

25th Global

DIABETES SUMMIT AND MEDICARE EXPO

December 04-05, 2017 Dubai, UAE



Hamzeh J Awad

Al Khawarizmi International College (KIC), UAE

The role of tele-health in diabetes management: Does the cloud based smart electronic health application (SEHA) provide the comprehensive approach for diabetes prevention and management?

Tele-health in Healthcare setting is increasing enormously worldwide. We describe an eHealth promotion knowledge-to-action practice concept on how Diabetes Mellitus (DM) prevention and management can be readily incorporated into Telehealth practice. In addition to call to action to target patients and encouraging them to participate in health behavior change, attention is given to the role of Telehealth components of DM prevention and management. Telehealth services with proven track records today can be broadly categorized into 3 groups: tele-consultation/telemedicine, tele-monitoring and electronic health record. Our main focus on tele-monitoring as it is concerned to make patient center of care and monitor their vital signs. Current eHealth application is not considered as an ordinal software only; it provides several smart features to patients such as: automatic blood glucose data entry (faster than manual entry, simple, less manual errors); connections with food and physical activities databases; reminder function (e.g. to test blood glucose levels, have meals, do physical exercise and medication reminder); communication with healthcare provider and tailored personalized feedback (alarming system). Tele-monitoring helps healthcare professionals keep a close eye on patients dealing with chronic medical conditions such as vital signs of blood pressure and glucose level. Using tele-monitoring in metabolic disorders allows healthcare professionals to see a patient's entire medical history, helping them make more accurate and timely diagnoses and treatment of their condition. Researched close management of diabetic patients through tele-monitoring showed significant reduction in glycemic level. Yet, the magnitude of its effects remains debatable, especially with the variation in patients' characteristics (e.g., background, ability for self-management, medical condition, education). Therefore, tele-monitoring glucomail application is developed for monitoring lifestyle parameters and control glycemic level to manage DM patients and prevents its associated complications.

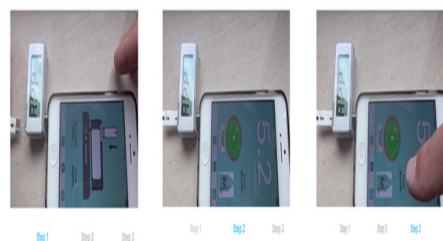


FIGURE-1: EASY THREE-STEPS TO USE THE SMARTPHONE-GLUCOMETER AND EMAIL IT FOR CLOUD DASHBOARD.



FIGURE-2: CONVERSATION MAP HELPS ACCURATE COMMUNICATIONS, BETWEEN HEALTHCARE PROFESSIONAL AND PATIENT.

Recent Publications

1. Dean E, Lomi C, Bruno S, Awad H, O'Donoghue G (2011) Addressing the common pathway underlying hypertension and diabetes in people who are obese: The Ultimate knowledge translation gap. *International Journal of Hypertension*; 835805.
2. Younes N A, Albsoul A M, Awad H (2004) Diabetic heel ulcers: a major risk factor for lower extremity amputation. *Ostomy Wound Manage*; 50(6): 50-60.

Biography

Hamzeh J Awad has completed his PhD from the University of Munich, Germany and worked in healthcare operation and system, planning and development, disability, rehabilitation, diabetes and eHealth in different countries such as Germany, Belgium, Jordan, Saudi Arabia, UK and UAE. He was also appointed as a Researcher at WHO Center in Munich, Researcher at University Hospital of Technical University of Dresden, Assistant Professor at King Saud University in Riyadh and Research and Clinical programs Development Manager at Prince Sultan Rehabilitation City, KSA.

hamzeh.awad@khawarizmi.com, hamzehawad@yahoo.com