

The Role of Social Media in the Education of Future Urologists.

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Abstract

Social media has changed the world over the last 20 years in many ways, including medicine. In a world of tablets, Twitter, and TikTok, patients have more access to information about their health conditions and treatments than ever. As a result, the precious patient-clinician relationship faces new challenges. Misinformation is rife, and many patients may not know that they are heading down the garden path of confusion until all trust in medicine is gone. This has been sadly illustrated by the stories that have emerged during the Covid-19 pandemic of fatalities resulting from “alternative remedies”, including the consumption of bleach and aquarium chemicals – people who were frightened of this unknown disease trusted the information they found online to keep them safe.

If 2020 has taught us anything, it is that social media is a force to be reckoned with, and the medical profession has an opportunity and duty to make high-quality information available, not just on peer-reviewed journals for healthcare professionals, but also accessible information, free of jargon, for the public. The consultants of the future must learn these skills now to keep our patients safe and preserve the patient-clinician relationship in a new era of fake news and fearmongering.

1.0 Introduction

Medical students today seem to attend two institutions for their learning – their medical school, and the internet. When I graduate in 2022, I will have my lecturers to thank, of course, but I would never cross the line without the teachers at Khan Academy, Zero to Finals, and Osmosis, among others. I encountered these resources through the power of social media – namely Google Podcasts and YouTube. Within a few days of attending medical school and watching YouTube videos to catch up on what I felt was a huge amount of information I was magically expected to have known ahead of time, I was receiving advertisements from different educational sites. My “next to view” list of videos changed from “best sheet masks reviews” to “beta pleated sheets overview”. The algorithm knew that I was in for a change. Social media for education is here to stay, and many students are familiar with the benefit of an expert who can be played at double speed with closed captions from the comfort of our own home.

Social media is also being used ever more frequently by patients to find a doctor, seek advice or definitions about their diagnosis, and seek alternative treatments in many cases to common diseases in a world where many patients have lost trust in a system with clogged waiting lists and “one size fits all” treatment plans. In 2003, up to 80% of internet users had sought health information online (Powell et al., 2003). Unfortunately, many of the sources that patients encounter are imperfect, resulting in the dissemination of health misinformation (Pagoto et al. 2019).

While social media can be used for student education in many ways, this essay will discuss three concepts: how we can use social media to understand the patient’s opinion, how it can be used to challenge students to develop content, and the issue of professionalism in social media.

2.0 Gaining Insight into the Patient Experience

A major difference between watching an educational YouTube video and reading a paragraph in a medical textbook is the comments box. The backgrounds of the commenters on many educational YouTube videos are varied, although they largely belong to one of two camps: medical students expressing their gratitude for the creator because they could not grasp a concept, and patients who have been told that they have a condition but don't understand it. The comments from the latter group can be educational in themselves; this access to patient opinions is an example of one of the most valuable elements of the dawn of medical education through social media.

In February 2021, Amanda Lee made a post on TikTok and Instagram which went viral, in which she tearfully described an appointment with a new gastrointestinal doctor. She had sought the help of several clinicians over several months, none of whom had been able to explain the reason for her severe abdominal cramps. She explained to the new doctor how she was unable to eat because of her abdominal pain, who responded with “maybe that's not such a bad thing”. She later found another clinician who was willing to listen to her and undertake appropriate investigations, who unfortunately diagnosed her with colon cancer (Funnell 2021). Dr Joshua Wolrich, a surgical trainee in the NHS and proponent of the “Health At Every Size” Movement (Robison et al., 2007), invited her to join his podcast, “Willing to be Wrong” and educate people about her experience of weight stigma in healthcare.

In urogynaecology, there is a wealth of accounts of poor patient outcomes following the mesh repair controversy. Unfortunately, a common theme in many of these cases is the feeling that nobody in the medical field listened to the women who were in this pain (Lyons 2019). Now patients who feel ignored can seek support online, gaining access to huge communities across the world (Rozenblum and Bates 2012). The narrative in these support

groups can offer medics insight into how patients are feeling, and how we can best support them.

Social media has given patients a voice, a platform to highlight their struggles with their conditions and care, as well as to praise clinicians who listen to them. Students can learn from these patient opinions; we can see exactly what is most important to patients when seeking healthcare. Using the cloud of patient experience can help to guide students and trainees to discover the types of clinicians they want to be for their patients (Greaves et al., 2013).

3.0 Using Social Media to Test Students

The Irish Society of Urology could be at the forefront of using social media to access their patients and provide appropriate clinical information while also providing opportunities for students to embellish their CV. Instead of (or as well as) essay competitions for students, the ISU could generate a competition whereby they need to make a 5-minute educational video for patients, or write the script for a podcast explaining a urological condition or procedure to patients without medical jargon. This would engage the TikTok generation in a new way, encouraging them to learn about different conditions, but more importantly to learn how to explain things in a way that their patients can understand. There is still a cohort of the population who are illiterate, to whom our information leaflets are not a solution (NALA 2021). Videos or brief podcasts could help to bridge this gap, and remind students that not all of their patients are as privileged as they are.

Topics could include –

1. “Who may be involved in your care when you come to urology services?” This would encourage students to realise that they are not working in isolation, and the experts in different fields may not always come in the form of other doctors.
2. Urology concerns in women – many women may be embarrassed by incontinence or pelvic organ prolapse, or they may not seek care, believing that there is nothing that can be done to help them with their symptoms (Pintos-Díaz et al., 2019), or have fears regarding the mesh repair controversy (Barber 2018). The ability to anonymously access a video explaining that there are many options open to them may encourage women to seek medical support.
3. Explaining the PSA – telling patients why the PSA is not always used for screening, and to explain why a “watch and wait” approach sometimes is the best idea. A patient who watches such a video before coming to a urology clinic may be able to spend some time formulating other questions to get the most out of their consultation.

With editing input from the ISU, winning videos may be released on the ISU social media accounts as another resource for patients. Patients are sourcing information online anyway, whether we like it or not. If we can provide high-quality information that is considerate of their fears, we can cultivate a positive relationship with our patients.

4.0 Caveats – Remember to be Professional

The misuse of social media is an understandable fear, but this should not serve as an excuse not to utilise the tool. Teaching students from an early stage in their medical training about the professional boundaries and ethical responsibilities they have as healthcare professionals will prove to be a valuable life lesson, even if they choose not to use social media for medical education. One study found that 26% of surgical trainees had posted content that was deemed unprofessional or potentially unprofessional on their personal Facebook page (Langenfeld et al., 2014).

Students and trainees need to be warned of the dangers of social media misuse. Guidelines about unprofessional content, the use of non-patient identifiers, and reminding students to highlight on their social media platforms that the content on their account does not replace the advice of a clinician can help the urologists of the future to avoid falling into the trap of unprofessional online behaviour (GMC 2013).

5.0 Conclusion

Medical education has been changed forever by the internet. Medical students and patients alike turn to their phone or computer for an immediate answer to their questions about medicine. Controlling the information that ends up on social media is very important – patients will always consult “Doctor Google”, but if the ISU can ensure that the information that the patients see is reliable and easy to understand, we will be on the same page and it will improve our relationship with urology patients. Challenging students and trainees to produce online content for patients to access would be an exciting opportunity to educate themselves and their patients, but this cannot be undertaken without teaching them of the dangers of unprofessional behaviour online.

Urology is an exciting and developing field. If urologists can develop a social media presence with a two-fold approach – educating medical students in an engaging, easily accessible way, and explaining conditions to their patients in an easy-to-follow fashion, urology would be on the cutting edge of a revolution.

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