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| **The acceptability and usability of a virtual healthcare model: Insights from pregnant women with asthma** |
| ELEANOR C MAJELLANO,1, 2, 3 DENNIS THOMAS,1, 3,4, 5 PETER G GIBSON, 1, 3, 4, 5  KELLY STEEL, 1,3,4,5 VANESSA M MCDONALD 1, 2, 3, 4 |
| *1 National Health and Medical Research Council Centre for Research Excellence in Treatable Traits, University of Newcastle, New Lambton Heights, Australia*  *2 School of Nursing and Midwifery, University of Newcastle, Callaghan, Australia*  *3 Asthma and Breathing Program, Hunter Medical Research Institute, New Lambton Heights, NSW, Australia*  *4 Department of Respiratory and Sleep Medicine, John Hunter Hospital, New Lambton Heights, Australia*  *5 School of Medicine and Public Health, University of Newcastle, Callaghan, Australia* |
| **Introduction/Aim:** Telehealth has become an important healthcare delivery modality. However, the acceptability and usability of a telehealth model in antenatal asthma care are unknown. This study compared the perspectives of adult pregnant women with asthma who received virtual or a face-to-face care model of asthma care.  **Methods:** A qualitative study involving semi-structured interviews nested within a randomised controlled trial evaluating the impact of a virtual versus face-to-face model of antenatal asthma care was undertaken. A subsample were interviewed: telehealth n=20, face-to-face n=10. The telehealth intervention group received two virtual consultations: nurse educator and respiratory physician, written asthma education materials, link to an App and reinforcing tailored text messages. The face-to-face group received the same intervention but in-person. All captured and verified data were independently coded and analysed thematically.  **Results:** Participants had a mean+SD age of 33+6 years and ACQ 5 score of 1.3+.92. Overall, four themes were identified and were comparable between groups : (1) Pregnancy and asthma stories: depicted the unique experience of pregnant women with asthma, including their concerns surrounding pregnancy and asthma; (2) Highs and lows: captured participants’ perceived advantages and disadvantages to telehealth versus face-to-face modality; (3) Fit for purpose: described participants’ perceived usability and acceptability of the telehealth and face-to-face intervention. (4) What could be better: highlighted key areas of improvement for future antenatal asthma care.  **Conclusion:** Pregnant women with asthma had an overall positive experience using telehealth for antenatal asthma care. Similar themes were captured in both groups indicating comparable experience. The results suggest that women’s telehealth experience was comparable to face-to-face consultations and can be a viable option for the delivery of optimal antenatal asthma care in the future.  **Grant Support:** This study is funded by the Hunter New England Local Health District (HNELHD) Telehealth Research Initiative. |