

Behavioral Economic Principles Used During The COVID-19 Pandemic Increased Access to US Dermatologists

HERSHEY , PA, UNITED STATES, July 12, 2021 /EINPresswire.com/ -- When the COVID-19 pandemic is mentioned, images of busy Emergency Rooms and over-filled Intensive Care Units come to mind. However, COVID-19 greatly affected all sub-specialties of medicine, especially the practice of dermatology. In the rapidly changing state of healthcare delivery during COVID-19, some fields

like dermatology, needed to rapidly innovate and adapt telemedicine resources given the implementation of state-wide “shelter-in-place” and quarantine orders.



By changing the way we asked the question, we were able to increase the number of patients willing to engage in teledermatology”

Morgan Chambers, BS

Teledermatology is a subspecialty of telemedicine that is used to consult, diagnose, treat and even educate patients about skin disease. The term was first coined in 1995 by dermatologists Perednia and Brown who studied this model in a rural area and published their findings in the

scientific literature. Even before COVID-19, teledermatology was starting to become a popular option for patients who presented to their dermatologist for a simple follow up visit. However, during COVID-19, this service rapidly expanded to include new patients and complex issues that were previously not suited for a telemedicine visit. A new [study](#) in SKIN, the Journal of Cutaneous Medicine, discusses how one institution used behavioral economic principles to rapidly implemented their teledermatology program during the COVID-19 pandemic.

Morgan Chambers, BS, the lead study author discusses how her team at the Penn State College of Medicine in Hershey, PA used a behavioral economic principle called “choice architecture” to rapidly implement a teledermatology service during COVID-19. Choice architecture, coined by behavioral economists Thaler and Sunstein in 2008, refers to the way choices are presented, ultimately impacting decisions. For example, countries with low rates of organ donation ask their citizens to “opt-in” by checking box, while countries with extremely high rates of donation are asked to “opt-out” by checking a box. In short, a person’s decision can be influenced by how the information is presented to them.

The authors found that only 14.6% of patients signed up for teledermatology when provided with an “opt-in” script whereas 22.8% of patients signed up for the same service when provided with an “opt-out” script. An odds ratio was calculated which showed that the odds of patients

accepting tele-dermatology were higher among those with “opt-out” script, compared to those with “opt-in” script. This was a similar behavioral pattern to the organ donation example discussed above. Chambers said, “In short by changing the way we asked the question, we were able to increase the number of patients willing to engage in teledermatology”.

The authors conclude that teledermatology limited the anxiety of exposure to COVID-19 as well as the anxiety of an undiagnosed medical condition. They further hypothesize that the benefits of teledermatology will continue even after COVID-19 has resolved by decreasing clinic wait times and allow for more efficient triage of skin diseases.

Jordan Lim
Penn State College of Medicine
+1 717-531-6820
jlim1@pennstatehealth.psu.edu

This press release can be viewed online at: <https://www.einpresswire.com/article/545869916>

EIN Presswire's priority is source transparency. We do not allow opaque clients, and our editors try to be careful about weeding out false and misleading content. As a user, if you see something we have missed, please do bring it to our attention. Your help is welcome. EIN Presswire, Everyone's Internet News Presswire™, tries to define some of the boundaries that are reasonable in today's world. Please see our Editorial Guidelines for more information.

© 1995-2021 IPD Group, Inc. All Right Reserved.