

# Professionalism in the Digital Era: The Changing Role and Challenges Faced by Doctors on Social Media

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## ABSTRACT

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Awareness about the use of social media is important for the medical fraternity. This is applicable not only for doctors who are active users, but also those who seldom use social media. This article is the summary of a panel discussion at ISG Indian Society of Gastroenterology Kerala State Conference 23 September 2023. The destructive power of social media is exemplified in the near-demise of deceased organ donation in the state of Kerala. There are strategies to counter misinformation, and professional societies have to take note of some of these responsibilities that go beyond organising scientific conferences of academic content. The National Medical Commission has laid out guidelines about the dignified conduct of those in the medical profession on social media, awareness about which is vital for those using such tools to reach out to their patients. Defamation, fake ID and financial frauds are a few of the complications that could happen to anyone on social media.

**Keywords:** Social Media, Misinformation, Public education, National Medical Commission, Tele-consultation, Advertising, Organ donation

\*See End Note for complete author details

## INTRODUCTION

With greater availability of smartphones and improved internet access, more people are using social media, and doctors need to be aware of how it can affect their practice as well as healthcare in general.<sup>1</sup> Less than 5% of doctors present at the state conference said they were not active social media users. While not using social media has its own benefits, that does not make them immune to some of the problems discussed below. FB, Whatsapp, YouTube, Twitter and Instagram are commonly used in India, the pattern of use varies by demographic profile.

Four specific aspects of social media impacting doctors were discussed at the conference.

### 1. The collapse of cadaveric Organ donation in Kerala: Dr Antony Paul Chettupuzha

Lack of background knowledge among the general public about human biology, medical ethics and law provides a fertile ground for false allegations and con-

spiracy theories about organ donation. Social media plays a major role in the relentless propagation of such misinformation.<sup>2</sup>

The same information can be perceived differently by different people, this depends on their background knowledge and bias. e.g. A person who is already biased against organ donation might blindly believe even a loose statement against it, instead of questioning its authenticity.

Unscientific depiction of organ donation in popular films has significant influence on public opinion. People tend to believe stories if they sound convincing, and also have an emotional appeal. It is difficult to counter such false beliefs simply by stating facts and figures.

Relentless negative campaigns and conspiracy theories about deceased organ donation has resulted in a remarkable drop in deceased organ donation in Kerala.<sup>3</sup> In 2022, there were only 0.4 deceased donors per

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million population in Kerala, compared to 2 per million in Tamil Nadu and 5 per million in Telangana. This is much lower than countries such as Spain and the US that had 41.6 and 40 deceased donors per million population respectively in 2021. As misinformation continues to circulate in social media groups, fewer families are now willing to donate, and doctors are increasingly reluctant to initiate conversations about it.<sup>4</sup>

Further to the rise in demand for organs, there has been an increase in the number of living donors. Although living donors go through a screening process to verify legitimacy, there exists the threat of organ trade in the guise of altruistic organ donation.

To revive deceased organ donation, doctors could make greater use of social media platforms to disseminate accurate scientific information. This needs to be done in simple language, using metaphors that help people relate to complex concepts. If doctors fail to do it, that space is taken up by people who peddle misinformation.

## 2. Misinformation on social media: Dr Rema Krishnakumar

Social media platforms like YouTube, Facebook, and WhatsApp are rife with fake cures and false promises.<sup>5</sup> Algorithms on these platforms amplify the problem by showing users more of the same misleading content. For example, if someone starts watching fake cancer cure videos, the algorithm will keep feeding them similar content. This further strengthens the wrong convictions. Claims of miracle cure and unproven home remedies circulate faster than truthful advice by medical doctors.<sup>6</sup>

Pranksters use keywords such as “natural” and “no side effects” to fool people.

Not only does this result in delay in patients seeking medical attention, it also erodes the trust they have in modern medicine.

Such claims can be countered by giving relatable examples such as:

1. Even natural fruits like Blimbi, when consumed excessively, can lead to kidney failure.<sup>7</sup> Similarly, the naturally found Odollam fruit seed is one of the most lethal poisons known.
2. There is no medical product without side effects, and it is an FDA licensing requirement to list them. Just because it is not mentioned on the label it doesn't mean there are no side effects.

A rising danger on social media is the formation of Echo chambers - groups of like-minded people isolating themselves from the outside world and only listening to their own echoes (speech and ideas). They have the one-sided ideology of “If you are not with us, you are against us”- this breeds prejudice and hatred. It is important to address this phenomenon across all subject domains. Doctors in general prefer to avoid public criticism, for instance in a social media group comprising individuals of assorted professions. Instead of remaining silent and choosing to ignore, doctors need to speak up whenever medical misinformation is presented in a social group. This could be likened to stamping out a fire early.

Fake information cannot always be countered by simply providing a logical explanation. It needs to be packaged in a palatable format, and providing stories and examples are an effective method of reaching out to lay people. The right message has to eventually reach the grassroots level of the community. A story is more likely to be retold by the listener to others than a set of facts and numbers.

Unfortunately truth travels much slower and less widely than lies. If the initial lie reached a million people, the truth that comes later might eventually reach only a thousand. However, if no active effort is made to propagate the truth, it might reach only a hundred.

Many journalists have an active interest in healthcare myth-busting, and work together with doctors and professional organizations. Radio, television, newspaper and online media are effective weapons to counter misinformation.

Doctors could seek the assistance of reputed social media influencers to circulate credible information and counter fake news.<sup>1</sup>

As people of science, doctors must lead by example in teaching the community to develop a scientific temperament, using basic examples such as fact-checking.

Doctors should not be afraid to engage the public in constructive conversations. Medical misinformation spreads more when enough doctors do not come forward to counter it.

## 3. Social media in Medical Practice: Dr Sandeep Kunhikannan

### 1. Consultation using social media platforms

The correct term for this is “tele-consultation”, and not “social media consultation”. It has to be done in

a private one-to-one platform, and never in a public forum like a Facebook page, YouTube comment section or WhatsApp group. In other words, the information exchange between the doctor and the patient should not be visible to other social media users.

There are NMC (National Medical Commission of India) guidelines for social media consulting (tele consultation) and prescribing. There are clear norms for how doctors should behave on social media. Adhering to these norms is an integral part of being a licensed medical professional and a responsible team leader.

Main points from the NMC guidelines on doctors using social media

Medical Ethics should guide Social Media YES posts

Discussing treatment of patients in social NO media

Prescribing medicines in social media NO (public forums)

Purchasing “Likes”/followers NO

Requesting or sharing testimonials/Reviews NO

Sharing educative material YES

Images displaying impressive results NO

Soliciting of patients directly/indirectly NO

Informing about change in practice location YES

## 2. Fake ID

It is common to see fraudsters create fake profiles of well-known doctors on Facebook, WhatsApp, Instagram and even email. Through social media, they then approach the doctor's contacts asking for money, claiming that they are caught in a situation requiring urgent financial assistance. Despite this scam being commonly discussed, many people still fall for it, and part with large sums of money in good faith, e.g. through popular payment apps such as Google Pay. The gullibility of people and their sense of duty towards a doctor get exploited by such fraudsters. The money thus lost is often not possible to be retrieved.

Even if the doctor is not a social media user, someone could still create a fake profile in their name, and the scam could sometimes go on for years before the doctor is alerted. All fake IDs must be reported immediately to the respective social media platform by clicking on the three dots on the right side of the profile.

## Practical Tips:

### 1. Direct consultation is preferred.

It is easier to have the initial patient visit in person, and then consider switching to video consultations for subsequent visits after establishing rapport.

### 2. Public education should not fuel self-medication.

When creating public education videos, articles, or when responding to patients' questions on television or radio, it is advisable to focus on providing general information and preventive measures. It is best to refrain from making specific diagnoses based solely on symptoms, and from recommending particular medications for the patient or condition. This approach helps reduce the risk of potentially dangerous self-medication and minimizes the possibility of future litigation. It is crucial to bear in mind that the patient may have a completely different diagnosis for the symptoms described. Moreover, such comments could lead others with similar symptoms to self-diagnose and seek the wrong treatment.

## 4. Attacks on social media: Dr Rajeev Jayadevan

Disgruntled individuals sometimes take to social media and attempt to malign the reputation of individual doctors as well as hospitals. Due to the inflammatory and negative emotional content, people tend to blindly share them without cross-checking. Posts like these can reach millions of people within a matter of hours. Reputation that took a lifetime to build could thus be lost in a single day.

All doctors are vulnerable to such attacks, regardless of whether they are active social media users or not. The destructive power of such attacks should not be underestimated.<sup>8</sup>

There is no single textbook solution to this. Early action is required to reduce the damage. Not all offensive social media posts require engagement. When in doubt, it is helpful to consult office bearers of professional associations. Obtaining legal opinion, registering a police complaint and contacting the cyber cell are helpful. The National Cyber Crime Reporting Portal (NCRP) website has details. CERT-In (Indian Computer Emergency Response Team) is a part of Indian Ministry of Electronics and Information Technology (MeitY) that serves as the national nodal agency for responding to and mitigating cybersecurity incidents in India.

There are civil methods to effectively counter defamatory posts on social media platforms such as FaceBook. For example, users can utilise the comments section below the post. A brief, fact-based explanation of the event in simple language can be posted in the comment box, refuting the allegation. The response need not necessarily be from the person facing the allegation. When more people “like” the comment, it rises in rank to become the “top comment”. The result is that this comment will also be read by default by those who see the offending post. Readers will thus understand there are two sides to the story. Failing to comment is unfortunately akin to admission of guilt. The more people who respond with the same explanation, the better.

While a single statement can be effective, it is best to avoid being drawn into long arguments with other people on social media. Complex matters are best discussed in person, for instance, through a phone call.

Reporting offensive social media posts is remarkably easy, yet few people do it. There will be three dots on the right hand side of each social media post. This leads to a menu, which can be used to report the offensive post to the officials of the platform. Malicious posts are taken down by YouTube and Facebook, but only if enough people report it.

Preventing such attacks is not easy, yet minor work-related adjustments might help. For instance, avoiding unnecessary arguments with patients and bystanders in real life practice is a useful strategy to stay safe in the cyber world. A few doctors tend to be paternalistic with their advice, and such individuals could sometimes get into a verbal spat with people who disagree with them. It is worth noting that there is no law dictating that patients have to follow the exact advice given by their doctor. If they disagree despite reasonable counselling, an effective strategy would be to let them move on and see anyone whom they wish to seek another opinion from. The doctor's role is to provide advice. Whether or not patients choose to follow that advice is their prerogative. Unfortunately, there is nothing stopping an offended, disgruntled person from expressing their one-sided opinion about the incident on social media; and not all such posts are counted as defamatory. Doctors who have suffered attacks on social media would agree that the damage caused is not worth the trouble.

The above discussion represents the key points from a 30-minute panel discussion, and is not intended to serve as a comprehensive article on the subject. As social media takes greater hold on society, this evolving topic needs greater attention in scientific conferences.

## END NOTE

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