

## LETTER TO THE EDITOR

## General correspondence

### Perceptions of telehealth and cardiac care during the COVID-19 pandemic

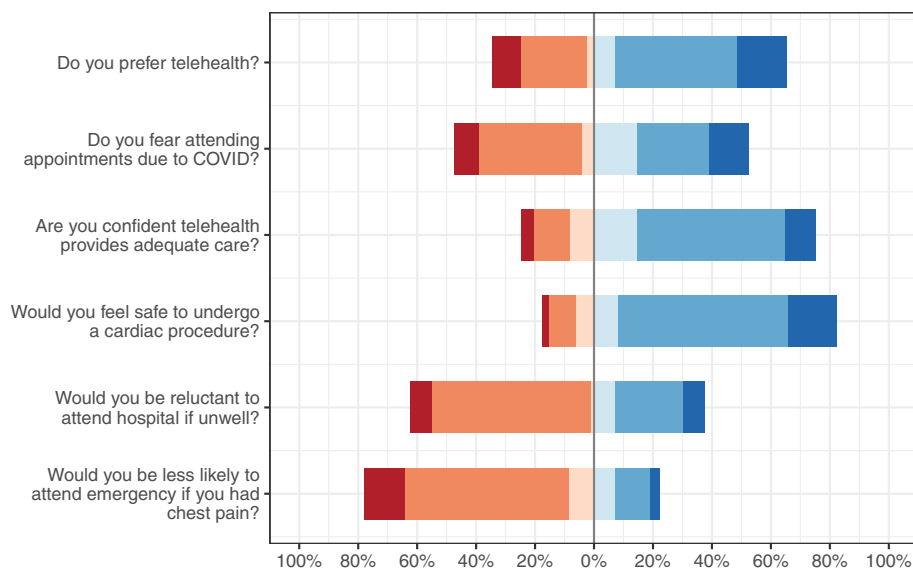
The novel coronavirus disease 2019 (COVID-19) has altered our society and economy, and introduced unprecedented challenges and implications for health systems worldwide.<sup>1</sup> The social distancing measures and increased case numbers have necessitated significant changes to healthcare delivery, including in the ambulatory care setting, with the implementation of telehealth consultations.<sup>2</sup> To our knowledge, there are no published data assessing cardiology patient perception regarding this unique model of care.

We conducted a survey of consecutive patients attending telehealth clinic review to assess their attitudes relating to telehealth and seeking cardiac care during this period. Peninsula Health is a tertiary healthcare service located in outer metropolitan Melbourne, Australia. Patients were asked a standardised set of questions concerning perceptions of telehealth clinic appointments according to the questions in Figure 1. Ethics approval has been granted for this project by Peninsula Health's institutional review board (Approval ID 68025). Informed consent was obtained from all patients.

Ninety-seven participants were included in the study. The mean age was  $65 \pm 14$  years, with chest pain being

the most commonly referred complaint (84%). Most (65%) patients preferred cardiology telehealth and 75% were confident with the care provided, compared to face-to-face review (Fig. 1). Among the cohort, 47% reported fear of attending hospital appointments due to COVID-19. Furthermore, 37% were hesitant to attend hospital if unwell and 18% felt unsafe to attend hospital to undergo a cardiac procedure, while 22% reported reluctance to attend hospital if they developed chest pain (Fig. 1). Patients aged 70 years and over were more likely to prefer not to attend hospital for appointments (79% v 54%,  $P = 0.018$ ), and patients aged under 60 years were more likely to feel safe to attend hospital for a cardiac procedure if recommended (94% vs 77%,  $P = 0.049$ ). No other differences in patient perceptions across age groups, recency of Emergency department attendance or family doctor review were observed.

The 'second wave' of COVID-19 in Melbourne, Australia, has resulted in the institution of some of the strictest measures to curtail the rapidly growing numbers of new cases of infection. Our findings have demonstrated that cardiology patients expressed apprehension attending hospital for outpatient assessments and that there was significant fear and reluctance to attend hospital, even in the case of active chest pain. Elderly patients





**Figure 1** Patient perceptions of telehealth during COVID-19 stage 4 lockdown restrictions in Victoria, Australia, shown on a 6-point Likert scale. (■), Strongly disagree; (■), disagree; (■), slightly disagree; (■), disagree; (■), agree; (■), strongly agree.

were more likely to prefer telehealth and be concerned about attending hospital for medical procedures, potentially due to their increased risk of experiencing adverse sequelae of COVID-19 infection.<sup>3</sup> Hesitance to attend hospital is a considerable challenge, in particular with respect to chest pain, and may be a contributor to the increased symptom-to-balloon times observed in a ST-elevation myocardial infarction cohort published by Toner and colleagues.<sup>4</sup>

These findings highlight that during the COVID-19 pandemic, ambulatory cardiology patients do not want to attend hospital to receive medical care. Moreover, this appeared more significant for the elderly. Telehealth

is an important measure to ensure ongoing care of outpatients during this time and further public health education is required to encourage patients to seek timely hospital care when unwell.

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