



Use of personal health records among healthcare professionals: Nigerian perspective

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Dear Editor.

Personal health record (PHR) is a type of records being managed and owned by individuals with information coming both from health care providers and the individual; maintained in a secure environment and access determined by the individual¹. Today, an estimated 70 million people in the US have access to some form of PHR¹. Hitherto, PHRs was a paper collection of health information kept by the patient². Some people still keep their health records in print especially in the developing nations², where general management of patients' health records is still paper-based³⁻⁵. However, with the advent of electronic health records and access to medical information online, there has been an increasing demand from patients to access their health information electronically².

Personal Health Record is an electronic application through which individuals can access, manage and share their health information, and that of others for whom they are authorized, in a private, secure, and confidential environment⁶. As a tool for consumer empowerment, the PHR must provide information that is useful to individuals caring

for their health⁷. It also must be useful to the provider as well because its value lies in shared information and shared decision-making⁷.

Study has advanced that the fully realized PHR will provide consumers with⁸:

- i. A clinical summary of all episodes of health services and patient care encounters.
- ii. Health status parameters, such as exercise, nutrition and spiritual well-being.
- iii. Periodic risk assessment survey results.
- iv. Decision support tools, risk management and professional advice.
- v. Consumer-focused health information and education.
- vi. Benefits and financial management resources.
- vii. Environmental exposure and community health monitoring information.
- viii. Optional living will and organ donation preferences.

For consumers, PHRs have a wide variety of potential benefits. These include:

- i. Greater patient access to a wide array of credible health information, data, and knowledge. Patients can leverage that access to improve their health and

manage their diseases. Such information can be highly customized to make PHRs more useful. Patients with chronic illnesses will be able to track their diseases in conjunction with their providers, promoting earlier interventions when they encounter a deviation or problem⁹.

- ii. Collaborative disease tracking has the potential to lower communication barriers between patients and caregivers. Improved communication will make it easier for patients and caregivers to ask questions, to set up appointments, to request refills and referrals, and to report problems⁹.
- iii. PHRs provide an on-going connection between patient and physician, which changes encounters from episodic to continuous, thus substantially shortening the time to address problems that may arise⁹.
- iv. PHRs support patients in managing chronic conditions along dimensions identified by best practices, quality measures and health status scores⁷.
- v. By ensuring consumers have vital information about their medical condition; PHRs empower them to participate with their providers in making informed decisions about their health⁷.
- vi. Integrated PHRs are essentially portals into the EHRs of patients' health care providers¹⁰.

Most PHR implementation efforts have focused on broad conceptions of consumer empowerment⁷⁻¹². Studies suggest that provider endorsement may be an important factor in a patient's choice to adopt a PHR, and that continued clinician engagement

with patient PHR use may be required to achieve and sustain anticipated positive outcomes^{13,14}. A study has advocated the development and implementation of PHR systems that will ensure adequate training and support for healthcare professionals, alignment with clinical workflow, and features that enable information sharing and communication¹⁵. The study further highlighted the importance of clinician endorsement and engagement, and the need to further examine both intended and unintended consequences of use.

A preliminary finding from Nigeria shows that a few healthcare providers reported to have used PHRs; used health records written in electronic applications as inputted by patients¹⁶. They however have no trust in the source of information provided by the patient as they felt the patients would have inputted irrelevant information. This, the felt may affect integration of PHR with other types of records. These professionals were confident that they could upgrade their health records themselves; could make use of electronic devices such as computer, hand set in keeping their records and equally carry their records in portable devices such as flash drive in the wake of electronic health records.

In conclusion, healthcare professionals are ever ready to adopt and see to the implementations of electronic health records especially its segment, personal health records and would encourage its use by their teeming patients.

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Authors Contribution:

AMB conceived of the study, initiated its design, participated in literature search, article selection and review, data analysis and coordination and drafted the manuscript, ATT and OE participated in its design, literature review, data analysis and coordination and revised the final manuscript.