

# Radiology Being Digital

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## ABSTRACT

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## Opinion

It is true that it is almost a commonplace to say that the digitization of both the radiologic images and the clinical and demographic data provides an increase in the quality of health care and procedures. But not to declare her victorious we must bet on her in an uncritical way. Because, in addition, technological advances have not been free. The price we have paid in western countries for this transformation is to have a health system that is more impersonal, which is colder, and, of course, more distant in human relationships, a system in which the most difficult to obtain is personal attention. Perhaps now we can reflect on what we have lost and what we have gained, even without the intention of undoing the path. For the prophets of the digitization the path was already traced: since they have long preached that the analogical past is something that seems old fashioned, and that getting carried away by the path of the zeros and ones and, excited, observing on the screens all the details in detail, is sure to reach a place among the chosen ones of the modernity. Zygmunt Bauman raises an interesting discussion between the solid and the liquid to give visibility to this landscape of modernity. However, the reality is much more convoluted, especially in relation to important details, some of them from the social point of view: with the digital era, inequalities in our societies have increased.

Even more: it seems that the technological revolution does not provide an increase of productivity like that of the previous industrial revolution, and this makes the economic growth of this century proportionally inferior to that of previous times. A good question for the current managers of some public services. For the moment, what is the balance of the debate that is often understood as medicine of machines versus medicine of words? Well, provisionally: good in the aspects most related to management (its great merit is to have achieved that place under the complex and difficult relationships that have always been the hospital ones:

its information system will come to adapt as it has done to all this process). Moderately good, although with a division of opinions, in those aspects that are more related to daily work (in my opinion, the change has been partly a partial renewal and in part a radical break and has been done without collapsing the whole building). Bad or nonexistent in those aspects that have more relationship with citizens: today, just as yesterday in the analog world, users find it very difficult to access to their medical records, however electronic. In relation to these social aspects, the change from which everyone expected so many things, the analogue-digital transition, and what has been called "technomedicine", has represented very little. All of the above, with the advantages (and doubts), generates an unwanted consequence, at the same time that it raises another reflection that still being collateral, does not cease to be proper of our days, and that must be part of this debate: the arguments, although most of them favorable, should not conceal the damage resulting from poor utilization of some of the technology, and more when compared to the situation prior to the massive implementation of these techniques.

At present, there is a disproportionate increase in demand, and there are many more radiological tests than necessary: about 30% could be avoided, as the Spanish Society of Radiology (SERAM) has recently indicated. Twenty years ago, there was the feeling that professional habits could be changing according to the dazzling results of the different developments that arise. But there are motivations of a more technical etiology. Of course, there are differences between analog radiography and digital radiology. To put it philosophically, where analogical radiology ends, digital radiology begins. The digitization strategy in the health environment rests on two strength ideas: the logical integration of the image data (PACS) with the clinical and demographic data of the patient; and the transmission of data and images. The advantages of the digital

format (reconstruction of the images in the different planes of the space, in three dimensions and video (4D), transmission to remote places and through the network of the medical images accompanied by pertinent information of the patients, etc), partly explain the primacy of the process. It has always been said that when the images have become digital has risen a step in its manipulation. But

the clearest impression of the uniqueness that the digitalization can produce to the medical doctors takes place when, seated in front of the screens, absorbed in the reading or the interpretation, they receive the report of the last examinations. That is the nature of the task.

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