Implementation of mobile health tools

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To the Editor:

Dr Steinhubl and colleagues¹ presented an interesting argument for mobile health (mHealth) from the point of view of physicians and policy makers but insufficiently considered those who will actually have to use mHealth if it is to succeed: patients and the public. If people are not engaged by, and motivated to use, mHealth tools, then any clinical benefits will remain hypothetical.

The authors highlighted the popularity of health apps with unclear connections to established medical practice, offering a reminder of the gulf that can exist between physician priorities and what patients might need or want. mHealth interventions should integrate both perspectives, recognizing that enhanced convenience is not the only factor that will shape patient engagement. Particularly for chronic conditions, the benefits of self-management may be less immediately apparent. Behavioral tricks and rewards will play a role, but ultimately mHealth must address patient needs. Even when physician and patient goals overlap, the individual, social and situational determinants that make particular solutions appropriate must be understood. Clinically useful, data-driven models can be enhanced to promote autonomy and skill acquisition, connect to peer and other forms of support outside traditional medical structures, or tackle affective aspects of health and illness. Such enhancements do not need to be complex: behavior can be changed using simple text message reminders².

Patient perspectives also feature at a population level. mHealth must work at scale and over time, which raises issues of access and equity. The convenience of remote management may be attractive for many patients, but perhaps not for isolated elderly persons who stand to lose a

source of social interaction and support. Most people in developed settings may now have a smartphone, but issues like health literacy, privacy, platform fragmentation that segregates by sociodemographic group, rapid technology turnover, and data costs still stand as potential barriers. A credible roadmap for implementation for mHealth doesn't just demand clinical trials; it needs an evidence base that addresses the breadth of issues relevant for real-world implementation, at scale³.

Novel gizmos and data flows create a context for change but, like many healthcare technology innovations before,⁴ patients will determine whether mHealth will succeed or fail.

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