



Evidence Synthesis Ireland Fellowship Scheme Review Identification Form

Review Centre and Mentor

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Review title

A systematic review of the cost-effectiveness of teledermatology for the triage of primary care referrals

Review type and methods

Systematic review of cost-effectiveness

Review information

This review contributes to an assessment requested by the Health Service Executive. It will inform a decision by the HSE on providing teledermatology for use by medical professionals to triage and manage patients.

Review details

Demand for outpatient dermatology services has increased in recent years, driven largely by Ireland's ageing population, the rising incidence of skin cancer and improvements in the treatments and technologies available for the management of chronic skin conditions. The increased demand has contributed to long waiting lists for access to dermatology services. In light of these lengthy waiting lists, strategies to improve access to specialist services are needed. According to the Health Service Executive (HSE's) Model of Care for Dermatology, the use of technology initiatives, including teledermatology, could be used to improve access to care, pending the outcome of further assessment. Teledermatology involves the use of static images or live videoconferencing technology to triage, diagnose or monitor skin conditions without the need for a face-to-face consultation between patient and specialist. Use of teledermatology may be associated with advantages in terms of resource efficiency and access to healthcare. However, it is important that the potential impact of such services on the quality of care is also considered. This systematic review of cost-effectiveness will be carried out as part a wider Health Technology Assessment (HTA) including a systematic review the current evidence of the safety, clinical effectiveness, impact on waiting lists, resource use, and cost effectiveness of using

teledermatology for referrals. This systematic review of cost-effectiveness will inform a budget impact analysis.

The research question will be formulated using the PICOS (population, intervention, comparator, study design) framework; the current draft version is presented in Table 1.

Table 1: PICO for research question

Population(s)	Patients with skin conditions requiring a consultation with a specialist dermatologist.
Intervention(s)	Teledermatology for referrals from primary care to a consultant dermatologist: • synchronous or live-interactive • asynchronous or 'store and forward'
Comparator(s)	Usual care, or another form of teledermatology (either live-interactive for referrals or store and forward)
Outcome(s)	ICER – incremental cost-effectiveness ratio NMB – net monetary benefit
Study design(s)	Cost-effectiveness analysis; Cost-utility analysis

Review current status

This review has not started yet.

Any specific/desirable requirements for fellow (e.g. clinical expertise, methodological expertise)

Familiarity with reading and appraising economic or dermatology literature would be desirable.

Estimated start and completion dates

It is estimated that this review will take 14 weeks, starting the week commencing 25 November 2024 and finishing 21 March 2025.