

Remote consultations

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Belgium is indeed a curious country where health authorities sometimes make decisions without prior studies and based on their convictions. During the Covid crisis, there was a necessity to support doctors who worked on a fee-for-service basis and were compelled to resort to teleconsultations. Without any specific economic basis, in 2023 it was hastily decided that reimbursement would be €20 per remote contact. With the visible end of the epidemic (it continues in the form of Long Covid, but no one wants to talk about it), our competent authorities have decided on three categories of possible contact. A phone call for €10, a video for €20, and face-to-face contact for €30. The motivation behind such differences is not entirely clear. Perhaps it is justified by the belief that good medicine cannot be practiced without examining the patient, creating a hierarchy that disregards a necessary analysis of reality.

Here, only the use of WhatsApp is mentioned. It is lamentable that the Belgian Public Health Service did not, like Denmark, provide patients with a secure teleconsultation system. But WhatsApp is not the only channel. Telephone usage is still rare, often replaced by SMS, Messenger, Telegram, Signal, and of course, email. It can be overwhelming if patients are not guided in their communication.

A few memorable teleconsultation experiences among hundreds of others are shared here to emphasize that general medicine is not just a means of communication but about communication and trust.

- Lou in the Philippines

Lou is a friend of one of my eldest sons. I was surprised to see him on a beach. He is in the Philippines, on an island. He informs me that he is on vacation and fishing. His face is swollen, he is anxious, and he is itching all over. Yes, he ate fish. I sent him a prescription for Medrol. Three days later, it's over. He learned that he is allergic to fish.

- Karim in Bali

Again on WhatsApp, Karim introduces me to his daughter Irma, who is 10 years old. A lovely child, with a very red face. Karim has been successful in business. He left his Belgian hometown where I knew him as a child and followed a woman. They are in Bali. The child is sick, with a fever, and I see red spots on her skin. When the father runs his hand over the skin, he feels like small grains. I ask to see her tongue, which looks like a strawberry. The diagnosis is made. Although scarlet fever has become rare in Belgium, it can still be dangerous elsewhere. I send documents in English, request a strep test, and prescribe amoxicillin. A few days later, I received a message. It was strep A, and the little one is cured. Later, we will check her urine.

- Josiane in Spain

I know Josiane well, who, after 65 years, retired with her husband on the Spanish coast. It's cheaper for their small pensions, and they enjoy cycling. I see her on WhatsApp, and she's in pain. Her leg, particularly the calf, has suddenly become very, very painful. She has been smoking forever, and nothing has persuaded her to quit. She tells me her foot hurts, and she says it feels cold. There is little doubt about developing thrombosis. I tell her to go to the emergency room, but she refuses. She hasn't yet developed trust with my Spanish colleagues. I decided she must return as soon as possible. It's a gamble, but I'm unlikely to be wrong. I arranged for an angiogram for her as soon as she landed. The following week, she's on the operating table for a bypass. A year later, she messages me on WhatsApp from her distant Spain. She's cycling. Everything is fine, and she no longer smokes.

- Antoin in Québec

This young man is a friend of a patient. He sends me a message from Quebec via WhatsApp.

I returned to Belgium in October/November, and upon my return to Canada, I caught a cold on the plane (runny nose, fatigue, heavy head). The day after my return, I went back to work, and that's when it all started. My condition worsened during the day. I decided to leave work early. And it was on the way home that I began to "lose consciousness": sudden memory loss, intense palpitations, tremors, hot and cold flashes, heavy head, completely dazed. I lay on the floor in a café for 2 hours until a friend came to pick me up and take me home. The rest of the week, I continued to have these strange episodes. Panicked, I went to the emergency room (fearing palpitations/low blood pressure). Cardiac tests revealed nothing. After seeing the night doctor, he said I likely had the flu or Covid, and that I seemed to be having panic attacks (I felt a lot of anxiety at that time).

Since then, I've had 2 weeks off, and I've been back at work for over 2 weeks. But things haven't improved. Episodes of: brain fog, blurry vision (tired eyes), intense exhaustion, memory loss, inability to concentrate, heaviness in my whole body/head, anxiety, etc.

I've missed work several times. The biggest episodes occur after exertion (running, work events, dinner with friends, intense concentration, etc.). I've slept 10-12 hours a night for the past month (usually 7-8 hours).

I had long Covid 2 years ago. I stayed home for 1 and a half/2 months, sleeping. But it wasn't as intense as this time.

A few days later, we chatted for a good hour on WhatsApp. Long Covid is undeniable with its array of unexplained symptoms; intense fatigue previously unknown, cognitive impairment, brain fog, memory loss, exhaustion from exertion. I explain that he is experiencing cerebral vascular neuroinflammation with coagulation disorder caused by SARS-CoV-2. He will see me upon his return to Belgium.

- A phone call, Besançon, France, July 2024

The phone rings just as we're having coffee. My wife and I are at the Brasserie Granvelle in Besançon, behind the magnificent palace of the same name, an ambassador of Charles V. A wonderful city for a few days' holiday. Many patients have my number and don't hesitate to ring me, even on holiday. After all, at 77, soon I won't have the chance to be bothered to ask my opinion.

Maria is worried, her little granddaughter, aged 2, is vomiting. I tried to direct her to our assistant. It's no use. I have to hear everything. The assistant said we had to wait, but he also said it reminded her of scarlet fever. So the next day she wasn't any better, and they went to A&E. The doctor wouldn't let them in. The first doctor didn't want to see them because she wasn't yet two. They needed an emergency pediatrician. He didn't say what he thought, but he gave Augmentin.

The next day, the child vomited and then had diarrhea and then spots on her hands. And on her feet? Yes, and on her feet.

So first there's a foot, hand and mouth, then a terribly anxious grandmother who looks after her little girl while the mother is on holiday, a young doctor who thinks out loud, another doctor who prescribes a useless antibiotic. Now the child is tired after a hand-foot-and-mouth disease, but she is also a victim of medicine and Augmentin, which gives her vomiting and diarrhea. It's always useful to reproduce the chain of errors.

I reassure her. Yes, the little one is playing. She's wide awake but doesn't want to eat anything. I advise her to leave some sweet water and salted biscuits on the table. The grandmother can also buy some probiotics. It's not really much use but you have to let her buy something. I can hear her sighing over the phone, she's reassured. I must say that I had to give the same kind of advice when the baby's mother was two years old.

Here is a modest bibliography on teleconsultation. An additional reference on decision-making in uncertainty would be beneficial, although it does not depend on the mode of communication.

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