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Comparative Values of Tele Rehabilitation and Face-To-Face Rehabilitation Techniques

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Face-to-face rehabilitation refers to the delivery of services in person. It is the conventional type of practice used on a large scale throughout the world. In this type of rehabilitation, the patients visit rehabilitation centers or clinics where the medical professionals assess, treat, and prevent further complications by hands-on techniques. Various electrotherapeutic modalities can also be provided which might help the patient in further recovery. The plan of intervention is decided and modified, based on the condition of the patient and the progress of the treatment. Physical contact with the patient enables the therapist with better guidance towards the goal. This technique also helps in boosting the patient's confidence. Tele rehabilitation refers to delivering rehabilitative services with the help of information and communication facilities. Due to improvements seen in the field of computer science and advanced tele medical devices, the use of tele rehabilitation to assist in curing an individual has been very effective. Since people are acquiring a better understanding of the latest technologies and the ease to use them, tele rehabilitation is gaining popularity in chronic pain individuals. It is mainly beneficial for patients who are not able to travel to the clinics or rehabilitative centers on a regular basis due to long travel distances or/and long travel time. It is also cost-effective as the traveling costs are saved [1]. Tele rehabilitation services can be provided through various communication technologies. A few of these are video conferencing, webcams, virtual reality, web-based approaches, motion technology, and mobile application. Through tele rehabilitation it is possible to assess, monitor, prevent, manage, supervise, educate, consult, and counsel. The main aim of tele rehabilitation is to provide equal access to rehabilitative services much like the clinical-based practice. Tele rehabilitation provides

a comfortable home environment and there is no time constraint unlike in the Outpatient Department (OPD) settings where the therapists are available only during working hours. This can play an important role in pain relief. Tele rehabilitation saves the pain experienced while traveling to the clinic [2].

Tele rehabilitation provides detailed, repeated verbal instructions, which enables the participants to get a clear idea about the type of exercise to be performed along with their benefits. According to the study carried out by Russell T, and Buttrum P, 2003, showed that as the participants have to perform these exercises by themselves it gives a sense of empowerment as well as motivation to carry out these exercises in their home environment [3]. Tele rehabilitation enables the patient to be comfortable and prevent the pain caused due to traveling. It also helps in the empowerment of the patients and continuation of the treatment process as it is in their home environment and provides biofeedback through the video-calling facility. Mobility is found to be improved with both the therapies, with face-to-face rehabilitation proving more beneficial especially for range of motion because of the sensory cues provided by the therapist. Functional disability is also found to be reduced with both the therapies, with tele rehabilitation more beneficial because of the comfortable home setting and reduced traveling pain. Hence in our opinion, though tele rehabilitation is effective in the management of patients, mobility, and improvement of functional disability, the conventional face-to-face clinic-based rehabilitation is found to be superior in various setups. Tele rehabilitation can help bridge the gap in the areas where face-to-face rehabilitation is difficult or not available. Tele rehabilitation overcomes the barrier of distance,

time, and travel. This ensures that patients have an opportunity to receive treatment even when they are not able to see the therapist in person.

Acknowledgement

None.

Conflict of Interest

No conflict of interest.

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