

Caution and guidance for the social media savvy physician

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Abstract

The advent of social media has brought forth the freedom to communicate information instantly to a large audience and its application in medicine has been beneficial for both patients and practitioners. Healthcare institutions and practitioners are utilizing the power of social media to inform and educate their peers and patients as well as the public. Patients are engaging in social discourse online, enabling them to become more involved in and informed about healthcare. It is in this climate that the matters of professionalism and patient privacy become a concern. Without a formal system of peer-review and the perception of anonymity, posting content on social media websites by healthcare providers is susceptible to crossing professional and ethical boundaries. Medical students and residents should be especially careful when posting online, as unprofessional content is common in their groups. Physicians should also be wary of self-promotion through entertainment, or “medutainment,” which can put patient privacy in harm’s way. When doctors review their intentions and follow guidelines (such as the Canadian Medical Protection Association tips) prior to posting on social media, a beneficial outcome can be achieved.

Over the last decade, the accessibility and popularity of social media have empowered both patients and physicians to share their opinions and stories online. Patients are using Twitter to express their dissatisfaction with healthcare,¹ and joining Facebook groups or websites such as *www.PatientsLikeMe.com* to connect with other sufferers for support.² For physicians, social media can serve as a platform to educate peers, patients, and the general public. Experts agree that physicians should legitimize their roles as public figures by taking an active part in social media to help combat the growing problem of health misinformation.³ While social media can evidently benefit medicine, it can also have a negative impact upon doctors and patients when content crosses professional and ethical boundaries.

Social media makes it easier for individuals to behave in ways that they would not behave in person. This “online disinhibition effect” is influenced by the lack of a formal review process, absence of social cues, and the perception of anonymity.⁴ Consider the case of a group of high-school students who had their acceptance to Harvard University rescinded as a result of posting offensive “meme” content on a Harvard Facebook group.⁵ Or, the discovery of past offensive tweets made by Hollywood celebrities in recent years, which has led to significant backlash from the public. When healthcare professionals use poor judgement, they may find themselves in a similar predicament. Indeed, posts containing unprofessional content are common among medical students and residents.^{4,6} In certain instances, individuals harbouring prejudice may circulate racist or discriminating comments. Such was the case with a Cleveland Clinic medical resident who was terminated for commenting on Twitter that she intended to mismanage patients of Jewish ethnicity, among other anti-Semitic remarks.⁷ Unfortunately, individuals or groups publicizing hateful and offensive content through social media are a growing problem, and resources to combat the issue are inadequate.⁸ Policing hate speech is a controversial topic, and some proponents of free expression suggest hate speech is best remedied with counter-speech or speech that denounces offensive posts.⁹ Amidst the debate, a simple yet helpful tip for physicians and students to remember is: if you would not say it in person, refrain from saying it online.¹⁰

Patient confidentiality is another concern when doctors use social media. The tendency for online content to stray into medical education entertainment, or “medutainment,” can place privacy at risk. Medutainment is commonly observed in medicine when the purpose is to entertain or sensationalize in order to promote oneself.¹¹ One such case involving a breast reduction surgery led to an undesirable confrontation between the surgeon and his patient.¹² After obtaining patient consent, the surgeon shared a video of the procedure on Snapchat in which he held the patient’s breast tissue and told his audience, “Look at how much extra breast tissue you might be carrying around.” Later during a follow-up visit, the patient appeared visibly upset and asked the surgeon, “You hold up my breast tissue for the world to see and call that education?” and then stated, “I assumed you’d treat my experience with respect.” Although the surgeon had obtained consent before posting the video, the patient nevertheless felt her privacy was exploited. Such situations can be avoided by placing the interest of the patient above the need for self-promoting medutainment. More importantly, a fully informed consent process that includes educating patients about the risks of having their information disseminated online should be implemented.¹² Patients should be reminded that public content may be viewed by anyone, including audience members who may be immature or underage. Furthermore, complete removal may be impossible because the content can be downloaded or shared. Patients can also be invited to view and approve their content prior to posting.

When utilized appropriately, the benefits of social media in medicine can outweigh the harms. It offers physicians the convenience of communicating medical knowledge instantaneously to a wide audience. Moreover, it enriches medical education by fostering collaboration, resource sharing, moral support, and feedback from peers and faculty.¹³ Indeed, research shows that integration of social media into one’s practice can promote excellence in abilities described in the CanMEDS framework, such as communication, interpersonal skills, professionalism, knowledge translation, and scholarly approach.¹³ Pathologists in the United States, for example, have made great educational strides by posting de-identified case images on social media.¹⁴ Medical Wikis, such as *Radiopedia* and *WikiSurgery*, are crowdsourced encyclopaedias maintained by volunteers and utilized by students as well as professionals.¹⁵ Furthermore, microblogging on Twitter is becoming a popular choice for medical journals and online journal clubs to share news of the latest medical literature.

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Interestingly, a positive correlation between a journal's impact factor and the size of its Twitter following has been described.¹⁶ The Journal of Cardiovascular Electrophysiology has taken advantage of this trend by integrating the peer-review process into Twitter. Cardiologists can post electrophysiology cases with images, and by including the hashtag #JCEtweet2press, the cases can be peer-reviewed by professional editors and published in the journal.

Social media is also tremendously useful for engaging patients in healthcare and notifying the public. Hospitals use microblogging to broadcast notifications for organ donations, health fairs, bioterrorism alerts, fundraising, and results of satisfaction surveys.¹⁷ Alternatively, the Centers for Disease Control and Prevention uses social media to connect followers with information on health and safety topics.¹⁸ Medical blogs are also an excellent way for patients and physicians to exchange dialogue about important topics and make informed decisions about healthcare. For example, the New York Times' health blog *Well* posts on topics ranging from medical research to patient well-being.¹⁹ Readers can share their comments and stories, and the most popular pieces are placed in the "Reader Picks" section. Another highlight is their sub-column *Ask Well*, which brings physicians and experts together to answer health questions such as "When is the Best Time to Get Your Flu Shot?" and "How Do You Treat Positional Vertigo?" Podcasts are another social medium popular for their episodic format. Healthcare podcasts such as Dr. Brian Goldman's *White Coat Black Art* provide listeners with an in-depth perspective on healthcare issues relevant to Canadians while also encouraging discussion on such topics.²⁰ From microblogging on Twitter to blogs, podcasts, and YouTube videos, a variety of social media platform options are available to healthcare practitioners and institutions.

Social media has now become an integral component of society. It is important to realize that while technology allows sharing of information instantly across the globe, healthcare professionals must uphold high moral and ethical standards while doing so. Patients entrust physicians with their care, and physicians have a responsibility to take the necessary precautions to protect patient confidentiality and dignity as well as perpetuate a positive public perception of their profession. To aid in this process, the Canadian Medical Protection Association (CMPA) has published articles on social media etiquette for Canadian medical students and physicians.^{21,22} The CMPA recognizes that social media is a powerful tool for exchanging information, provided that users are mindful of the pitfalls. Their tips (summarized below) can serve as a helpful guideline for healthcare professionals to navigate social media professionally and mitigate mistakes made online.

CMPA's top ten tips for using social media in professional practice:²²

1. "Have an objective and select the right platform." Facebook and Twitter are great for engagement, updates, and networking. Blogging and podcasts are best for informing the public, while YouTube is appropriate for educational videos.
2. "Avoid social media for one-on-one discussions." Online chats place patient confidentiality at risk.
3. "Establish clear boundaries." Separate your personal and professional accounts.
4. "Recognize that the reach is wide and the audience is unknown." Keep information general as it may be difficult to tailor advice to a specific audience.
5. "Consider the impact of your communication style and

reach." Present information using professional language with credible sources.

6. "Generate interest and participation." Invite and respect differing viewpoints and opinions.
7. "Be aware that libel, slander, and defamation apply." Avoid untrue or damaging statements.
8. "Develop a social media policy." Inform staff and patients of your policy.
9. "Manage privacy and minimize breaches." Become familiar with security settings and policies.
10. "Follow College guidelines."

Conflict of interest

The author has declared no conflict of interest.

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