

VIEWPOINT

Like-and-Share (But Do Not Misinform)

The Contemporary Role of Social-Media in Medical Information Dissemination



Adham Ahmed, BS

With the rise of the digital age, the methods by which we receive and share information has undergone profound transformation. A recent study suggested that medical students prefer mobile-based methods of acquiring new information, likely because of the dynamic nature of their work.¹ This inherent ability to interact directly with content experts and peers affords young trainees the opportunity to gain a wide range of insight from a diverse academic community. In recognizing the various applications of social media in contemporary medical information dissemination, one must also be wary of potential pitfalls. First, social media websites implement strict character and image limitations, necessitating the condensation of complex medical information or data into an oversimplified format that may not adequately display the nuances required for accurate understanding. This also carries the risk of users becoming accustomed to superficial engagement with medical content rather than active reading and critical analysis, which are essential for informed medical practice. Therefore, although social media can serve as a valuable adjunct, it cannot and should not replace active engagement with primary literature.

Additionally, the democratization of information may amplify the spread of unverified medical content or misinformation, which can have serious implications in our field where accurate, impartial, and evidence-backed information is crucial. This is especially relevant when considering that social media

platforms have built-in “algorithms” that indirectly increase the visibility of unsubscribed content as more app users click and react to it. Therefore, posts containing polarizing content, controversial research findings, or emerging treatments with exciting applications can quickly gain traction as they get shared. To help combat this, several professional medical societies² have put out statements with social media “best-practice” recommendations, such as citing academic sources in posts, refuting inaccurate information that has already been posted, and clearly disclosing one’s credentials on their accounts. By complying with a series of established guidelines, students and young graduates can help mitigate the risks associated with social media use while maintaining the ethical and professional integrity expected of them.

Looking forward, as medical students and young trainees look to navigate the complexities of social media use in medicine, digital literacy skills and the ability to distinguish between credible and unverified content are paramount. Notably, training in social media use is not a required component of medical school education according to Association of American Medical Colleges standards.³ However, to fully harness the benefits of social media and mitigate its risk, medical schools and residency training programs may consider the incorporation of social media training and digital literacy into training curricula. This unprecedented access to medical information and networking opportunities also carries an inherent risk of medical

From the City University of New York School of Medicine, New York, New York.

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misinformation that risks ethical and professional medical practices. By establishing clear best-practice guidelines regarding medical social media use, teaching social media literacy in medical school, and promoting active engagement with primary literature, the power of social media can be leveraged to enhance education and information sharing while maintaining the integrity of the content being shared.

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ADDRESS FOR CORRESPONDENCE: Mr Adham Ahmed, City University of New York School of Medicine, 160 Convent Avenue, New York, New York 10031, USA. E-mail: aahmed018@citymail.cuny.edu.

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