Abstract of parallel session: 2
Title: Electronic Patient-Generated Health Data – A Conceptual Framework and its Potential Application to the Swiss Healthcare Context
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Abstract (max. 2000 characters incl. spaces)

Background: Demographics confront the Swiss healthcare system with serious aging and chronic disease related challenges, ultimately requiring a paradigm shift towards pro-active, patient-centered and preventive practice [1]. Our study aims to explore digital health and the use of electronic Patient-Generated Health Data (PGHD), defined as “health-related data—created, recorded, gathered, or inferred by or from patients or their designees” [2], as a potential facilitator of that paradigm shift. Despite the potential of PGHD in facilitating patient-centeredness and preventive care, systematic knowledge synthesis on their value for prevention and health promotion is lacking.

Methods: Our study aims to establish a holistic understanding of electronic PGHD utilization for disease prevention, health promotion and non-acute disease management. It will consist of a comprehensive search of seven electronic databases, as well as a range of grey literature sources. The review process will be conducted by two reviewers, focusing on the generation, use, potential for interaction, context and impact of electronic PGHD.

Proposal: While Swiss surveys indicate an increasing trend of personal health data generation, as well as a relatively positive trend towards using and sharing them, such innovative approaches have not yet reached broad implementation. Our proposal acknowledges the Swiss healthcare system’s emerging challenges, its potential to shift towards smarter and more patient-centered practice, as well as the need to overcome the fragmenting divisions between health promotion, prevention and healthcare. The presentation will be mainly based on the conceptual framework (figure 1), and first results of our review, including identified gaps. In addition, we will link the adapted framework to Switzerland’s options and constraints in using, streamlining, integrating and exchanging patient-generated healthcare data – leading to conclusions and a discussion on the applicability of our study to the regional context.
Figure 1: Adapted PGHD framework [2]