



Research Article

Digital Pathology and Tele-Haematology in Remote Diagnostics: A Revolution in Modern Laboratory Medicine

***Kanu Stella**¹, **Iheanacho M C.**², and **Ogunnaya Frances Ugonne**³

¹ Department of Haematology, Imo State University (IMSU) Owerri, Imo State.

² Department of Haematology Federal University Teaching Hospital, Owerri, Imo State.

³ Newark Beth Israel Medical Center, 201 Lyons Avenue, Newark NJ, USA.

Corresponding author: Kanu Stella

Department of Haematology, Imo State University (IMSU) Owerri, Imo state.

Received Date: 25 Aug. 2025

Published Date: 21 Oct. 2025

Abstract

Digital pathology and tele-haematology have changed the way doctors diagnose diseases by using cutting-edge imaging technologies, telecommunications networks, and artificial intelligence (AI) in regular lab operations. These advancements have bridged the divide between specialised pathology centres and resource-limited settings by facilitating remote slide analysis, real-time consultations, and efficient data storage. This paper analyses the principles, instruments, and applications of tele-haematology and digital pathology, highlighting their roles in facilitating remote diagnosis. It also talks about future developments in global health systems, ethical problems, and problems in putting them into action. Digital platforms have shown great promise in making it easier for people to get specialised treatment, speeding up the process, and making diagnoses more accurate. As machine learning, cloud computing, and high-speed internet continue to improve, digital pathology and tele-haematology will become important parts of telehealth and precision medicine infrastructure around the world.

Keywords: Artificial intelligence, laboratory medicine, telepathology, digital pathology, tele-haematology.

Introduction

Digital technologies are driving a significant revolution in the field of diagnostic medicine. Both pathology and haematology have historically placed a great deal of reliance on manual microscopic exams, which are useful but frequently time-consuming, labour-intensive, and geographically restricted. The way pathologists interpret tissues and blood samples has been completely transformed by the advent of digital pathology, which transforms traditional glass slides into high-resolution digital images for viewing, analysis, and sharing. By using digital platforms to analyse blood smears, bone marrow aspirates, and other haematologic samples from remote sites, tele-haematology has also added a new dimension to remote medical practice [1]. There is still a serious lack of qualified pathologists and haematologists in many developing nations, especially in Asia and Africa. The World Health Organisation (WHO) reports that in certain regions, there is less than one pathologist for every 500,000 residents. The prompt detection and treatment of illnesses are severely hampered by such a shortage. Therefore, tele-haematology and digital pathology are revolutionary breakthroughs that bridge the gap between places with limited resources and skilled diagnostic centres. These technologies are improving the effectiveness, precision, and accessibility of diagnostic medicine by providing remote access to specialised knowledge [2]. The idea behind digital pathology is simple but effective: employing high-resolution scanners to transform conventional microscope slides into whole-slide pictures (WSIs). A more effective and cooperative diagnostic workflow is made possible by the electronic storage, analysis, and sharing of these digitised slides. Slide preparation usually starts with fixation, embedding,

sectioning, and staining of the specimen, usually using Wright-Giemsa for blood smears or Haematoxylin and Eosin for tissues. To create digital images that mimic the clarity of what a pathologist would see under a traditional microscope, the slides are first prepared and then scanned at magnifications of 20× or 40× [3].

After that, the pictures are saved in cloud databases or digital pathology information systems so they may be quickly accessed and examined. Artificial intelligence (AI) algorithms that can identify patterns, quantify features, or highlight anomalies can be used to improve image analysis, or it can be done manually. The workflow's last step is the transmission of reports and results via laboratory information systems or telepathology, which enables expert consultations across geographic borders [4]. A top-notch whole-slide scanner, an image management system (IMS) for organisation and storage, viewing software that lets pathologists measure and annotate digital images, artificial intelligence (AI) tools for automated or semi-automated interpretation, and a secure digital network that facilitates sharing and teleconsultation are usually the essential elements of a working digital pathology system. These components work together to form an integrated environment that facilitates remote research cooperation, education, and diagnostics [5]. Similar concepts are used in the evaluation of haematologic specimens in tele-haematology, a subspecialty of telepathology. It focusses on the digital assessment of bone marrow samples and blood films, using cameras, mobile microscopy, and communications networks to take and send pictures for professional examination. Sample preparation is the first step in the tele-haematology procedure, which is then digitally captured using a microscope that has a camera or slide scanner. After that, the photos are safely sent—often via secured cloud platforms so that a haematologist can examine them remotely. The referring practitioner is informed of the evaluation's findings and suggestions, guaranteeing prompt diagnostic feedback [6].

The Benefits of tele-haematology

Tele-haematology has many different applications. It aids in the assessment of peripheral blood smears for the detection of diseases like leukaemia, anaemia, and malaria. Additionally, digital slides are useful for training and research in bone marrow cytology, external quality assurance programs, and educational activities. Because of its adaptability, tele-haematology greatly enhances the delivery of treatment in areas with a lack of specialised knowledge [7]. A mix of cutting-edge technology is required for the adoption of tele-haematology and digital pathology. Slide digitisation is made easy by high-resolution scanners such as the Philips IntelliSite, Hamamatsu NanoZoomer, and Leica Aperio. Smartphone-based microscopy provides an affordable substitute in low-resource environments, allowing the use of mobile adapters to obtain diagnostic-quality pictures. In more complex environments, robotic microscopy replicates the sense of being physically present in the lab by enabling remote users to control microscope motions in real time [8]. These systems depend on strong network and data infrastructure in addition to imaging instruments. Large image files may be sent quickly and safely thanks to satellite connections, 5G networks, and high-speed broadband. Because it offers distributed storage, remote accessibility, data protection via encryption, and adherence to ethical norms like HIPAA and GDPR, cloud computing is essential [9]. Machine learning and artificial intelligence have become crucial elements of this technological revolution. Artificial intelligence (AI) algorithms are able to quantify blood components, identify aberrant cells, distinguish between different cell types, and even accurately categorise cancers. These features minimise inter-observer variability, standardise interpretations, and lessen human workload in addition to improving diagnostic accuracy [10].

Application of Digital pathology and tele-haematology

Digital pathology and tele-haematology have several uses in the field of remote diagnostics. Pathologists from several institutions can work together in real time through remote slide viewing, offering second perspectives and guaranteeing diagnostic unanimity. These technologies significantly shorten turnaround times and enhance patient outcomes by bridging the gap between tertiary hospitals and neighbourhood clinics in underprivileged communities. Furthermore, by enabling experts and students to access digitised libraries of clinical cases from any location, virtual microscopy has revolutionised medical education [11]. Additionally, telepathology helps with quality assurance initiatives by enabling labs to compare diagnostic interpretations and uphold uniform standards. Digital slides in research promote reproducibility and creativity by facilitating data exchange and multicenter partnerships. Tele-haematology and digital pathology have several advantages. They raise accuracy through AI-assisted analysis, boost efficiency by reducing diagnostic turnaround time, and improve accessibility by getting over regional restrictions. Additionally, they facilitate data preservation for long-term storage, lower the expense of transporting physical specimens, and promote academic collaboration through the sharing of digital resources [12]. The complete integration of these technologies is currently hampered by a number of issues, despite their many benefits. Technical constraints such data storage needs, colour calibration, and image file size continue to be major obstacles. Because the initial outlay for servers, scanners, and proprietary software might be high, financial limitations nevertheless still exist. Furthermore, strong ethical and legal frameworks are necessary due to worries about data security, patient confidentiality, and cross-border information sharing [13]. Human factors also come into play: adoption may be slowed by laboratory staff members' lack of specialised training, reluctance to change, and poor levels of digital literacy. Furthermore, interoperability across various digital systems is made more difficult by the lack of international standards for picture formats, diagnostic reporting, and validation methods.

Artificial intelligence in Tele-haematology and digital pathology

Artificial intelligence integration is a significant advancement in tele-haematology and digital pathology. Predictive analytics, morphology-based disease classification, and automated cell detection are now made possible by deep learning algorithms. For example, AI systems are capable of doing automated differential blood counts with accuracy on par with manual techniques. This is especially helpful in tele-haematology, where prompt diagnosis is essential. Predictive analytics is also made easier by machine learning, which uses digital picture attributes to determine treatment outcomes and illness trends. Clinical decision-making and diagnostic accuracy can be enhanced by using AI-powered decision support systems to help physicians analyse complex data [14]. The use of these technologies varies around the world. National digital pathology networks have been set up in North America and Europe to connect reference centres and regional hospitals for quick consultation and quality control. In Asia, programs such as India's eSanjeevani network have linked diagnostic labs in cities and rural areas. Pilot tele-haematology initiatives in Nigeria and Kenya have demonstrated encouraging outcomes in Africa, specifically in the diagnosis of malaria and the surveillance of haematologic malignancies [15]. Globally, the COVID-19 pandemic hastened the adoption of remote diagnostics and digital pathology. Telepathology became essential for maintaining clinical services, education, and research when lockdowns limited physical access to labs. The experience showed that for robust healthcare systems, remote diagnostics are essential, not just a luxury [16]. Legal and ethical issues are still crucial, though. Sensitive patient information contained in digital photos needs to be safely protected to avoid security breaches. Informed consent should be given by patients before their samples are examined or sent electronically. Furthermore, issues of accountability and culpability need to be precisely established, particularly in cross-institutional collaborative diagnosis. Careful monitoring of AI systems' potential for algorithmic bias is also necessary to guarantee reliability and equity for a range of demographics [17]. It is anticipated that hospital information systems will fully incorporate tele-haematology and digital pathology. Accessibility and trust will be further improved by developments in 5G technology, portable digital microscopes, and blockchain-based data security. Partnerships between governments, IT firms, and healthcare professionals will be crucial for long-term adoption, particularly in developing nations. Furthermore, computational diagnostics will be made possible by the confluence of digital pathology and precision medicine, integrating proteomic, genomic, and morphological data to produce a comprehensive picture of illness [18].

Conclusion

Modern laboratory medicine is being redefined by tele-haematology and digital pathology. They have enormous potential to enhance healthcare delivery and equity worldwide by enabling quick, precise, and cooperative diagnosis. Cost, standardisation, and data security issues are still present, but they are gradually being overcome by ongoing technology advancement and international collaboration. These technologies will continue to lead the way in remote diagnostics as digital transformation progresses, bringing us a new era where access to high-quality laboratory care is not restricted by geographic location.

References

1. Al-Janabi, S., Huisman, A., & Van Diest, P. J. (2012). Digital pathology: Current status and future perspectives. *Histopathology*, 61(1), 1–9. <https://doi.org/10.1111/j.1365-2559.2012.04170.x>
2. Bauer, T. W., Slaw, R. J., & McKenney, J. K. (2020). Digital pathology in clinical practice: What, how, and why. *Modern Pathology*, 33(2), 252–263. <https://doi.org/10.1038/s41379-019-0386-8>
3. Pantanowitz, L., Sharma, A., Carter, A. B., & Kurc, T. (2022). Telepathology and artificial intelligence: Integration in digital diagnostics. *Journal of Pathology Informatics*, 13(1), 100067. <https://doi.org/10.1016/j.jpi.2022.100067>
4. Williams, B. J., Treanor, D., & Hamilton, P. W. (2023). Implementation of whole slide imaging in pathology: Practical guidelines and future directions. *Diagnostic Histopathology*, 29(4), 135–145. <https://doi.org/10.1016/j.mpdhp.2023.01.002>
5. Tul Kubra, K. (2018). Telepathology and teleconferencing: Future perspectives in digital pathology. *RGUHS Journal of Medical Sciences*, 8(3), 1–6.
6. Hanna, M. G., Ardon, O., Reuter, V. E., Sirintrapun, S. J., England, C., & Klimstra, D. S. (2022). Integrating digital pathology into clinical practice. *Modern Pathology*, 35(2), 152–164. <https://doi.org/10.1038/s41379-021-00999-0>
7. Bashshur, R. L., Howell, J. D., Krupinski, E. A., Harms, K. M., Bashshur, N., & Doarn, C. R. (2016). The empirical foundations of telemedicine interventions in primary care. *Telemedicine and e-Health*, 22(5), 342–375. <https://doi.org/10.1089/tmj.2015.0148>
8. Shafi, S., & Parwani, A. V. (2023). Artificial intelligence in diagnostic pathology. *Diagnostic Pathology*, 18(1), 1–12. <https://doi.org/10.1186/s13000-023-01336-1>
9. Singh, K., & Singh, A. (2024). Artificial intelligence in hematology: A critical perspective. *Hematology Research Journal*, 3(1), 60–66.
10. World Health Organization. (2021). *Global atlas of pathology workforce*. WHO Press.
11. Li, Y., & Xu, H. (2023). Artificial intelligence in hematology: Applications, challenges, and future prospects. *Frontiers in Laboratory Medicine*, 6(3), 234–245. <https://doi.org/10.1016/j.flm.2023.07.005>
12. Weinstein, R. S. (2018). Telepathology and digital pathology: Foundations and evolution. *Human Pathology*, 73, 1–

25. <https://doi.org/10.1016/j.humpath.2017.12.018>
13. Dietz, R. L., Hartman, D. J., & Pantanowitz, L. (2020). Systematic review of the use of telepathology during intraoperative consultation. *American Journal of Clinical Pathology*, 153(2), 198–209. <https://doi.org/10.1093/ajcp/aqz139>
14. Farahani, N., Parwani, A. V., & Pantanowitz, L. (2015). Whole slide imaging in pathology: Advantages, limitations, and emerging perspectives. *Pathology & Laboratory Medicine International*, 7, 23–33. <https://doi.org/10.2147/PLMI.S69482>
15. Kumar, N., Gupta, R., & Gupta, S. (2020). Whole slide imaging (WSI) in pathology: Current perspectives and future directions. *Journal of Digital Imaging*, 33(4), 1034–1040. <https://doi.org/10.1007/s10278-020-00369-1>
16. Douma, R. A., & Smit, M. (2020). Cloud-based tele-haematology for remote diagnostics: A pilot study. *International Journal of Laboratory Hematology*, 42(6), 728–735. <https://doi.org/10.1111/ijlh.13278>
17. Farris, A. B., Cohen, C., Rogers, T. E., & Smith, G. H. (2017). Whole slide imaging for analytical anatomic pathology and telepathology: Practical applications today, promises, and perils. *Archives of Pathology & Laboratory Medicine*, 141(4), 542–550. <https://doi.org/10.5858/arpa.2016-0219-RA>
18. Hamilton, P. W., Bankhead, P., & Hutchison, J. (2022). The role of AI in digital pathology: Opportunities and pitfalls. *Journal of Clinical Pathology*, 75(9), 607–615. <https://doi.org/10.1136/jclinpath-2022-208290>