

# New World of Neurology in an Electronic Age

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# Disclosures

None

# Objectives

To discuss

- Where we are now: WFN eLearning survey
- eLearning in neurological
  - a) Education
  - b) Clinical care
  - c) Research

# WFN eLearning Survey

- Carried out by eLearning Task Force of WFN Education Committee
- Brief questionnaire sent to all WFN member societies (n=113)

Gouider, Freedman, Patterson. World Neurology, February, 2012

# eLearning Survey: Response Rate

<b>Asia</b>	<b>South America</b>	<b>Europe</b>	<b>North America</b>	<b>Africa</b>
18	6	18	4	8

	<b>No Response</b>	<b>Response</b>	<b>Percent Response</b>
Developed countries	31	13	29.5%
Developing countries	30	39	56.5%

Greater response from developing countries suggests greater need in these countries

# Selected Survey Findings

- 79.6 % of members of WFN societies and institutions have internet access
- 60% of societies have a website
- 54% of societies have journals but only 63% of these have journal online
- 44.9% identified cost as barrier to access eLearning and telemedicine

# Selected Survey Findings

- Great interest in CME using eLearning
- Interest for increasing eLearning opportunities may be higher in developing countries than in developed countries
- Infrastructure for developing eLearning and telemedicine programs exists in many countries. Cost and time constraints are potential barriers.

# Selected Survey Findings

- Need
  - a) Leaders with abilities to initiate eLearning programs
  - b) Experts who can create the program content
- Countries want focus for eLearning and telemedicine to include movement disorders, epilepsy, and stroke



# Key Messages

- Not in a global electronic age yet
- Developing countries need more e-resources

But

- Advances are being made
- Need to anticipate growing impact of electronic age on neurology
- Need to maximize the educational, clinical and research role of e-activities

# Education

What will classroom and lecture hall  
look like in future

Photo will be shown

# Videoconferencing

- Two or more sites communicate
- Real time two way video and audio transmission
- Private (i.e., participating sites must sign and are identified)
- Examples
  - a) Television quality equipment
  - b) Skype
  - c) Google Hangouts

# Webcasts

- Real time or recorded video and audio broadcast over the internet
- Limited two-way interaction
- Not private
  - a) Don't know who is listening or watching
  - b) Only know IP address in hindsight

# Videoconference Initiatives

- International Behavioural Neurology Rounds
- Africa-Canada Behavioural Neurology Rounds
- Neurology International Residents  
Videoconference and Exchange (NIRVE)

# International Behavioural Neurology Videoconference Rounds

## History

- First round in 2005
- Part of larger initiative through CISEPO and Peter A Silverman Global eHealth Program
- Baycrest (Canada was the coordinating hub)

## Initial goal

- Build bridges through health education involving colleagues in Canada, Israel, Jordan, West Bank

All sites are equal partners

# International Videoconference Rounds Expanded Since 2005

- American, Canadian, Cuban, Israeli, Jordanian, Russian, Saudi Arabian, South African, Spanish and Swiss (WHO) hospitals have participated
- Rounds are held monthly



Photos will be shown

# Format

- Case presentations (with patient interviews)
- Lectures (including videos)

Short video clip of international  
videoconference round

# International Videoconference Challenges

- Language
- Time zones
- Interactivity
- Evaluation

# Clinical Care

## Electronic Assessments Tools (no paper)

- Includes history, physical exam, and cognitive assessments
- Benefits include:
  - a) Consultation letters automatically generated
  - b) Drug interactions flagged
  - c) Differential diagnoses suggested

# Example of Electronic Assessment

## Toronto Dementia Research Alliance

- Electronic history intake form and cognitive assessment (Behavioural Neurology Assessment – Revised) on iPad

## Challenges

- Linkage with existing hospital electronic health records, and other databases
- Sustainability

# Research

## Electronic assessment tools

- Capture data for clinical research at point of care
- Automatic creation of subject registry for research study recruitment

# Other Example of the Electronic Age

- Robots
- Virtual patients



Photo and video will be shown

# Conclusions/Key Messages

- Healthcare is becoming more “electronic”
- Parts of the world still have a long way to go towards an electronic age
- Electronic “tools” will have growing impact on
  - a) Education
  - b) Clinical service
  - c) Research

# References

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