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Doctors, Patients & Social Media

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Foreword

Social media and its relevance to health care have received significant recent attention. Much of the focus has been on whether the medical community should be active in this new medium and what is appropriate and professional. Less well-covered has been a comprehensive view of how clinicians can use social media to improve patient care. This is an important issue, given the speed with which social media has become a daily aspect of communication for patients, physicians and other health care stakeholders. As such, I'm pleased the Care Continuum Alliance is working with QuantiaMD on this topic.

Our goal with this collaboration has been to create a clear picture of how clinicians now use social media; to determine their interest in the range of ways they can apply it to their practices and what key concerns we must address before social media can truly become a part of their everyday professional lives; and to provide guidance and insight to the population health management community on areas of collaboration and support for physician practices. The research study demonstrates that many physicians already have embraced social media professionally and that the majority clearly have an interest in the wide variety of ways they might use it to improve patient care.

At a time when we should use every tool within our reach to improve the quality of health care and do so in economical ways, all the various stakeholders in the health care community should seriously consider how best to use social media – not only for their own purposes, but also to improve patient outcomes across the continuum of care.

Sincerely,

Tracey Moorhead
President and Chief Executive Officer
Care Continuum Alliance

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Executive Summary

Physicians are highly engaged with online networks and social media. Nearly 90% of physicians use at least one site for personal use, and over 65% for professional purposes. Overall, clinicians express significant interest in the potential applications of social media to their professions – whether via online physician communities, online patient communities or sites that could facilitate physician-patient interactions. A group of "Connected Clinicians" is using multiple social media sites for both personal and professional uses. These clinicians are the front-runners in applying social media to medicine, and are most eager to use it to positively impact patient care. Key take-aways from our study include:

- The vast majority of physicians are already using social media; Facebook tops the list for personal use, while online physician communities are driving professional use.
- Physicians familiar with online patient communities believe they positively impact patient health; however, awareness
 of these sites is low.
- Some 28% of physicians already use professional physician communities, with the highest enthusiasm around using them to learn from experts and peers.
- Clinicians see the potential in online interactions with patients to improve access to and quality of care, but concerns around patient privacy, liability and their compensation for such activities must be addressed.
- There is significant need for secure, convenient forms of electronic communication that clinicians can use to communicate with each other, and with patients.
- Over 20% of clinicians use 2 or more sites each for personal and professional use; these "Connected Clinicians" are the most eager to use social media to improve health care.
- There are opportunities for constituents across the health care system to use social media as a tool for improving patient care.

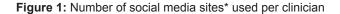
Our study included 4,033 clinicians and was conducted in August of 2011 on QuantiaMD. QuantiaMD is the leading mobile and online community serving over 125,000 physicians with opportunities to learn from, and exchange insights with, their peers and experts in their fields.

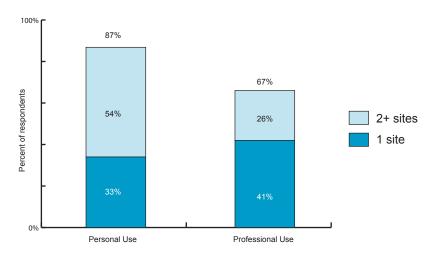
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Physician Use of Social Media Is High

Our study found that over 65% of physicians use some form of social media for professional purposes (*Figure 1*). Importantly, our definition of 'social media' includes not only social networking sites like Facebook and LinkedIn, but also professional and patient networking communities specific to the medical field, blogs and sites such as YouTube.





Note: 'Social media sites' include social networking (e.g. Facebook, LinkedIn), physician networking, patient communities, blogs, YouTube (N=4032) Source: QuantiaResearch www.quantiamd.com

Online physician communities are driving clinicians' professional use of social media, and they are used by 28% of physicians (*Figure 2*). Physicians are using these sites for a range of professional purposes, but educational objectives dominate at present. "I look for new developments in medicine, read new articles, and listen to experts," a physician said. Physicians also speak highly of these sites as a way to communicate with colleagues – whether for consulting on patient issues, discussing professional challenges or simply keeping in touch. Less frequently, physicians discussed how they used online professional communities to access CME, or sites such as Facebook to market their practice or institution to patients, and – much more rarely – to communicate with patients.

While professional usage rates are already impressive, clinicians' personal use of social media and online networks is even higher and approaches 90% (Figure 1). Facebook commands the field for personal use at over 60% (Figure 2). Physician use of Facebook has attracted a lot of attention recently. The AMA has issued guidelines cautioning physicians to maintain "appropriate boundaries of the patient-physician relationship" and suggests they "consider separating personal and professional content online." 1

66 I use these sites to communicate with colleagues about professional issues as well as consultations on patient issues. 99

AMA Policy: Professionalism in the Use of Social Media. American Medical Association. Accessed August 20, 2011 at www.ama-assn.org/ama/pub/meeting/professionalism-social-media.shtml

Along these lines, one-third of physicians in our study say a patient has tried to 'friend' them on Facebook. While three-quarters of physicians decline or ignore these invitations, the remainder accept them. "A few patients have 'friended' me and they message me with questions," a physician explained. "I don't prefer this form of communication but I feel awkward if I don't respond."

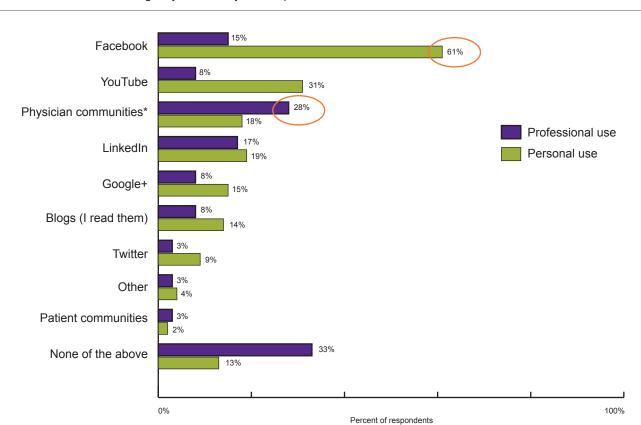


Figure 2: Which of the following do you currently use for personal use? Professional use?

Note: N=4032 for all responses except physician communities, which only includes respondents with no prior QuantiaMD connection (N=854). Source: QuantiaResearch www.quantiamd.com

66 A few patients have 'friended' me and they message me with questions. I don't prefer this form of communication but I feel awkward if I don't respond.

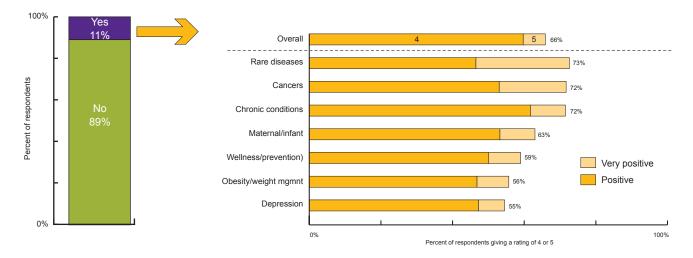
Online Patient Communities: Untapped Resource for Clinicians?

Although many physicians in our study are not well acquainted with online patient communities, two-thirds of physicians who are familiar with these communities say they have positive impact on patients (*Figure 3*). Almost 40% of these physicians say they already recommend patient communities to their patients and another 40% would consider recommending them (*Figure 4*). These positive physician views suggest that online patient communities may grow in acceptance by the medical community as more physicians become acquainted with them.

Figure 3: Physician views on patient communities

Familiar with one or more online patient communities?

Impact patient communities have on patients? (1=very negative, 3=no impact, 5=very positive)

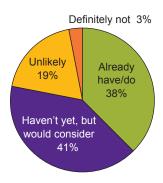


N = 3998, 449 Source: QuantiaResearch www.quantiamd.com

Most physicians who know about online patient communities say they are especially beneficial to patients with chronic illness, cancer and rare diseases. A majority of these physicians also see positive patient impacts for maternal and infant care, depression, wellness and prevention, and weight management. "Patients can share their stories," said a physician, "learn from others, spread knowledge, and instill hope." About half of physicians say they would be comfortable with serving as a source of professional advice for an online patient community or engage anonymously to better understand these communities (*Figure 5*).

66 Patients can share their stories, learn from others, spread knowledge, and instill hope. 99

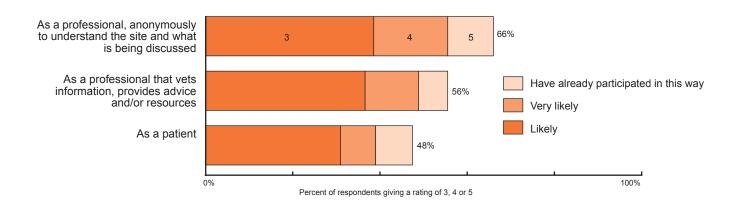
Figure 4: Would you recommend that a patient participate in an online patient community?



N = 448 Source: QuantiaResearch www.quantiamd.com

Figure 5: Would you participate/have you ever participated in an online patient community in these ways?

(1=would not, 3=likely, 5=have already participated in this way)



N = 448 Source: QuantiaResearch www.quantiamd.com

While a minority of physicians think patient communities have no or negative impact on patients, physicians voice some cautions on their use. Topping these concerns is the potential for misinformation. One physician said, "These sites lack a way to ensure information is correct and if information is general or applies to an individual." Alternatively, some physicians view these sites as forums for complaining about the medical community rather than fostering dialog about how best to use it. "I've seen them become not much more than social chat rooms. Worse, they become instruments of bad information, a lot of complaining, and blaming – fostering resentment against the medical community, doctors, and insurance..." For online patient communities to further expand their reach and focus on patient care, they should consider ways to engage and collaborate with clinicians – perhaps by using them to help validate information discussed on the site and ensure balanced views that are in the best interest of patients.

Online Professional Communities On the Rise

QuantiaMD is itself a physician community, with over 125,000 members – about 1 in 6 U.S. physicians. Therefore, to measure overall physician participation in professional online communities, we included in our sample a large group (N=854) of physicians with no prior connection with QuantiaMD. Among these physicians, 28% reported using online physician communities for professional purposes – a figure that is in line with Manhattan Research's figure of 24% from earlier this year (2011)², but which may understate overall current use since it excludes QuantiaMD.

Regardless of prior experience, the great majority of physicians surveyed say they are interested in using online professional communities to learn from experts and peers, discuss clinical issues and share practice management challenges (*Figure 6*). Significant interest also exists in applications that are likely considered a bit farther afield, such as patient consults, coordinating care teams and developing referral networks. Such applications have the potential to dramatically impact patient care by increasing the efficiency with which clinicians currently perform these activities.

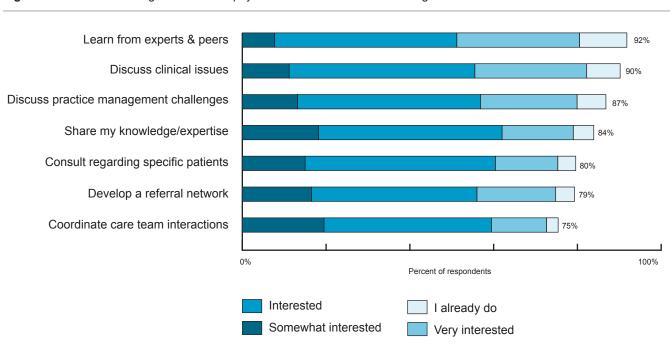


Figure 6: Interested in using secure online physician network to do the following?

Source: QuantiaResearch www.quantiamd.com

Online Physician-Patient Interactions Will Come, But More Slowly

While a group of 60-80% of physicians see the potential for a wide range of physician-patient online interactions, this level of interest is notably lower than for physician-physician interactions (*Figure 7*). Amongst physician-patient online applications, physicians show the strongest support for sharing educational materials with their patients. There is also solid interest in finding ways to monitor patients' health and behavior online. When asked about the benefits of online interactions with patients, clinicians most often cited improved access to care, supported by more – and more convenient – communication. One physician summed up his vision of online interactions with patients as the opportunity for "better education, increased compliance, and better outcomes."

Prescribe patient education resources Monitor patient health and/or behavior Monitor patient drug adherence remotely Give care advice to many patients simultaneously Grow and/or maintain your practice Give patients discount vouchers (RX, weight mgmnt programs, etc.) Diagnose and/or treat patients 0% 100% Percent of respondents Interested I already do Very interested Somewhat interested

Figure 7: Interested in interacting with patients online in a secure environment to do the following?

Yet, with all the promise and potential come strong concerns. Physicians are wary of diagnosing or treating patients online, with over 40% saying they are not interested in doing this. As one physician said, "There is no substitute, clinically, for actually seeing and examining

Source: QuantiaResearch www.quantiamd.com

N = 3993

no substitute, clinically, for actually seeing and examining the patient." In addition, physicians raise a set of familiar worries. Patient privacy and physician liability issues top the list, with one physician predicting, "Lawsuits, lawsuits, lawsuits, lawsuits" (Figure 8).

66 ...better education,increased compliance,and better outcomes.

66 Lawsuits, lawsuits, lawsuits. **99**

Concerns about liability
Concerns about patient privacy
No way to get paid for these activities
Lack of time
Feel such interactions are inappropriate
Just not that interested
The technology is new to me

0%

Percent of respondents

Figure 8: Top concerns that may hold you back from interacting with patients online? (Choose up to 3)

N = 3987 Source: QuantiaResearch_www.quantiamd.com

Physicians remain perplexed about how they will be compensated for their online activities and their lack of time to conduct them. "I already spend ten hours a day on patient care," said a physician. "Then to come home and do online consulting, too?"

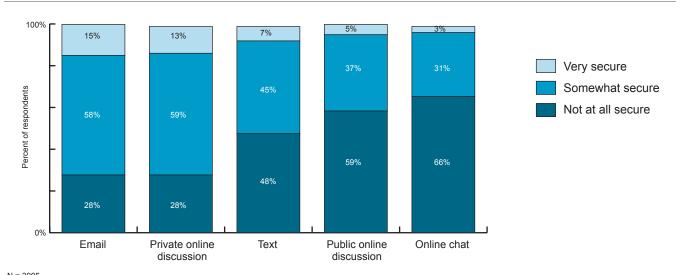
Yet, for all the hesitations, only 20% of physicians see online communication with patients as inappropriate, and even smaller numbers express general disinterest or that the technology is a barrier. This underlines the potential physicians see in online interactions with patients – if issues of privacy, liability and reimbursement can be addressed.

Clinicians Need Secure, Convenient, Electronic Communication

Two-thirds of physicians in our study have used email to communicate with other physicians about patients. Yet 85% think email is either not secure, or only somewhat secure (*Figures 9, 10*). Almost a third use text messaging for the same purpose, and physicians have even less confidence in the security of texts. In fact, physicians expressed little confidence in the security of any electronic channel. Perhaps, as a result, physicians are even more cautious about using these channels to communicate with patients. While roughly 80% have used these channels to communicate with each other about patients, only half have used them to communicate directly to patients.

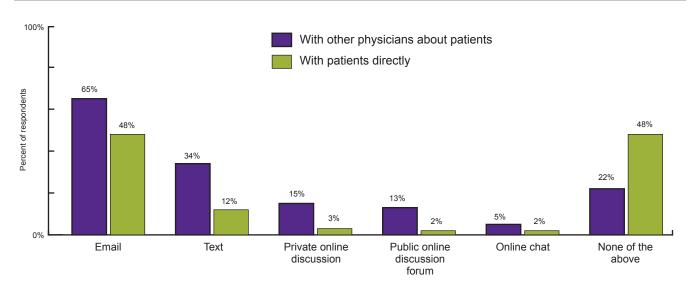
Given their security concerns, it's surprising that so many clinicians have used these channels. This underscores the need for secure, convenient forms of electronic communication that health care professionals can use. When physicians feel this gap is filled, they will likely be much more open to the full range of ways in which social media can be applied to their professional practices.

Figure 9: How secure are the following for health care professionals?



Source: QuantiaResearch www.quantiamd.com

Figure 10: Which have you used to communicate with other physicians about patients? With patients directly?



N = 3995 Source: QuantiaResearch www.quantiamd.com

"Connected Clinicians" Leading the Charge

Over 20% of clinicians use 2 or more social media sites for both personal and professional use (*Figure 11*). This is the group that will push the boundaries of how social media can be applied to improve health care and truly build momentum in its uptake. They are the most enthusiastic about the range of ways they can employ social media professionally (*Figure 12*). They also tend to be more aware of, and participatory in, online patient communities, and to believe more strongly in their impact on patient care (*Figure 13*). In a similar vein, they are also more likely to communicate with patients electronically (*Figure 14*).

Figure 11: Connected clinicians are leaders in applying social media to medicine

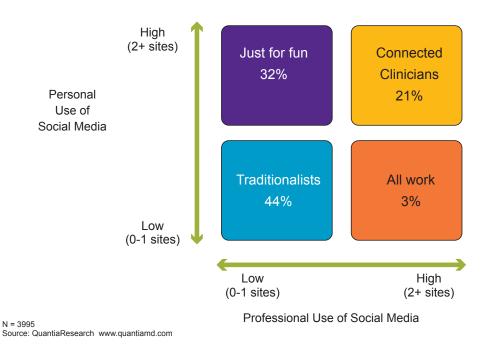
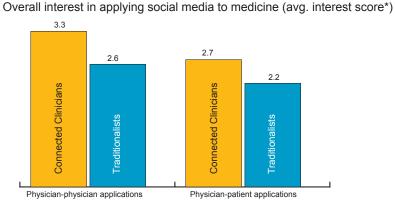


Figure 12: Connected clinicians are more eager to apply social media to medicine

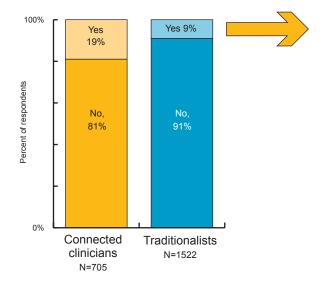


N = 706 (Connected Clinicians), 1525 (Traditionalists). Note: Measures average interest in all applications listed, weighting them equally Source: QuantiaResearch www.quantiamd.com

Figure 13: Connected clinicians are more aware of online patient communities, and believe more strongly in their impact.

Familiar with one or more online patient communities?

Impact patient communities generally have on patients?
(% Rating "Positive" or "Very Positive")

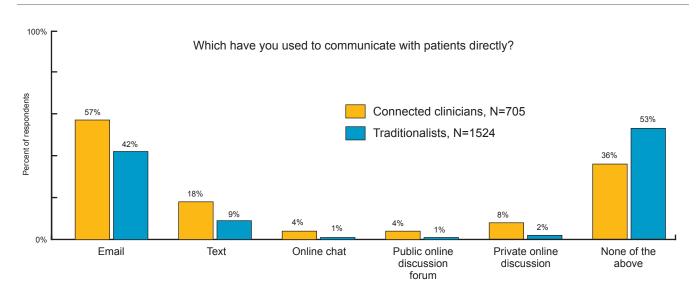


70%
Very Positive
Positive
Positive
Connected clinicians
N=131

Traditionalists
N=134

Source: QuantiaResearch www.quantiamd.com

Figure 14: Connected clinicians are more apt to communicate electronically with patients.



Source: QuantiaResearch www.quantiamd.com

Stakeholders Can Tap Social Media to Improve Patient Care

A range of opportunities exists for stakeholders throughout the health care system to work with physicians via social media, and find new ways to improve patient care.

Health plans and care management organizations

Payers and care management organizations looking to engage members more fully in their health have new options. In particular, they might consider supporting or actively promoting certain online patient communities – not only to their members, but also to physicians in their networks. They might even work with such sites to address physician concerns around accuracy of information and provide resources that help sites validate information and maintain balanced views through clinician participation.

Online physician communities are also a new channel through which these players might work. The vast majority of clinicians said they would like to 'prescribe' good patient education materials. Payers and others can work through these communities to arm physicians with such resources, and also provide related physician education as needed. Other educational opportunities also include provision and discussion of treatment guidelines, and more focused efforts might engage physicians on difficult topics such as physician quality ratings.

Of course, the big win for payers would be to solve the physician reimbursement dilemma by creating opportunities for payment when online physician-patient interactions are used appropriately to decrease overall health care utilization. If physicians can minimize unnecessary appointments, and address them using some form of secure electronic communication, it is a win for everyone involved.

Pharmaceutical and medical technology companies

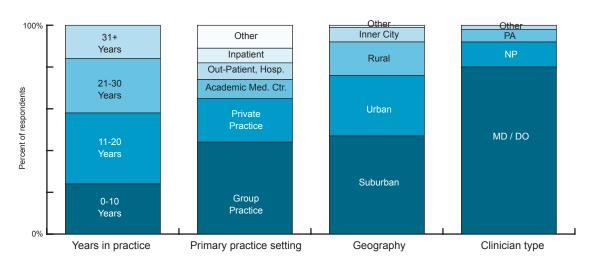
The pharmaceutical industry has been actively exploring social media, but is still far from using it to its full potential. For the vast majority of medical technology companies, social media represents a completely new opportunity to communicate with their customers. Both players should consider ways to engage and utilize online patient communities. Providing support and resources through these sites is one way to go, but much could also be learned from these sites about patients' experiences and needs. Actively tapping into such forums could supplement efforts around innovation, product development and customer/patient services.

Pharma and med tech companies should also leverage online physician communities as a new way of reaching rapidly growing numbers of clinicians. Such sites provide ample opportunities to educate customers about their products, and to provide physicians with patient education materials and other tools - perhaps even finding ways to collaborate on things such as adherence solutions.

Importantly, in order for pharmaceutical and med tech companies to use this new media to its full potential, additional regulatory clarity is required. At present, guidelines have not been put forth for social media, and the uncertainty surrounding regulatory issues significantly impedes companies interested in sharing information in this way.

Survey Demographics

Figure 15: Demographics of Clinician Respondents



N=4032 Source: QuantiaResearch www.quantiamd.com

Methodology

The survey was fielded in August of 2011 using QuantiaMD as the platform for gathering responses. Study participants included both current QuantiaMD members (3,178) and clinicians with no prior connection to QuantiaMD (854), who were invited to participate via e-mail. Study participants self-selected as respondents from among a large group invited. In addition, the study was fielded electronically, so only physicians with access to and comfort with computers and/or mobile technology have responded. Thus, it is possible that the respondent group was inherently more interested in the topic of social media than non-responders, and more likely to be using it given stronger access to and comfort with computers and/or mobile technology.

Given that QuantiaMD itself is a physician community, we excluded responses from current QuantiaMD members from the question pertaining to physician community use. We also compared our results with several other data sources. Among physicians with no prior use of QuantiaMD, we found that 28% had used an online physician community. This figure is in line with Manhattan Research's recent *'Taking the Pulse'* study, in which 24% of physicians said they use online professional communities (N=1537).³ Manhattan Research's study was fielded in Q1, 2011 using a combination of telephone interviews and an online survey.

Another study, released in June, 2011, conducted by the Journal of General Internal Medicine found that only 42% of practicing physicians had used 'social networking sites', which compares with our overall rate of use of 90% for personal reasons and 65% for professional activities.⁴ Journal of General Internal Medicine's much lower figure may in part reflect the method of data collection, which was U.S. mail only. In addition, the study was fielded up to 18 months earlier than ours, between February and May of 2010. Finally, this study focused only on social networking sites and not social media more broadly, under which we explicitly included professional and patient communities, blogs and YouTube as well as Facebook, LinkedIn and the newly launched Google+.

3Manhattan Research, Taking the Pulse® v11.0 study – May 2011 4Bosslet et al, "The Patient-Doctor Relationship and Online Social Networks: Results of a National Survey," J Gen Intern Med, published online 25 June 2011.





As the largest mobile and online physician community, QuantiaMD exists to help physicians reshape medical practice for modern times. QuantiaMD members share expert thinking, test their understanding, and stay ahead of rapid scientific advances. More than 125,000 members access QuantiaMD for free through any smartphone, tablet or computer.

For more information, visit: www.quantiamd.com

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