Research Sutra

OPEN ACCESS
Journal of Research in Theoretical and Experimental Sciences
Vol 1 Issue 1 (2025)

DOI: 10.5281/zenodo.15774249

Healthcare Access through Teleconsultation: A Case Study of Diabetes and Hypertension Management at AAM in a Village in Uttar Pradesh, India

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Received 02-05-2925; Revised 23-06-2025; Accepted 28-06-2025

Cite: Kumari K. Healthcare Access through Teleconsultation: A Case Study of Diabetes and Hypertension Management at AAM in a Village in Uttar Pradesh, India. JRTES. 2025;1(1):40-42

Abstract

This case study highlights the successful management of diabetes mellitus and hypertension in an 80-year-old female patient through teleconsultation. Through the E-Sanjeevani teleconsultation platform, facilitated by Ayushman Arogya Mandir in a remote village in Uttar Pradesh, India she was able to consult with the doctor from MMG Hospital, Ghaziabad. A comprehensive treatment plan was developed to control her hyperglycemia and high blood pressure, alongside dietary and lifestyle modifications. The convenience of local teleconsultation enabled regular follow-ups, improving her health outcomes and overall satisfaction by providing accessible and cost-effective healthcare at her doorstep.
Keywords: AAM, E-Sanjeevani, Teleconsultation, Diabetes, Hypertension

Introduction

Access to quality healthcare is still a primary challenge for patients in villages in India, especially those with chronic conditions and limited mobility, compounded by financial constraints. To improve the situation, more than 1.6 lakh Ayushman Arogya Mandirs have been established in India. [1]
Ayushman Arogya Mandirs connect patients to e-Sanjeevani, the National Telemedicine Service of India where patients from remote locations can have medical consultation quickly and easily using smartphones. [2]

In the backdrop of India's growing burden of non-communicable diseases such as diabetes and hypertension, ensuring timely access to healthcare in rural settings remains a critical challenge. With the government's recent push for telemedicine as part of its digital health initiatives, this study gains significance by showcasing how technology-enabled teleconsultation services can bridge the healthcare gap in underserved areas. This case study at AAM in a village in Uttar Pradesh highlights the practical implementation, benefits, and community response to teleconsultation-based management of chronic diseases. It emphasizes the urgent need to scale such innovations and encourages wider public participation and trust in telehealth services to improve health outcomes in rural India.

This case study explores the healthcare journey of an 80-year-old woman suffering from diabetes mellitus for the past five years. Teleconsultation through AAM, Jalalpur, Uttar Pradesh, India helped her have timely consultation with doctor without the need for travel. This case underscores the significance of teleconsultation in improving access to affordable and comprehensive healthcare.

Case Presentation

Patient Profile: A female aged 80 years, suffering from diabetes mellitus for 5 years, visited AAM, Jalalpur, Uttar Pradesh, India for consultation and treatment with complaints of headache, dizziness, as she was unable to visit any medical facility far away owing to her condition and financial situation.

Initial diagnosis: Upon checking, Random Blood sugar (RBS) level was found to be at 189 mg/dl and BP was 176/90mmHg. The author provided teleconsultation to the patient at Dr. Puru MMG Hospital, Ghaziabad via E-Sanjeevani.

Treatment plan: Upon consultation with the doctor, complete medical history of the patient was taken and medicine was given to control hyperglycemia, high blood pressure and patient was advised for dietary modification and to maintain a healthy lifestyle.

Benefits of Teleconsultation treatment: With this the patient was able to consult with the doctor multiple times without having to visit hospital frequently. The patient was able to connect with the doctor frequently through AAM Jalalpur which is at a walking distance from her home, without the need to invest time and money for the same. The patient is very happy as quality healthcare services were available to her, at her doorstep.

Discussion

In a report in year 2010, World Health Organization discussed the significance of telemedicine in providing better access to healthcare, particularly in underserved areas, and reported the effectiveness in saving cost and time, along with creating better satisfaction for patient [3]. Eskandar, in his case study found that telemedicine is a safe and convenient choice in place of hospitalisation in acute cases [4]. Cannavacciuolo et al. (2023) in their study found similar outcomes like continuous care and reduced cost [5]. The current case study exhibited similar results like ease of communication and improved care and satisfaction level.

Conclusion

Telemedicine, as used by AAM, is an effective technique for treatment in remote areas. It provides improved reassurance, safety, and independence to patients along with reduced cost.

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