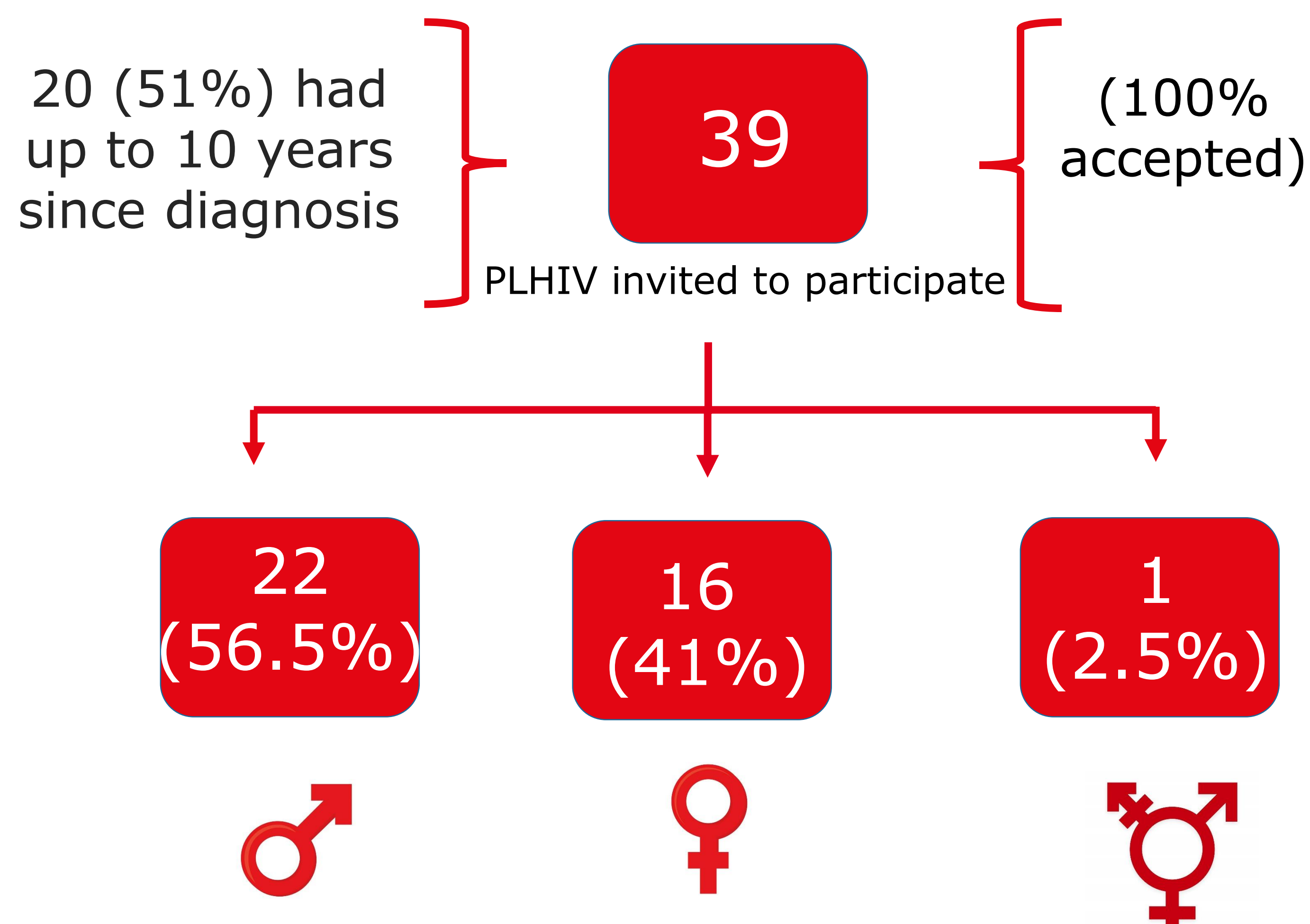
Fig 1: Sites location in Buenos Aires City. Population: 3.120.612

Methods

Objective: This work analyzes PLHIV’s perceptions to understand the opportunities for the implementation of this strategy for HIV care.

- We collected qualitative data prospectively through open-ended virtual interviews with PLHIV who used telemedicine.
- Interviewees were identified considering their gender, age, hospital unit, and years from diagnosis.
- **Sample size** was determined by theoretical saturation according to the objective.
- Analysis was done using Atlas.ti®.
- Rather than a statistical analysis, this research favored an approach focused on both the **diversity and the common experiences of PLHIV**.

Description of the interviewees



Results

1. Telemedicine was positively rated by all interviewees. Different arguments were pointed out, such as avoiding commuting to hospitals and reducing consultation time.

“For the teleconsultation, you spend less time because you are at home or anywhere else. You just stop doing what you are doing, have the teleconsultation and then continue again with your life. You avoid travel to the hospital and save the time involved going there. Also, you save the time that you would wait in the waiting room at the clinic” (PLHIV)

2. While some interviewees highly valued the fact of receiving a medical checkup, other PLHIV conceived that teleconsultations were a way to obtain care in a hostile setting triggered by the COVID-19 outbreak.

“How was your experience with teleconsultation?” (interviewer)

“I felt comfortable. Additionally, teleconsultation was a way to show that they cared about patients” (PLHIV)

3. These valuations were observed mainly in those interviewees who referred to having built a close relationship with their doctors over time. They positively rated the initiative led by hospital units to establish a contact in an isolated circumstance.

“If your doctor tells you to use this tool [telemedicine], obviously you accept it because you trust your doctor” (PLHIV)

“Did you have any problems when having the teleconsultation?”

“No because my Doctor is always wonderful. I've known her for a long time. She is always very attentive and respectful. When connections failed, we reconnected and it worked fine.” (PLHIV)

Discussion

- This study sheds light on **the affective dimension of HIV care** that goes beyond common medical priorities focused on individual viral load suppression and is not ordinarily quantified by health systems
- Rather than a way of having medical checkups, **telemedicine was considered a form of feeling cared for** and an opportunity to maintain the personal relationships built over time between PLHIV and doctors.