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PHRs look for the right fit

Patients are ready for personal health records, but the wider electronic records system is not

As doctors embrace electronic medical records (EMRs) and Canada plods towards the Nirvana of electronic health records (EHRs) in place for all citizens, a personal health record (PHR) should dovetail nicely as a proactive tool for individualized health management. The problem: uptake has been slow because PHRs have had difficulty finding relevance in a larger electronic records market that's still immature.

"EMR uptake has improved. However, to date EHR integration with the EMR is still evolving, and therefore it is difficult to project the influence on the future of PHRs," says Judith Belle Brown, PhD, interim director of the Centre for Studies in Family Medicine at Western University in London, Ont., and co-author of the study, *Family Physicians' Perspectives on Personal Health Records*.

Theoretically, a PHR fills an important gap in the world of electronic records, while also supporting the move towards consumerization and the all-important emphasis on wellness campaigns. But healthcare is highly regulated, and having consumer applications rolled out willy-nilly won't cut it — they will either hit a wall with EMR integration or live in a silo.

"We found that physicians were concerned about privacy and quality of PHR data in the EMR," says Brown. "Practice management issues included workload, lack of remuneration in fee-for-service models, and lack of clarity surrounding physician roles and responsibilities."

As it stands, there are solid products like Microsoft's HealthVault, as well as the Canadian Medical Association's mydoc-

tor.ca, Sunnybrook Health Sciences Centre's MyChart, and a nifty mobile solution called mihealth that provides secure messaging between physicians and patients, as well as access to medical records.

"Mihealth has mobile interoperability that allows patients to have access to their records on phones or tablets from anywhere in the world," says Dr. Wendy Graham, founder of Toronto-based Mihealth Global Systems Inc. "They can securely message their provider or entity about information added to their PHR."

With the patient's permission, mihealth then allows the information to be managed by the caregiver on behalf of a family member. Patients can share some or all of their information with a personal trainer or a cardiologist as needed from their mobile phone or tablet.

"The patient can also receive reminders or notices about their healthcare issues on their mobile device from the provider or office, or even set a medication reminder," says Graham, adding that mihealth is already integrated with several EMRs, with more coming.

Another consumer-oriented PHR is a U.S. firm, My Medical Records (MMR), which is keenly eyeing the Canadian market. "We've applied for patents in Canada," says Bob Lorsch, CEO of MMR. "We're looking at entering the market soon, because there's a tremendous amount of interest."

Lorsch argues that with the bigger players like HealthVault, complexity can be a problem. For example, though HealthVault is a powerful solution, the physician or hospital also has to be connected to the platform. "They have to make a commitment from an IT perspective to HealthVault, and there haven't been a lot of people who have done that yet."

As with mihealth, MMR's beauty is in its simplicity. Every patient is provided

with an MMR account and a telephone number. From there, patients can have their records sent by fax or email and uploaded to their account, with authorized caregivers having access to the PHR via the portal at MyMedicalRecords.com.

The personal health gizmo

The problem with many new consumer health technologies is that they tend to live in silos and have little value from an electronic records perspective. A good example of this is the Fitbit group of products for tracking activity.

"It's an 'Apple' type of product," says Dr. Dennis Wollersheim, a Canadian who lectures at the Department of Health Information Management at La Trobe University in Melbourne, Australia. "It's almost foolproof and highly polished. The user interface has only one button."

Dr. Wollersheim takes his Fitbit with him wherever he goes. It tracks his movements, so he knows how active he is. "I check out my sleep patterns, I look at daily step totals, weekly trends, and see how I'm doing in comparison to my partner," he says. "Every few days, I sync it. With a PC or iPhone it syncs seamlessly via wireless."

The trouble is the data are essentially useless from a medical standpoint. Wollersheim's physician doesn't know he uses Fitbit, despite its health benefits. Sounds like a perfect technology to integrate with a PHR. But why bother? Fitbit is selling well without having to worry about encryption and HIPAA compliance.

Instead, easy-to-use PHRs like mihealth and MMR, mobile solutions that clearly position themselves in the middle of the patient-doctor relationship, are best suited to leverage the full-scale rollout of electronic records. Consumers, it appears, are ahead of the game. All we need is the infrastructure. ■

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