

# Term paper on use of mobile technology apps for elderly

[Health & Medicine](#), [Nursing](#)



## **English**

2015

Term paper

Introduction

Advancements in Information and Communication Technologies (ICTs) have paved better ways to create, and disseminate any kind of information in diverse formats. Such technologies have bestowed every field with an assuring stand to practise improved operation at every level. May it be education, health, science, medical, and even art, every aspect of human existence is fully connected to the technological innovations of the world. These technologies have permeated the lives across the world. For instance, health sector of the world is hugely influenced by the latest developments in medical and health technology. The contemporary time is being recognized as the digital epoch, which is concerned with the digitization of everything. Medical health facilities and services are running on the digital track, enhancing the diagnosis and treatment of numerous diseases. Smart phones and mobile technology have revolutionised the world of health scenario. This is not limited to the young generations but, the technology offers a wide space for the elderly people also. Mobile apps act better information devices, which have ethical implications associated with them, that not only provide the patient (or even a normal person) with the information of the disease but, it also updates him or her with latest improvements in the treatment and medicine availability of the disease and even the availability of doctor.

## **Background**

In the wake of health issues mobile application are selling like hot cakes. These Mobile apps are actually outselling the flashy gadgets. Apple and other Android Operating systems have embedded health app which have created boom among consumers. It is like readily available doctor. These health Apps have helped enormously to collect data of disease for research purpose. These mobile health apps have been broadly categorised fewer than three categories; personal care, clinical care and research.

These tools have been more of transformative tools which enable elderly people to take note of their health and medication. E. g. the new Healthkit of apple iPhones have been introduced to be there as a medical attendant all the time with elderly patient with multiple ailments. This app monitors the disease and gives a reminder to take proper doses of medication. There is another health app introduced by UN (UNAIDS) in 2011, which provides HIV/AIDS fact sheets to 129 different countries. This app has bridged the space between users by being with them all the time to examine the need of Anti-retroviral drugs. These health apps have helped to reduce the stigma regarding AIDS around the world. For example, 'Facing AIDS' lets a patient to take a selfie with some message and it gets uploaded on social media. There is media interactivity involved into these health apps.

Health apps have not been only created to cater the needs of patients and elderly people but are also meant for health care professionals, to help them to understand the requirements of disease and its better treatment.

mHealth or mobile health defines a term associated with support of public health and medicinal practice (Adibi, 2015). Such term is fully associated

with the mobile and computer technology that is more or less related to the physical and emotional state of the people using the technology. Adibi discusses the introduction of the technology into the medical sector of the world along with its benefits (and its consequences) to the general population who always want to take extra measures for their fitness. Also, there exist many other studies that explain the intervention of mobile technology into the medical field and its benefits especially for the elderly people who do experience more loneliness in the latter half of their lives. For instance, there is study carried out by Van Doornik, in 2013, in which he mentions the positive concerns of the mobile (app) technology on the health of the individuals who are connected with them. The study, also, establishes an emotional and psychological relevance of the technology of the apps which directly affects the general health of the patients (Van Doornik, 2013). Mechael, in another study, argues that the mobile phone technology have ethical implications linked to them that can reform a certain aspect of any nation's health scenario (Mechael, 2004).

## **Analysis**

There have been many studies conducted to analyse the use of health apps and their consequences specially on elderly people. In one of the researches about mHealth, which provides HIV/AIDS information from international organisations to social network, has transformed the way we used to look at AIDS patients.

## **Actions**

People, who are more dependent on apps and technologies, ought to be educated regarding the use and accuracy of these health apps. As they can get misled by hoax apps as well. Awareness is the key in getting less swayed by false alarms of such Apps. In ethical aspect FDA has released guidance for the developers of such mobile medical apps which are intended to be used by consumers. Ethical contours are taken care by FDA but the app makers seem to be more interested in marketing of these applications. As, these apps are made to fetch more money to make consumers brand conscious.

Another aspect of ethics are cornered in the sharing of information with third party like what happens in Apple Healthkit data which needs to be shared with WebMD app. The issue needs to be addressed for privacy concerns.

## **Conclusions**

Despite being health friendly these Mobile health apps are not every time reliable source of information, they may carry something which is not authenticated. For instance according to a study published in the New England Journal of Medicine in July 2014 discussed that out of 100, 000 health care apps only 100 are FDA approved. Sometimes these apps may lead patients astray by making false diagnosis. They often get complacent by using health app and forgetting the serious consequences of long time diseases. Even some apps cannot predict the rate of abnormality or infections with apt accuracy and high precision.

Technologists inject an emotional aspect into the technology itself by

offering diseases detectors so that elderly can utilise them without being dependent of anyone. But, strictly speaking, it is not the case because the elderly people are psychologically and emotionally dependent on others as they are more vulnerable. This vulnerability cannot be evaded by the technological intervention. Thus, we can say technology cannot always be trustworthy as it has its own flaws linked.

## References

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