

Six Health 2.0 firms reinvent doctor-patient ties

(UPDATED: Added screenshots and a link to video of the Myca patient-record interface.)

The just-concluded Health 2.0 Conference in San Diego showcased some 30-odd startups and Web sites — with dozens more in the audience — all intent on using the Internet to improve patient care, streamline healthcare practices and bolster the ability of individuals to take charge of their own medical treatment. There's lots more to say, and I hope to do so over the next few days.

Health 2.0 

For now, though, I want to highlight six startups with some big, and very different, ideas for reinventing the doctor-patient relationship — everything from making it deeper and more convenient to practically doing away with it altogether.

Visualize your medical records, keep your doctor on call

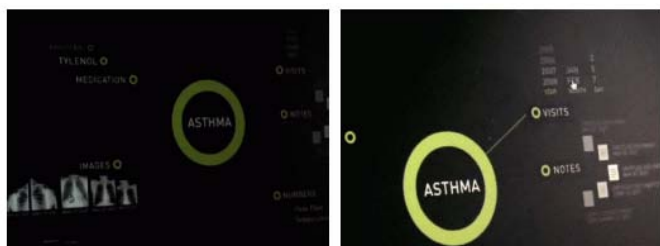


In their current form, even electronic medical records have a significant drawback: Most amount to little more than a digital representation of the paper forms that preceded them and consist largely of dense lines of biographical, family and medical information. (This is, of course, a fine place to start given that only 14 percent of all U.S. physicians use such systems in the first place, but it's not exactly the end of the story.)

So in the same way that Web publications have adopted designs that exploit the advantages of the new medium (which also took time — even the pioneering online magazine Slate launched with a design that quaintly displayed page numbers just like a print publication) the folks at Myca have re-envisioned the display of medical records for the digital age. Unfortunately, the company doesn't have any screen shots of its interface on its Web site, but their conference demo was quite striking. (You can see a brief 25-second example in this video produced for the conference; forward to 1:19 to see the Myca interface.)

Calling up a patient's record displays her major health problem — asthma, say — surrounded by floating word tags for each of her other medical conditions, each sized larger or smaller depending on its severity. Clicking into any of these conditions zooms and centers it in the display, again surrounded by word tags for various important details, each of which can be expanded in place — for instance, visual displays of the patient's recent medical appointments for the problem, or prescription drugs she's taking, or X-rays and other medical images immediately available for viewing.

Here are two screenshots I just grabbed from the above-linked video (click for larger versions):



"The whole point of the interface is to show you exactly what's going on," says Jay Parkinson, a young New York City doctor with a pioneering Internet-based practice who now serves as Myca's chief medical officer. "It's kind of the geek squad for medicine." (For more about Parkinson, who grandly proclaims himself "the future" on his Web site, see this interview at the WSJ Health blog. Don't miss the comments, where Parkinson squa-a res off against critics of his approach.)

The visual display is part of a service Myca calls Hello Health, which it intends to roll out in May. Hello Health goes well beyond making a patient's medical history more intuitively comprehensible — it's essentially a support package for doctors who want to adopt Parkinson's prepaid service model, which might entail a monthly subscription fee of \$15 or so and per-visit charges for house calls and chats via email, IM or Web video. (Parkinson describes it more fully here.)

This sort of model raises any number of questions, starting with Parkinson's own preference for treating patients under 40, who of course tend to get sick far less often than older folks. (In that WSJ item, Parkinson even says it strikes him as "somewhat sick" that some doctors find "occupational joy" in "chasing someone's chronic disease." I can't help wondering how many 38- and 39-year-old patients the good doctor has, and how they'll react when he drops them the day they turn 40).

Another big issue is whether this sort of service, which has definitely struck a chord among people disaffected with traditional medicine and insurance, amounts to a kind of "cherry picking" that might pull younger, healthier people out of insurance plans and thus drive up costs for the older, sicker folks who remain in them. But these are subjects for another day.