



Smartphone, Vestibular Hypofunction, Teleconsultation and COVID-19 Pandemic

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Dear editor, we would like to share ideas on “The Role of the Smartphone in the Diagnosis of Vestibular Hypofunction: A Clinical Strategy for Teleconsultation during the COVID-19 Pandemic and Beyond.¹”. Barreto et al. concluded that “*The creation of a digital vestibular management algorithm for the identification, counseling, ... during the COVID-19 pandemic and beyond.*¹” During pandemic, alternative telecare service is useful but there is a necessity for training and selection of subjects for telecare. Indeed, using telemonitoring tool might be possible in case of high educated people, but it might not be possible for the poor and low educated patients. Basically, availability of communication network and affordability to telecommunication are main factors to support a good telehealth care.² Additionally, since the telecare usually takes time, it might not applicable for service a lot of cases.³ Additionally, it requires a safety system for patient identification for prevention of possible medical error. Finally, using of telecommunication might be associated with some unwanted health effects. Non-standard tool might cause eye problem and there is a report that telemedicine users are prone to have increased seizure rate.⁴

Conflict of Interest

The authors have no conflict of interests to declare.

References

- 1 Barreto RG, Yacovino DA, Cherchi M, et al. The Role of the Smartphone in the Diagnosis of Vestibular Hypofunction: A Clinical Strategy for Teleconsultation during the COVID-19 Pandemic and Beyond. *Int Arch Otorhinolaryngol* 2021;25(04): e602–e609
- 2 El Aoufy K, Melis MR, Bellando Randone S, et al. The positive side of the coin: Sars-Cov-2 pandemic has taught us how much Telemedicine is useful as standard of care procedure in real life. *Clin Rheumatol* 2021;•••:1–7. Doi: 10.1007/s10067-021-05975-2. Online ahead of print.
- 3 Giani E, Dovc K, Dos Santos TJ, et al; ISPAD Jenious Group. Telemedicine and COVID-19 pandemic: The perfect storm to mark a change in diabetes care. Results from a world-wide cross-sectional web-based survey. *Pediatr Diabetes* 2021;22(08):1115–1119. Doi: 10.1111/pedi.13272. Online ahead of print.
- 4 Kubota T, Kuroda N. Association between telemedicine and incidence of status epilepticus during the COVID-19 pandemic. *Epilepsy Behav* 2021;124:108303. Doi: 10.1016/j.yebeh.2021.108303. Online ahead of print.

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