

targeted healthcare outcomes with the components of the ICF Classification.

**Results.** We identified seventy-eight HTA reports related to nursing care, published between the years 1992 and 2018. Overall, forty-four reports did not outline any particular outcome and had to be categorized as unclear. The remaining thirty-four reports addressed three ICF components (body functions, activities/ participation, environmental factors) with sixty-eight ICF content categories. Frequent ICF contents were services, systems and policies (code e5, n = 15), cardiovascular/ respiratory functions (code b4, n = 10), mental functions (code b1, n = 7), digestive functions (code b5, n = 7), domestic life (code d6, n = 7), and sensory functions/ pain (b2, n = 6). Six HTA reports evaluated interventions/ technologies with presumed effects on at least four ICF content categories from two ICF components.

**Conclusions.** HTA in the field of nursing is often complex, including multicomponent approaches and a wide range of potential outcomes relevant for the HTA assessment. The ICF model might be useful to support a more streamlined understanding of complex interventions in this sector. Furthermore, reports might benefit from linking the ICF Classification with HTA, especially for the assessment of complex interventions.

## VP27 Countrywide Screening Of Cardiovascular Diseases Through Telemedicine

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**Introduction.** Through telemedicine, advantageous telediagnostic systems can be developed to improve the health care of populations that do not have access to specialists. However, evidence on how such innovation technology can enhance the countrywide electrocardiographic (EKG) screening to support a prevention program for cardiovascular diseases is limited. The usability of telemedicine to improve the countrywide detection of heart diseases according to the national cardiovascular disease prevention program in Paraguay was investigated.

**Methods.** This cross-sectional survey included adults ( $\geq 19$  and  $\leq 80$  years) and children ( $\geq 1$  and  $\leq 18$  years) with medical prescription. The study was carried out by the Telemedicine Unit of the Ministry of Public Health and Social Welfare (MSPBS) in collaboration with the Department of Biomedical Engineering and Imaging of the Health Science Research Institute (IICS-UNA) to evaluate the utility of a telediagnostic net for detection and prevention program of cardiovascular disease in public health. For this purpose, the results obtained by the EKG telediagnosis net implemented in sixty countrywide public hospitals were analyzed and verified the adherence to the cardiovascular prevention program.

**Results.** A total of 246,217 remote EKG diagnoses were performed between January 2014 and August 2018. Of the total, 80.6 percent (198,494) corresponded to adults and 19.4 percent (47,723) to children. The adult diagnoses were mainly normal (66.3 percent), sinus bradycardia (11.2 percent), right bundle branch block (4.8 percent), left ventricular hypertrophy (4.7 percent), ventricles repolarization

disorder (4.4 percent), sinus tachycardia (4.4 percent), ischemia (1.7 percent), atrial fibrillation (1.1 percent), left bundle branch block (0.7 percent), and unspecified arrhythmias (0.6 percent). The children's diagnoses were mainly normal (79.4 percent), sinus bradycardia (10.6 percent), sinus tachycardia (3.2 percent), unspecified arrhythmias (2.8 percent), right bundle branch block (1.9 percent), left ventricular hypertrophy (1.0 percent), left bundle branch block (0.4 percent), ventricles repolarization disorder (0.3 percent), and atrial fibrillation (0.2 percent). The mean adherence rate to the prevention program was 2.3 between 2014 and 2018 for each thousand diagnosis performed.

**Conclusions.** The results show that the telemedicine can enhance significantly the EKG screening to support a prevention program for cardiovascular diseases and health programs. However, before carrying out its systematic implementation, a contextualization with the regional epidemiological profile must be performed.

## VP28 Building A Virtual Diagnosis Network Through A Telemedicine Platform

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**Introduction.** Advances in information and communication technology (ICT) and health technology have enhanced healthcare for many countries around the world. The challenge for low income setting countries is to build a telemedicine platform to enhance the community hospital diagnosis response capacity. Populations living in remote areas did not have access to specialist care and quality diagnostic services and thus depended on the low response capacity of their local health system. There were subsequent equity issues between urban and rural populations. In this context the virtual telediagnosis network should be directed towards developing better equity in the provision of services in remote locations without access to specialists. The usability of a telemedicine platform to enhance the virtual diagnosis network of community hospitals in rural areas of Paraguay was investigated.

**Methods.** This descriptive study was carried out by the Telemedicine Unit of the Ministry of Public Health and Social Welfare (MSPBS) in collaboration with the Department of Biomedical Engineering and Imaging of the Health Science Research Institute (IICS-UNA) and the University of the Basque Country (UPV / EHU) to evaluate the utility of a telemedicine platform to enhance the virtual diagnosis network of community hospitals. For this purpose, the results obtained by the virtual telediagnosis network implemented in sixty public countryside community hospitals were analyzed.

**Results.** A total of 427,026 remote diagnoses were performed between January 2014 and October 2018 in sixty community hospitals. Of the total, 35.76 percent (152,703) corresponded to tomography studies, 62.55 percent (267,100) to electrocardiography (EKG), 1.68 percent (7,204) to electroencephalography (EEG) and 0.01 percent (19) to ultrasound. There were no significant differences between the remote and the face-to-face diagnosis. With the remote diagnosis a reduction of the cost was obtained, that supposes an important benefit for each citizen of the sixty communities.