



## The Long-Term Effects of Continuous Health Monitoring Devices on Patient Outcomes: An Epidemiological Perspective on Infectious Disease

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### Abstract

**Background:** Remote Patient Monitoring Systems (RPMS) are essential in response to the aging population, the rise of chronic diseases, and the demand for effective healthcare delivery, particularly emphasized by the COVID-19 pandemic. Technological advancements in wireless sensor networks and the Internet of Things (IoT) have facilitated the creation of advanced RPMS that can continuously monitor various physiological parameters. Challenges persist in data security, network mobility, and energy efficiency.

**Methods:** To examine current developments in RPMS, this research analyzes their applications, underlying technologies, architectural frameworks, and related difficulties. The review examines two main application areas: vital monitoring and disease diagnosis. This study examines specific examples of RPMS implementations, focusing on their functionalities, limitations, and potential improvements.

**Results:** The review identifies various applications of RPMS, encompassing both wearable and non-contact sensors for monitoring vital signs (heart rate, blood pressure, oxygen saturation, temperature, respiration rate) and systems designed for disease diagnosis (such as fall detection, COVID-19 risk prediction, epilepsy monitoring, and diabetes management). Architectural frameworks vary from basic two-tier systems to intricate multi-tier architectures that incorporate IoT and cloud computing. Challenges encompass sensor accuracy, data security, network reliability, energy efficiency, and patient compliance.

**Conclusion:** RPMS has a lot of promises to improve patient autonomy, lower readmission rates in hospitals, and improve healthcare delivery. Ongoing research and development are essential to overcome current limitations and fully harness the potential of RPMS. Future advancements must prioritize the enhancement of sensor technology, the development of more robust and secure communication protocols, the improvement of energy efficiency, and the refinement of user interfaces to foster increased patient compliance.

**Keywords:** Internet of Things, wireless sensor networks, telemedicine, healthcare technology, and remote patient monitoring.

### 1. Introduction

Remote patient monitoring systems (RPMS) are increasingly being adopted in healthcare due to

multiple converging factors. The COVID-19 pandemic underscored the significance of remote patient management, especially in mitigating the

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Receive Date: 01 November 2024, Revise Date: 14 November 2024, Accept Date: 17 November 2024

DOI: 10.21608/ejchem.2024.332983.10719

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transmission of infectious diseases. (1). The increasing elderly population and rising prevalence of chronic diseases have heightened the demand for monitoring solutions that facilitate home-based patient care. Technological advancements have significantly enhanced the development of RPMS, facilitating continuous monitoring of specific patient populations, including those with chronic illnesses, individuals isolated due to infectious diseases, and patients with mobility limitations or disabilities. (2). RPMS facilitates the monitoring of elderly patients, post-surgical individuals, and infants, providing advantages such as decreased hospital visits and enhanced daily life autonomy (3).

Historically, patient monitoring depended on wired sensors connected to in-hospital computers, restricting patient mobility and incurring high costs. This method was often limited to tracking a small number of patients simultaneously. As healthcare transitioned to home-based models, RPMS was developed; however, initial systems often lacked user-friendliness. Advancements in wireless technology have facilitated the creation of adaptable and effective remote monitoring solutions. (4). Currently, RPMS are extensively utilized, as the healthcare sector invests in these systems to improve patient outcomes and decrease healthcare expenditures. (5).

RPMS utilizes biomedical sensors to gather physiological data from patients outside of clinical environments. The data is transmitted wirelessly to healthcare providers for real-time or near-real-time analysis, facilitating continuous monitoring and early detection of potential health issues. (6). RPMS captures essential health metrics, including heart rate, respiratory rate, body temperature, blood pressure, and blood oxygen saturation, facilitating informed and timely decision-making by providers. RPMS facilitates continuous monitoring, enabling prompt identification of health declines and allowing healthcare professionals to proactively address emergencies (7).

Wireless sensors constitute the fundamental framework of RPMS, facilitating data collection via diverse wearable and non-contact devices. The sensors analyze data via internal or external controllers before transmission through short- or long-range wireless communication methods. The emergence of the Internet of Things (IoT) has revolutionized RPMS by integrating various networks and facilitating intelligent interoperability across sectors such as healthcare, residential environments, and transportation. (8). RPMS encounters challenges such as mobility management, quality of service (QoS), security, and automated system responses, stemming from the complexity of heterogeneous network environments. Advanced models, including the Internet of Vehicles (IoV), provide solutions through enhanced mobility management, optimized data forwarding, and minimized transmission delays. (9).

This paper examines recent advancements in RPMS, focusing on their applications, technology, architecture, and associated challenges. This study analyzes the types of RPMS applications according to their usage, with a particular emphasis on vital monitoring and disease diagnosis functionalities.

## 2. Previous Research

The extensive use of heterogeneous communication devices has led to various studies on RPMS, concentrating on application domains, architectural design, and the challenges associated with these systems. The integration of RPMS in smart city applications highlights their significance in tackling healthcare challenges, particularly concerning mobility, energy efficiency, and quality of service (QoS) (10). Several studies have integrated Mobile hoc networks (MANET), including Vehicular hoc networks (VANETs), into RPMS to improve healthcare delivery through the use of vehicular communication systems. (11, 12). Despite these advancements, challenges such as network mobility, energy conservation, and prolonged network lifetime continue to hinder the efficiency of RPMS. The IoV framework presents a viable solution to these challenges by facilitating efficient data transmission and routing within RPMS. (13).

## 3. Utilization Based on Applications

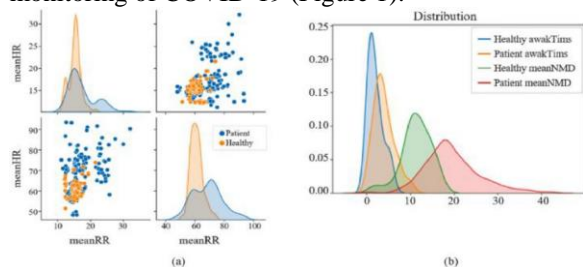
Remote Patient Monitoring Systems (RPMS) are developed to replicate the conventional roles of healthcare professionals, facilitating continuous patient monitoring beyond hospital settings. RPMS applications encompass two primary domains: Vital Monitoring and Disease Diagnosis (14). Vital monitoring entails systematically assessing essential physiological parameters, including body temperature, heart rate, oxygen saturation, blood pressure, and respiratory rate, to evaluate a patient's health status. Conducting monitoring outside of hospitals allows RPMS to reduce hospital admissions, enhance care efficiency, and enable patients to maintain a semblance of normalcy while undergoing treatment. RPMS can offer real-time monitoring or scheduled updates based on the patient's needs, with the frequency typically dictated by the patient's condition. Continuous blood pressure monitoring is essential for diagnosing and managing hypertension, while real-time monitoring is crucial for patients at risk of rapid health deterioration (15, 16).

Researchers have created multiple RPMS to identify health deterioration and physiological irregularities, enhancing the reliability and effectiveness of remote monitoring solutions. A study in (17) introduced a cost-effective, compact wearable pulse oximeter that measures photoplethysmography (PPG) signals without the need for filtering. The system transmits PPG data at a frequency of 240 Hz to a host computer via a Zigbee transceiver or a mini-USB interface. The system processes data on a computer to eliminate background noise and correct

motion distortions, thereby facilitating accurate monitoring of heart rate, respiratory rate, oxygen saturation, and blood pressure. This RPMS measures multiple physiological parameters, demonstrating a comprehensive approach to vital monitoring and enhancing reliability by reducing environmental interference.

A separate study referenced in (18) Developed a Remote Patient Monitoring System (RPMS) for precise body temperature monitoring, achieving an accuracy of  $0.1^{\circ}\text{C}$  within a temperature range of  $16\text{--}42^{\circ}\text{C}$ . This system employs two digital sensors to assess the temperature in each ear canal, transmitting data through Bluetooth for subsequent analysis. Although effective, the use of ear canal sensors presents challenges, as the probes may induce minor injury or discomfort, particularly when the patient is in motion. These limitations underscore the necessity for wearable RPMS alternatives that provide a more user-friendly experience.

In a distinct study, the authors (19) created a Risk Prediction Model System (RPMS) to enhance early COVID-19 screening through the application of machine learning algorithms, notably XGBoost and logistic regression, for the classification of patients as potential COVID-19 cases. The system monitored physiological indicators including respiration rate, heart rate, body movement, and sleep quality through the use of ultra-wideband radar. The researchers analyzed data derived from 140 radar recordings of 23 COVID-19 patients, juxtaposing it with 144 recordings from healthy individuals. The integrated XGBoost and logistic regression model exhibited high accuracy, surpassing other machine learning methods employed in the research. Environmental factors may constrain the accuracy of RPMS trials, as ambient conditions can influence measurements. The study's small sample size and limited demographic diversity constrain its applicability to broader, real-world contexts. The RPMS monitored a single patient at a time, a limitation that may restrict its application in high-volume healthcare settings. The research identified significant variations in nocturnal respiratory rates, heart rates, body movements, and sleep quality between COVID-19 patients and healthy subjects, indicating a potential utility for remote monitoring of COVID-19 (Figure 1).



**Figure 1.** Heart rate as well as respiratory rate distribution, average body dynamic density, as well as wake-up durations in healthy individuals and COVID-19 patients (19).

The authors of (20) Created a remote patient monitoring system (RPMS) employing temperature and heart rate sensors. A microcontroller regulates the temperature sensor, with data presented on an LCD. An RF transmitter was incorporated to relay data to a receiver, which utilizes a microcontroller to display the information on a separate LCD screen. While these systems concentrate on one or two physiological parameters, (21) Advanced this concept with a multi-vital RPMS that monitors five essential health indicators. This system utilizes IoT sensors for remote data collection, transmitting information to a physician's smartphone through a Wireless Body Area Network (WBAN), and employs an application to facilitate clinical decision-making. This system is capable of administering medications during transit and provides a virtual presence for the physician within the ambulance.

A separate study, (22), details a remote patient monitoring system (RPMS) developed to assess blood oxygen saturation and heart rate. This study presents a distinctive 868 MHz wristwatch-based subsystem, highlighting optical Photoplethysmography (PPG) and conducting a comparative analysis of the 868 MHz and 2.45 GHz frequency bands. The wrist-worn sensor underwent effective testing in clinical environments for SpO<sub>2</sub> and heart rate monitoring, indicating the platform's appropriateness for future RPMS applications. Proposed enhancements involve establishing direct cloud connectivity, thereby eliminating the necessity for smartphones.

Disease diagnostic RPMSs are designed to identify particular health conditions through the monitoring of physiological signals. Hypertension may be characterized by elevated blood pressure and dizziness, whereas fevers accompanied by headaches may indicate a cold. Pathinarupothi et al. (15) Developed a Remote Patient Monitoring System (RPMS) for fall detection, which combines a fall detection sensor with an Amazon Echo and a webcam. A Raspberry Pi Model B+ facilitated data collection, subsequently transmitted to the physician through Wi-Fi. The Amazon Echo mitigates false positives by verifying falls via user interaction. Lanata et al. (23) observe bipolar patients by monitoring speech, medication adherence, and sleep patterns; however, self-reported data may lack reliability due to the complexities of mental health issues. In (24), a specialized RPMS for epilepsy utilized EEG data reduction alongside a Gaussian Kernel-Based Support Vector Machine for classification, attaining an accuracy of 95.38% with minimal time delay. Fioravanti et al. (25) developed a diabetic management system that includes automatic message alerts, facilitating patient-doctor interaction via a chat feature and message repository, thereby enhancing trust in RPMS devices. Stavropoulos et al. (26) created a diagnostic RPMS application that facilitates remote diagnosis and communication with doctors; however,

the system's effectiveness may be constrained in the absence of particular sensor integration.

#### 4. Epidemiological Considerations of RPMS

Remote Patient Monitoring Systems (RPMS) have become significant instruments in healthcare, particularly in response to the epidemiological challenges posed by an aging global population, the rising incidence of chronic diseases, and the heightened demands on healthcare systems exacerbated by the COVID-19 pandemic. RPMS facilitates continuous, real-time health data collection from patients in non-clinical environments, such as their homes, leading to improved outcomes, decreased healthcare costs, and increased patient engagement. The capacity of these systems to remotely monitor and manage health indicators is essential for epidemiological surveillance, disease progression prevention, and the prompt management of both acute and chronic conditions.

The aging global population is a critical epidemiological factor influencing the adoption of RPMS. The World Health Organization projects that the population aged 60 years and older will rise from 1 billion in 2020 to 1.4 billion by 2050, with approximately 80% residing in low- and middle-income countries (27). Aging correlates with a rise in chronic, non-communicable diseases (NCDs), including cardiovascular disease, diabetes, and chronic respiratory conditions. Chronic diseases necessitate ongoing monitoring and intervention, imposing significant burdens on conventional healthcare systems (28). Remote Patient Monitoring Systems facilitate the consistent tracking of vital signs, blood glucose levels, blood pressure, and other essential health indicators, providing an effective method for managing the health of older adults in non-clinical environments.

RPMS enables continuous monitoring, allowing for the early detection of potential health issues before the need for acute medical intervention. Wearable devices and remote sensors track heart rate variability, activity levels, and sleep patterns, providing healthcare providers with valuable insights into patients' health trajectories. Data-driven insights facilitate early diagnosis, mitigate disease progression, and decrease hospital readmissions (29). Furthermore, for chronic diseases that exhibit gradual progression, such as hypertension and diabetes, ongoing monitoring facilitates lifestyle modifications and preventive interventions, thereby decreasing morbidity and mortality rates in the elderly population.

#### 5. The increase in chronic diseases necessitates enhanced epidemiological surveillance

Chronic diseases rank as primary contributors to global mortality, responsible for roughly 71% of all deaths worldwide (27). The prevalence of non-communicable diseases is intensified by lifestyle factors including sedentary behavior, inadequate diet, and the use of tobacco and alcohol. Remote patient

monitoring is essential for managing chronic conditions through the continuous tracking of indicators that reflect disease status and progression (30). Epidemiological surveillance via RPMS enables healthcare providers and public health systems to collect population-level data, discern disease patterns, and implement timely interventions.

In diabetes management, continuous glucose monitoring devices facilitate real-time treatment adjustments, thereby significantly lowering the risk of complications such as heart disease, neuropathy, and retinopathy (31). RPMS facilitates real-time data flow to healthcare providers, thereby bridging the gap between routine medical visits and acute care, which enhances overall disease management. The consistent data stream is valuable for patient care and enhances epidemiological data, allowing public health authorities to monitor disease trends, evaluate the effects of lifestyle interventions, and forecast future healthcare requirements (32).

#### 6. Monitoring of Infectious Diseases During the COVID-19 Pandemic

The COVID-19 pandemic underscored the inadequacies of conventional healthcare delivery models, particularly in addressing highly infectious diseases that necessitate swift intervention to mitigate transmission. Remote Patient Monitoring Systems (RPMS) are critical in minimizing the necessity for in-person consultations, facilitating safe at-home patient monitoring, and consequently reducing the risk of virus exposure in healthcare environments. Throughout the pandemic, remote monitoring systems were extensively utilized to assess symptoms and vital signs, including oxygen saturation, respiratory rate, and temperature in COVID-19 patients. This facilitated early detection of deterioration and alleviated the strain on hospitals (33).

Additionally, RPMS has demonstrated effectiveness in managing outbreaks of various infectious diseases through the facilitation of quarantine measures and contact tracing initiatives. Remote symptom tracking through RPMS offers a viable alternative to in-hospital monitoring, thereby minimizing exposure risks for both healthcare workers and patients. Telemonitoring for infectious diseases such as influenza or tuberculosis facilitates patient follow-up and medication adherence, which is essential for controlling transmission (34). The pandemic has highlighted the significance of RPMS in a comprehensive epidemiological response capable of reducing the transmission of infectious diseases, especially in densely populated areas.

RPMS responds to the increasing demand for cost-effective healthcare delivery by minimizing hospital admissions and promoting early interventions. Research indicates that remote monitoring decreases hospital readmissions and emergency room visits, which are major cost contributors in healthcare systems (27, 28). This is

especially advantageous in rural and underserved communities, where healthcare resources are frequently constrained. Remote follow-up facilitated by RPMS diminishes barriers to healthcare access and improves continuity of care, both of which are critical for enhancing population health outcomes.

RPMS not only reduces costs but also enhances patient engagement and empowerment. Providing patients access to their health data fosters awareness of their health status and encourages self-management, which is essential for long-term disease control (35). This engagement aligns with epidemiological objectives, as patients who actively manage their health contribute to broader public health aims, including the reduction of preventable diseases and enhanced health outcomes at the population level.

### 7. Application Focused on Specific Clients

Comprehending the end-user is essential in RPMS design, influencing device dimensions, materials, and aesthetics. Anton et al. (36) introduced a non-invasive RPMS utilizing wearable sensors for the assessment of neonatal oxygen saturation, with enhancements intended to minimize motion artifacts. Rossol et al. (37) proposed a video-based RPMS for neonatal respiratory monitoring that utilizes a proprietary micro-motion algorithm, demonstrating a strong correlation with standard ECG impedance pneumography. An IoT bed-exit monitoring system was proposed for elderly patients, effectively tracking ambulation and reducing response time in clinical settings. In Greene (38), a cloud-based RPMS (CloudDTH) utilized wearable devices to monitor and predict health conditions, to integrate real and virtual environments, alongside rapid classification and alert systems.

### 8. Remote Patient Monitoring Utilizing Architectural Frameworks

The architecture of RPMS exhibits variability in structure and tiered organization, effectively addressing challenges related to data collection, processing, and communication. Tier 1 is essential for the acquisition of psychological data, encompassing the collection of biomedical data via sensors, conditioning signals, and the preparation of data for review by medical providers. Technological advancements enable dependable, continuous data collection without human involvement, utilizing miniature sensor nodes. Sannino et al. (39) revealed that a rule-based fall detection system comprises three layers: data, decision, and action, which include automated rule extraction and processing. Yeh et al. (40) introduced a system-on-chip (SoC) oral appliance designed for sleep monitoring. This device utilizes a sensitive sensor array to measure tongue pressure and wirelessly transmit data for the management of obstructive sleep apnea. The innovations demonstrate the potential of low-cost, portable sensors in RPMS. In Wahane and Ingole (41), a three-tiered RPMS utilized mobile devices to transmit health data from wearable

sensors to medical servers, emphasizing authentication, power efficiency, and reliability.

Furthermore, Dong et al. (19) created a non-contact COVID-19 screening technique utilizing ultra-wideband impulse radio radar to assess respiration, heart rate, and movement. Although there is robust performance in controlled settings, practical constraints emerge due to varying age demographics and environmental influences. Cosoli et al. (42) developed a four-tier RPMS for ECG monitoring, utilizing wearable technology embedded in a cotton T-shirt, optimized for low power consumption via ANT protocol communication. The study presented a pulse oximeter and temperature-based RPMS managed by an Arduino, featuring web connectivity for remote data access by caregivers. Lastly, Cheng et al. (43) developed a self-powered implant for real-time blood pressure monitoring, demonstrating high sensitivity and stability through extensive in vitro testing, indicating potential for future implantable RPMS solutions.

### 9. Models of Information Accumulation in Infectious Diseases and the Influence of Big Data Analytics

The traditional framework for information collection in infectious disease surveillance is characterized by a hierarchical "hub-and-spoke" structure. In this model, smaller reporting entities, including general practices or individual virologists, transmit data to central authorities at both local and national levels. The accumulated data undergoes processing, validation, and iterative analysis before the findings are communicated to the broader system in a top-down approach. This structured approach is efficient, utilizing established communication channels, professional protocols, and systematic processes to inform public health recommendations and interventions. Population data aggregators, such as national health surveys and biobanks like the UK Biobank and BBMRI-ERIC in the EU, provide additional data at regional, national, or international levels (44).

The conventional method of data accumulation exhibits a time lag that may diminish the effectiveness of responses, particularly in the context of swift public health interventions. The incremental evidence-gathering approach presents difficulties in addressing emerging global health threats, exemplified by the Ebola outbreak in West Africa and previous global influenza pandemics (45). The hub-and-spoke system is effective in identifying potential outbreaks globally and within specific nations. However, there is a clear need for faster data processing and actionable insights. The challenges prompted the implementation of BDA capabilities, with early pilot studies resulting in enhancements to hub-and-spoke systems (46).

Traditional accumulation models are typically effective for stationary, well-defined populations and predictable outbreaks; however, they encounter challenges when addressing the unpredictability of

real-time data in the contemporary global landscape. Mass migration events, often initiated by crises such as floods or conflicts, intensify the problem, resulting in unforeseen patterns of infectious disease spread. Global travel, large gatherings, and trade facilitate the transnational movement of diseases, potentially resulting in epidemics. Instances encompass the emergence of the West Nile virus in New York, post-festival measles outbreaks in Germany, and the transmission of H1N1 through air travel (47).

#### **10. Sources for Accumulating New Information**

Mobile technology serves as an innovative instrument for mitigating disparities in global and healthcare data access, particularly in low- and middle-income countries (LMICs) where conventional health data sources may be outdated, limited, or nonexistent (48). Mobile technology applications include a mobile emergency reporting system for infectious disease surveillance in Sichuan, China, following the 2008 earthquake; tuberculosis patient monitoring in Kenya; and a mobile-guided Ebola response tool that assists patients in locating nearby health centers (47). Trials for a mobile-based tuberculosis treatment adherence program are currently being conducted in the UK, with potential integration into public health services. The development of mobile diagnostics for infectious diseases indicates the integration of mobile technology into mainstream healthcare (49).

Wearables and wireless medical devices provide remote monitoring for various conditions, including blood pressure, heart rate, glucose levels, oxygen saturation, and mental health. Wearable devices assist in notifying users and healthcare systems of early indicators of health problems, which may lead to decreased healthcare expenses and enhanced services (50). However, these devices present privacy concerns due to their potential for continuous streaming of personal data, which requires careful management of privacy and ethical considerations to prevent the misuse of sensitive information. Security and autonomy risks emerge when devices collect or transmit data that may be susceptible to manipulation, potentially jeopardizing patient health (51).

#### **11. The Influence of Big Data Analytics on Infectious Diseases**

BDA significantly contributes to infectious disease management through its capacity to access and analyze extensive datasets derived from individual health records and healthcare channels. The scalability facilitates enhanced insights that can benefit patients, institutions, and public health, though data access levels and applications differ by region. Infectious disease management often reconciles population-level epidemiological issues with individual-level care, highlighting the ethical conflict between autonomy and public welfare, a topic that BDA has further complicated (52).

BDA presents privacy concerns due to the extensive geo-tagged social data, which can diminish the effectiveness of anonymization and heighten the risk of individual re-identification through triangulation (53). Anonymity in health data reporting can undermine accountability and transparency at the population level, especially during outbreaks or humanitarian crises, where misinformation may lead to harm. Effective infection control necessitates the inclusion of timestamps and source locations in data. Anonymous systems can produce low-quality data and exacerbate social tensions by serving as channels for rumors or misinformation. With the increasing prevalence of mobile reporting, it is essential to maintain data quality and foster community trust to enhance the effectiveness of these tools (54).

#### **12. Prospective Developments**

RPMS is evolving due to advancements in wearable technology, communication protocols, and energy efficiency; however, challenges persist regarding sensor durability, data transmission, and patient compliance. Improved integration with the Internet of Vehicles (IoV) could facilitate greater connectivity, enabling RPMS to communicate effectively across multiple devices and platforms. Innovations in future RPMS are designed to improve clinical decision-making, facilitate patient self-management, and decrease healthcare costs, with the potential to prevent hospital-acquired infections and mitigate workforce shortages. RPMS is positioned to enhance healthcare delivery, decrease patient costs, and facilitate comprehensive monitoring at all times and locations through ongoing improvements.

#### **13. Conclusion**

This review of Remote Patient Monitoring Systems (RPMS) highlights a rapidly evolving domain with considerable potential to enhance healthcare delivery. Advancements in wireless sensor technology, the Internet of Things (IoT), and cloud computing have facilitated the development of advanced systems for continuous and comprehensive patient monitoring beyond conventional clinical environments. The applications examined, including vital sign monitoring and disease diagnosis, illustrate the versatility and potential impact of RPMS across diverse patient populations and healthcare requirements.

The review identifies several critical challenges that need to be addressed to fully harness the potential of RPMS. Data security and privacy are critical due to the sensitive nature of the collected physiological data. Network reliability and energy efficiency are significant issues, particularly in resource-constrained settings or for individuals with limited mobility. The creation of user-friendly and comfortable wearable sensors is crucial for enhancing patient compliance and ensuring long-term adoption. The integration of RPMS with current healthcare infrastructure and electronic health records (EHR) systems is essential

for efficient data exchange and informed clinical decision-making.

Future research and development initiatives must prioritize the resolution of these challenges. This encompasses the development of advanced, miniaturized, and energy-efficient sensors; the enhancement of data transmission protocols for improved reliability and security; the creation of intuitive and user-friendly interfaces; and the formulation of robust algorithms for data analysis and predictive modeling. The incorporation of artificial intelligence (AI) and machine learning (ML) techniques presents substantial potential for improving the diagnostic functions of RPMS and enabling proactive interventions. The successful implementation and widespread adoption of RPMS necessitates a collaborative effort among researchers, healthcare providers, technology developers, and policymakers to ensure the effectiveness and accessibility of these systems for all potential beneficiaries.

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