

*The patient referred to in this case study has consented to sharing these data and reviewed them for accuracy prior to publication*

### **Who is Lorentz?**

Lorentz is a 76 year old retired general practitioner who lives at home with his wife. He is also an expert in dementia and cognitive decline.



Lorentz has an irregular heart beat which occurs every now and again but on two occasions has resulted in collapse requiring hospital admission. It also requires him to take warfarin, to reduce the likelihood of blood clots developing. Lorentz has also had high blood pressure for many years.

### **Why did Lorentz choose remote care?**

Two years ago, Lorentz was prescribed antihypertensives and was found to have slightly raised blood glucose. As a doctor, he wondered whether he could improve his blood pressure and blood glucose without resorting to medication. In conjunction with his GP, he decided to start remote monitoring as a means of monitoring both conditions and providing both him and his wife with reassurance regarding his state of health.

### **How is he being followed up?**

**Measurements:** Lorentz measures his blood pressure each morning, using the blue-tooth enabled BP device. He measures his weight and blood sugar once a week.

**Patient reported outcomes:** Lorentz reports back daily on quality of sleep, alertness, symptoms of dizziness and stress. Each week he reports back on levels of physical activity, diet, weight and sleep.

**Daily tasks:** Lorentz receives a reminder each day to bike everywhere that is feasible, to do some form of physical exercise (strength training, cardio or balance training) and to practice self-reflection as a means of reducing stress and anxiety.

**Follow up:** The data he reports back is reviewed by experienced nurses at a virtual care hub. Adjustments to the regimen are made by his health care providers, in consultation with Lorentz.

### What kind of impacts has Lorentz experienced?

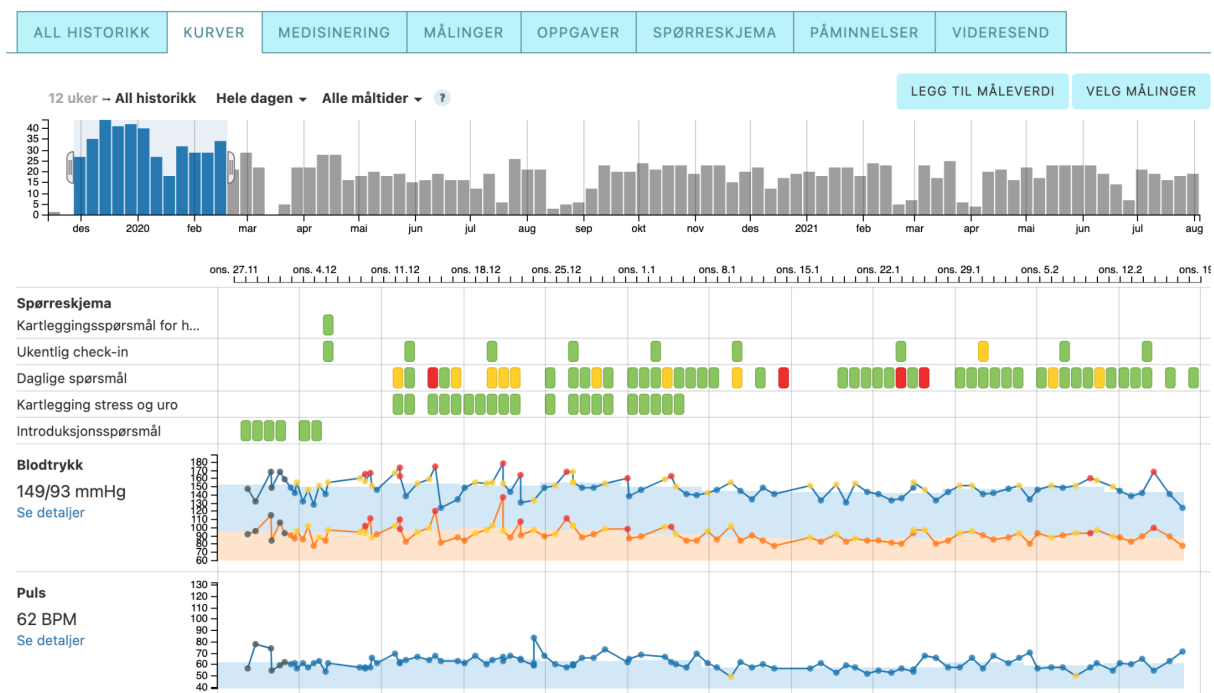
**Outcomes:** Lorentz reports that he feels great! He now has normal blood pressure and blood sugar without being on medication. He has lost 10 kgs in weight and he exercises considerably more. He cycles everywhere he can and has even sold his car.

**Health care utilization:** No urgent appointments or admissions required. He has intermittent contact with the nurse who reviews his remote care dashboard and has only visited his GP once a year. He regularly measures his INR (clotting) as he takes Warfarin.

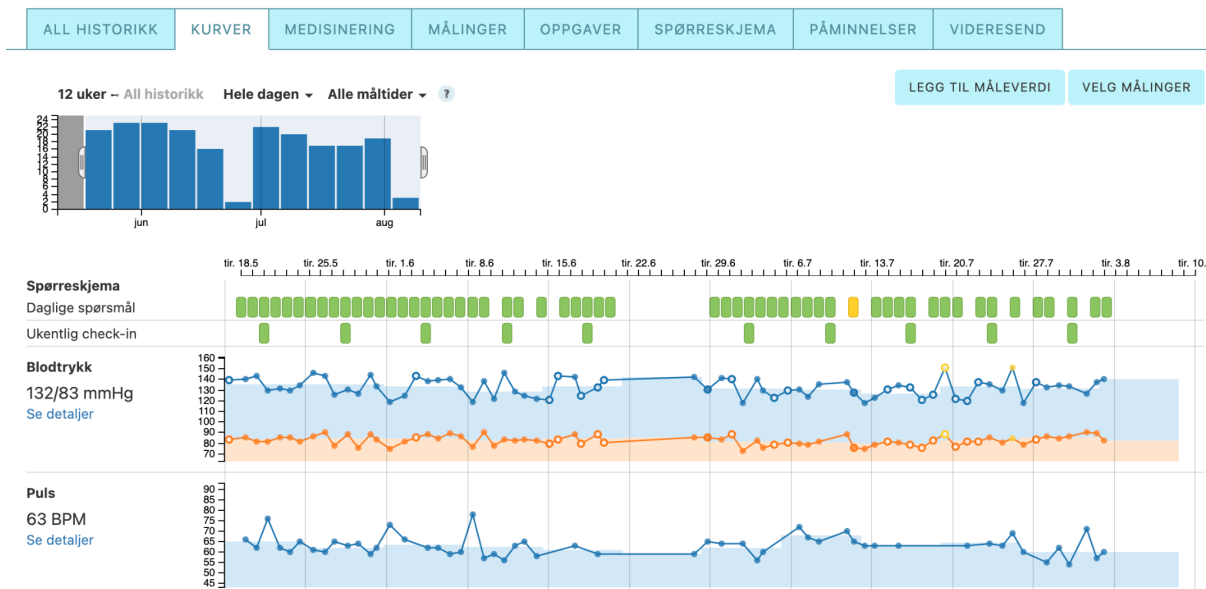
His GP has been impressed by the ability to review historic values for blood pressure and blood sugar values in the My Dignio app.

### Physiological impacts:

#### Start:



More recently:



**What does Lorentz think of remote care:** *“It’s good – it suits me very well. I can see what’s going on with my health here and now, as well as being able to review information over time”*

*“My wife thinks its [remote care] is good. She says that I reflect much more about things than I used to. That I am calmer and have more self-insight”*

*“I don’t think it’s difficult to use the app. Older people can manage a lot of apps and digital things –if they are given enough time to learn how”*

*“I don’t think it’s that difficult to change your lifestyle [with the right tools]. I believe the health service can encourage people to take more responsibility [for their health], than we do”*