Social Media – A primer for doctors

Social Media is force for good
Disclosures

• Paid columnist for theHeart.org | Medscape Cardiology
• Speaker – Pfizer
  – Just one talk on Social Media
• My wife Staci practices hospice and palliative care medicine.
Social Media

Web-based and mobile technologies used to turn communication into interactive dialogue between organizations, communities, and individuals.
Social Media
How I got started ...

Dr. Wes

Musings in the life of an internist, cardiologist and cardiac electrophysiologist.
Lifelong Learning
In 2015, I use this:
To do this:
And this...
In 1996...

- No CRT
  - Mustic Trial – 1999

- No AF ablation:

Haïssaguerre et al 1998
1) Social Media as a learning tool
2015 -- Education
Sunday, July 5, 2015

Understanding lactate in sepsis & Using it to our advantage

Myth-busting: Lactated Ringers is safe in hyperkalemia, and is superior to NS.

Introduction Several months ago I gave a grand rounds on pH-guided resuscitation which was summarized in this post. ...

Four DKA Pearls

Introduction I have a confession to make: I love treating DKA. It’s satisfying to take a patient from severe acidosis, electrolyt...
Why academic journals are teaming up with Reddit

aware of how many of our readers are regular redditors and follow r/science in particular,” Costello told me in a phone interview. “We also noticed that whenever one of our articles or blog posts lands on that page and gets upvoted, we have enormous spikes in visits. On more than one occasion it’s caused our entire site to crash.”

By Simon Owens
Doctor Mike Evans

Hi... I'm Doctor Mike Evans, and welcome to the visual lecture I call...

23½ hours

23 and 1/2 hours: What is the single best thing we can do for you...
Benign PVCs: A heart rhythm doctor's approach. - Dr John M
www.drjohnm.org/.../benign-pvcs-a-heart-rhythm-doctors-approach/▼
2 Jun 2013 ... Response to exercise: PVCs that mostly occur at times of rest and suppress with exercise are usually benign. PVCs that women with exercise ...

Premature Ventricular Contractions - Cleveland Clinic
my.clevelandclinic.org/services/.../premature-ventricular-contractions ▼
Premature ventricular contractions (PVCs) are the most common cause of irregular heart rhythms. ... For most people, PVCs occur infrequently and are benign.

Premature ventricular contraction - Wikipedia, the free encyclopedia
en.wikipedia.org/wiki/Premature_ventricular_contraction ▼
PVCs can be distinguished from premature atrial contractions because the compensatory ... Isolated PVCs with benign characteristics require no treatment.

Premature Ventricular Contractions (PVCs) Symptoms, Causes...
www.medicinenet.com/premature_ventricular_contraction/page4.htm▼
What are premature ventricular contraction symptoms?

Do PVCs lead to v-tach? - Doctors Lounge(TM)
www.docslounge.com/cardiology/forums/.../topic-24286.html▼
Sometimes my PVCs seem to come one right after another, and this ... people to reconcile the benign nature of PVCs with the way they feel (or ...

Anxiety over long runs of PVCs/PACs - Doctors ... 5 berichten 20 dec 2009
Palpitations during exercise - Doctors Lounge(TM) 22 berichten 3 maart 2007

Premature Ventricular Contractions (PVCs) - CardiacHealth
www.cardiachoice.com/premature-ventricular-contractions-pvcs▼
Premature Ventricular Contractions (PVCs) ... More often, PVCs do not indicate any inherent problem with electrical stability, and are completely benign.

Frequent ventricular extrasystoles: significance, prognosis
www.escardio.org/.../frequent-ventricular-extrasystoles-significance-prognosis-treatment-perez-silva.aspx▼
28 Jan 2011 ... Frequent and apparently idiopathic premature ventricular contractions (PVCs) are usually considered a benign condition that can be managed.
What is the best treatment of AF

Atrial Fibrillation Info
www.nvaf.info/ - Help Patients with AFib Reduce The Risk of Ischemic Stroke.

AFib Patient?
www.lessen-afib-stroke-risk.com/ - Ready to Break Your Afib Routine? Ask a Dr About an Afib Treatment.

atrial fibrillation - Heart Disease - About.com
heartdisease.about.com/library/faq/blfaqafib.htm - Frequently Asked Questions. Why do I have atrial fibrillation, and what's the best treatment? Atrial fibrillation is a common cardiac arrhythmia. It is characterized...

New Treatment for Atrial Fibrillation - Discovery's Edge ... - Mayo Clinic
www.mayo.edu/research/discovery/.../new-treatment-atrial-fibrillation - Summary, Mayo Clinic researchers are advancing a less invasive procedure to treat atrial fibrillation — a heart arrhythmia that can limit the health of cardiac...

The best treatment for AF is knowledge. - Dr John M
www.drjohnm.org/2011/03/the-best-tool-for-treating-atrial-fibrillation/ - Mar 20, 2011 - By far, the most effective way to treat AF patients is to provide them information. Knowledge is king. AF patients need to know stuff about their...

AFib Treatment: Preventing Clots and Controlling Heart Rate - WebMD
www.webmd.com/heart/atrial-fibrillation-stroke.../a-fib-treatment... - WebMD - Learn about AFib treatment and why it’s important to prevent clots and control your heart rate. ... Tips and facts to help you live your best with atrial fibrillation.

Atrial Fibrillation - New Technology Doubles Treatment Success Rate
www.medicalnewstoday.com/articles/248057.php - Medical News Today - ★★★★★ Rating: 4.4 - 8 votes
Jul 20, 2012 - "Treatment of Atrial Fibrillation by the Ablation of Localized Sources: ... and best and give us side effects that are almost as bad as the A Fib... More by Catharine Paddock - in 37 Google+ circles

Can Atrial Fibrillation (AF or Afib) Be Cured? - StopAfib.org
www.stopafib.org/cured.cfm - Can 3, 2011 - Atrial fibrillation treatments, including afib catheter ablation. Get more...
cardiac electrophysiologist, cyclist, learner

By far, the most effective way to treat AF patients is to provide them information. Knowledge is king. AF patients need to know stuff about their crazy new disease.

<table>
<thead>
<tr>
<th>Title</th>
<th>Views</th>
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<tbody>
<tr>
<td>Benign PVCs: A heart rhythm doctor’s approach.</td>
<td>135,669</td>
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<tr>
<td>What’s a normal heart rate?</td>
<td>126,201</td>
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<tr>
<td>The best tool for treating atrial fibrillation</td>
<td>74,292</td>
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<tr>
<td>Atrial Flutter — 15 facts you may want to know.</td>
<td>64,322</td>
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<tr>
<td>What’s Electrophysiology?</td>
<td>62,168</td>
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<tr>
<td>The Mysterious Athletic Heart</td>
<td>51,900</td>
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<tr>
<td>Alcohol and atrial fibrillation: questions, conflicts and choices...</td>
<td>31,888</td>
</tr>
<tr>
<td>Ten things to expect after AF ablation</td>
<td>28,274</td>
</tr>
</tbody>
</table>
Another advantage of visualisations.

This is the breakdown of human memory retention – according to William Glasser. pic.twitter.com/Zah1vrt9Vi

- 10% of what we read
- 20% of what we hear
- 30% of what we see
- 50% of what we hear and see
- 70% of what we discuss with others
- 80% of what we experience personally
- 90% of what we teach to others
Josh Farkas @PulmCrit

My favorite part of blogging is when, in attempting to support an argument, I find data proving it wrong and forcing me to change practice.
@drjohnm personal opinion: blog post from trusted source >>> review paper. My recent fav: @PulmCrit (other than yours, of course)
Why Most Published Research Findings Are False

John P. A. Ioannidis

Published: August 30, 2005 • DOI: 10.1371/journal.pmed.0020124
@MGKatz036 @PulmCrit Dr David Schriger is a methodologist who said MD blogs maybe most trusted place. @lowninstitute

Perhaps my favorite session at Lown was the one titled: *So you think you know the evidence.* The three leaders of the lecture were scientists who study methods—Dr. John Ioannidis (Stanford), Drs. Jerome Hoffman and David Schriger (UCLA). They each spoke about how science, especially medical science, is broken. I audio-taped the lecture so I may revisit it again. For now, here are some (very raw) scribble marks I made in Evernote. The final question in that session came from a family doc: “Who are we to believe then?” A long pause ensued, and I kid you not, Dr Schriger mentioned that… “a lot of real doctors write blogs.”
After you read this

Always read this

Richard Lehman’s journal review—6 July 2015

NEJM 2 July 2015 Vol 373
11 Liraglutide for weight loss.
Like the second Iraq war, we knew for years that it was coming. The propaganda was laid out well in advance. "Obesity is a chronic disease with serious health consequences," say the NovoNordisk authors. No it’s not, it’s a measure of body weight that carries certain risks. Likewise “pre-diabetes,” which is a blood level that in the majority of people does not lead to diabetes. And diabetes too is just an arbitrarily defined risk cluster, not a weapon of mass destruction. Moreover, if we are going to medicate every fat person in the Western world, we need long term outcome data, not just evidence of a drop in blood glucose and BMI. This 56 week trial recruited 3731 “patients” at 191 sites in 27 countries. Why? You could easily find that number of “patients” with BMI >30 (or >27 if at elevated risk) in any small township in the developed world. Nearly 80% of the people recruited were women. Why? “The sponsor, Novo Nordisk, planned and performed the statistical analyses, [and] provided editorial and writing assistance.” Why? Because everybody does it and the FDA doesn’t mind. Liraglutide will undoubtedly get its licence for use in weight reduction. Three mg daily would currently cost about £200 per month in the UK, and there are at least 15 million Britons who would meet the recruitment criteria of this trial. I make that a potential NHS bill of £36bn annually. Some NICE bargaining lies ahead. Let’s hope they will insist on long term outcome data, with a close look at the cost/benefit ratio and potential harms.
2) Social Media because it’s necessary
More Americans said they would give up TV before Internet.
President Obama meets YouTube stars 01:13
• Create your story or someone else will
• You have no control over what people say about you online
• You have 100% control of the story you create
Dr. Brennan M. Haraden, MD
https://plus.google.com/114369223729547895540/about?gl=us&hl=en
Google+ page - Be the first to review

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baptistmedicalassociates.com › Find a Physician ¬
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Brennan M. Haraden, MD, FACC - Louisville Cardiology ...
louisvillecardiology.com/meet-our.../brennan-m-haraden-m-c-f-a-c-d/ ¬
Brennan Haraden, M.D., F.A.C.C. is board-certified in cardiovascular disease, internal ... Dr. Haraden is the Medical Director of the Outpatient Cardiac Nuclear ...

Dr. Brennan M. Haraden, MD - HealthGrades
www.healthgrades.com › ... › Kentucky (KY) › La Grange -
★★★★★ Rating: 4 - 4 votes
Visit Healthgrades for information on Dr. Brennan M. Haraden, MD. Find Phone & Address information, medical practice history, affiliated hospitals and more.

Dr. Brennan M Haraden MD - Vitals
www.vitals.com › Find a Cardiologist › KY › Louisville Cardiologists ¬
★★★★★ Rating: 3.5/5 - 7 votes
Dr. Brennan Haraden, MD, rated 3.5/5 by patients. 7 reviews, Affiliated with four star hospital, board certified in Cardiovascular Disease, Phone number ...

Dr Brennan Haraden, MD - Health - U.S. News & World Report
health.usnews.com › Doctors ¬ U.S. News & World Report ¬
Dr. Brennan Haraden is a Cardiologist in Louisville, KY. Dr. Haraden admits patients at Baptist Health Louisville, Baptist Health La Grange.

Dr. Brennan M Haraden Louisville KY - Checkbook
www.checkbook.org/reviews/.../doctors/.../brennan-m-haraden-1063410... ¬
Checkbook.org Find the most trusted and ethical Cardiologists Reviews, Ratings & Complaints about Dr. Brennan M. Haraden in Louisville KY.

Dr. Brennan M. Haraden, MD - WebMD Physician Directory
doctor.webmd.com/doctor/brennan-haraden-md-38996615-cd3... - WebMD ¬
Brennan Haraden is a practicing Cardiovascular Disease doctor in Louisville, KY.
As you soon as you touch a patient, you are a public physician
3) Social Media because your voice matters
• Tomorrow’s leaders will be public physicians

• If you speak people will listen
Growing Doubt on Statin Drugs: The Problem of Drug-Lifestyle Interaction

John Mandrola | Disclosures
July 02, 2014
To: Webmaster

Name:
Ali - Dr. Oz Producer

Email:
APerry@zoco.com

Subject:
Dr. Oz Show statin segment

Message:
Hi Dr M - Hope this finds you well! I'm a producer for The Dr. Oz Show and read your article on statins. I'm producing a segment on statins next week and think your POV might be an interesting one. I'd love to chat over the phone if you're interested in the possibility. My number is (212) 259-1623 - and for availability purposes, the segment is scheduled to tape on Friday, August 27.
Looking forward to hearing from you!
Best,
Ali Perry
APerry@zoco.com
Doctors Face New Scrutiny Over Gifts
New Health Law Calls for Increased Disclosures

By PETER LOFTUS
Aug. 22, 2013 7:57 p.m. ET

U.S. doctors are bracing for increased public scrutiny of the payments and gifts they receive from pharmaceutical and medical-device companies as a result of the new health law.
DR. JOHN MANDROLA, M.D. - Cardiac electrophysiologist

TRIATHLON DEATHS
Majority of deaths during triathlons occur during the swim
To:
Webmaster

Name:
Jasmin (NPR L.A.)

Email:
jtuffaha@scpr.org

Subject:
Media - Tmrw - KPCC (NPR L.A.)

Message:
Hello Dr. Mandrola,

I'm a journalist with the flagship, daily public affairs program on the #2 NPR station in the country. Tomorrow, (WED) at 2:45p ET, could you join us to talk about Girl Scouts. I loved reading your blog and think our listeners would enjoy the though-provoking ideas you present. Please let me know at your earliest convenience. It would be a 15-minute conversation including calls from our intelligent listeners.

Thank you, Jasmin Tuffaha, Producer, "AirTalk with Larry Mantle" cell 310-710-5357
www.scpr.org
“People are hungry for level-headed physician voices. There's no grandeur in refusing to partake”
Why is public thinking good for you?

- Transparency
- Spread of Ideas
- Connection
Connection...

Professor: quick? If I may. 50 y male. African descent. Heavy weight lifter. LV sep 2.1. PW 1.7. No grad. No sym. I don’t think it’s HOCM.

1/22/15, 4:37 PM

There is no way that any athlete will have physiological LVH of 21. Sure about measurements?

1/22/15, 6:26 PM

Yes. I watched them. CI 1.7-2.4 of septum. Presented w/PSVt Old Prob. 100% asymptomatic. W/u ongoing. I’ll do exercise study, 24 ecg. Ty

1/22/15, 6:32 PM
@mcuban Anytime. I sometimes forget that there are not just scientists out there who care about science. Thanks for reminding me...

10:16am · 9 Jul 2015 · Twitter for iPhone
4) Social Media because we have a moral obligation
Ralph Waldo Emerson

*The American Scholar*
1837

“Man Thinking”
2015 Examples where “Thinking MD” is needed

Atrial fibrillation care
Vaccines
End of life care
5) Social Media because that’s where your patients are
Patients are online

- 80% of patients go online for health info
- 88% of people who care for loved ones and have access to Internet go online (Pew)
- 24% of patients post information online about their health experiences (PriceWaterhouseCooper)
- 60% of patients say they trust online info posted by doctors.

Tom Ferguson, MD
(July 8, 1943 – April 14, 2006)

Said this in 1995>

• You are already your own doctor...

• People provide their own illness care 80% of the time

• Our most powerful health resources are our spouses, families, friends, social networks, and communities.
INFORMATION AGE HEALTHCARE

(doctom@doctom.com, www.fergusonreport.com)
The E-patient

Equipped
Engaged
Empowered
Enabled
5) Social Media – Tips
Online Medical Professionalism: Patient and Public Relationships: Policy Statement From the American College of Physicians and the Federation of State Medical Boards

Jeanne M. Farnan, MD, MHPE; Lois Snyder Sulmasy, JD; Brooke K. Worster, MD; Humayun J. Chaudhry, DO, MS, SM; Janelle A. Rhyne, MD, MA; and Vineet M. Arora, MD, MAPP, for the American College of Physicians Ethics, Professionalism and Human Rights Committee; the American College of Physicians Council of Associates; and the Federation of State Medical Boards Special Committee on Ethics and Professionalism

... created content and communications on Web‐based applications, such as networking sites, media sharing sites, or blog platforms, have dramatically increased in popularity over the past several years, but there has been little policy or guidance on the best practices to inform standards for the professional conduct of physicians in the digital environment.
Tips for #HCSM success -- Lesson from marketers
Tip 1 -- Everyone is connected

“In the digital age, there has never been a better time to live by the Golden Rule, do unto others as you would have them do unto you.”
Tip 2 – Candor

SM has heightened the collective BS meter
Tip 3 – Bring value

Does your voice help?

Are you making things better?
Tip 4 – You do not need permission

Vertical hierarchy of medicine is gone:

Cardiac tachyarrhythmias and patient values and preferences for their management: the European Heart Rhythm Association (EHRA) consensus document endorsed by the Heart Rhythm Society (HRS), Asia Pacific Heart Rhythm Society (APHRS), and Sociedad Latinoamericana de Estimulación Cardíaca y Electrofisiología (SOLEACE)

Deirdre A. Lane (Task Force Chair, UK), Luis Aguinaga (Argentina), Carina Blomström-Lundqvist (Sweden), Giuseppe Boriani (Italy), George Andrei Dan (Romania), Melanne True Hills (USA), Elaine M. Hylek (USA), Stephen A. LaHaye (Canada), Gregory Y.H. Lip (UK), Trudie Lobban (UK), John Mandrola (USA), Pamela J. McCabe (USA), Susanne S. Pedersen (Denmark), Ron Pisters (The Netherlands), Simon Stewart (Australia), Kathryn Wood (USA), Tijana E. Rotkova (Co-Chair, Serbia)

Document Reviewers: Bulent Gorenek (Reviewer Coordinator, Turkey), Jamie Beth Conti (USA), Roberto Keegan (Argentina), Suzannah Power (UK), Jeroen Hendriks (Netherlands), Philippe Ritter (France), Hugh Calkins (USA), Francesco Violi (Italy), Jodie Hurwitz (USA)
Tip 5 – It’s all about the story

“If you can tell a story, you are a leader.”

-- Richard Gunderman, Indiana University
Tip 6 – Storytelling is different now

1500 times
Tip 7 -- Patience and persistence pays off

In the digital space, willingness to fail is rewarded
Tip 8 – Privacy is NOT dead

• Consider the moral obligation that goes beyond HIPAA

• PRIP –
  – Privacy
  – Respect
  – Intent
  – Perception
I just saw the most amazing case of neonatal hemochromatosis...Not sure the little fella’s gonna make it.
Tip 9 – Never post when angry

When in doubt ... pause.
Tip 10 – Do not friend patients online

There are exceptions to every rule, but not many.

When contacted for medical advice, take it offline

Set ground rules
Twitter
5 social media lessons from Roger Ebert, @EbertChicago

Roger Ebert, who died last week at 70, wasn't only a successful film critic. He was also a successful user of social media. We can all still learn from him.

by Sree Sreenivasaan @sree / April 7, 2013 11:42 PM PDT
“The fact that twitter forces you to distill your idea to 140 characters is a positive discipline. Many scholars will claim that it is impossible to say anything important in fewer than 5,000 words. My view is that if you can’t summarize your key point or finding 140 characters, you are probably not clear in your own mind.”

@RichardvReeves    Brookings Institute
7) Twitter as an antidote for information overload
In 2013, Medline added 734,052 citations. If just 1% of that new literature is relevant to your practice and you read 2 articles per night, you would be 10+ years behind.
Information Overload

Most relevant content
every single day!
Twitter as my filter
TweetDeck – Don’t Miss Column
Twitter uses
Stacy Loeb, MD @LoebStacy

- Major news
- Emerging research
  http://www.urologymatch.com/StacyLoeb
- Conferences
- Journal club
- Advocacy
- Networking/Socializing
- Crowd-sourcing
- Advertising
Healthcare Hashtag

Why the Healthcare Hashtag Project?

Discover Where The Healthcare Conversations Are Taking Place

Discover Who To Follow Within Your Specialty Or Disease

Discover What Healthcare Topics Are Trending In Real-time

The Community by the Numbers

992,184,644 Tweets

14,725 Topics

7,438 Hashtags

2,889 Contributors
Facebook

Personal Page keep private

Public Page
Alternatives

Joyce Lee, MD, MPH
@joyclee

“The biggest risk of social media in healthcare is not using it at all.” @kevinmd hcsms
nyti.ms/16LB42s

12:25 PM - 29 Aug 13
Thanks
1. Have no fear
2. Never post when angry
3. Strive for accuracy
4. When in doubt, pause
5. Don’t post anything that can ID patient – Beyond HIPAA
6. Ask permission
7. Be respectful
8. Assume beneficence – people are mostly good
9. Do not friend patients
10. Ask for help --