InterSECT section

- 2 New Horizons for Stroke Medicine: Understanding the Value of Social Media
- Jose Maria Cabrera-Maqueda, MD; Jatinder S. Minhas, MRes, MRCP.
- 4 Department of Neurology, University Hospital Virgen de la Arrixaca, Murcia, Spain
- 5 (J.M.C-M.). Cerebral Haemodynamics in Ageing and Stroke Medicine (CHiASM)
- 6 Research Group, Department of Cardiovascular Sciences, University of Leicester,
- 7 Leicester, United Kingdom (J.S.M.)

1

- 8 Correspondence to: Jose Maria Cabrera-Maqueda. Address: Department of Neurology,
- 9 University Hospital Virgen de la Arrixaca. Madrid-Cartagena Road, 30120, El Palmar,
- Murcia, Spain. 0034 661090464. Email: josemaria.olvera@gmail.com
- 11 Key words: stroke medicine, social media, social network, training doctors, conference
- Word count: 2000 words including references

Social media (SoMe) has provided individuals and organisations with an openly accessible platform encouraging participation and engagement in different forms of media (blogs, photos, infographics and videos). In the past decade, there has been an exponential increase in platforms supporting user-driven content all encouraging differing degrees of SoMe interaction. Despite the initial SoMe revolution being based on social interaction, increasingly medical professionals are harbouring such streams of communication to further medical knowledge and develop professional networks. An example of a SoMe platform is Twitter, a well-established "microblogging tool" which supports "communities" of medical professionals interacting regularly. Importantly, data supports an increasing coverage of biomedical literature on Twitter (~10% of all published literature).³ Stroke medicine is constantly evolving to adapt to new technologies which have supported new therapies and new diagnostic tools. However, little is known about the benefit of new technologies to our ways of communicating. In this article we discuss how stroke trainees in particular could benefit from using SoMe to communicate and improve their educational, professional and academic development. Furthermore, we provide for the first time, Twitter analytic data from an international stroke trainee based meeting to demonstrate real-world value to trainees and importantly organisations.

29

30

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

Benefits to Patients

31

32

33

34

35

36

37

38

39

40

In the last decade, several medical and surgical specialities including radiology,³ nephrology,⁴ dermatology,⁵ urology⁶ and colorectal surgery^{7,8} have developed international SoME platforms to disseminate a variety of professional and patient relevant outputs. These include online journal clubs, anonymized cases and patient friendly information. Interestingly, patients appear to value online health communities in which both physicians and patients participate. The benefits are colocated information from both medical experts and experiential experts. In an online 95 stroke patient community, patients' reasons for use of such a platform included medical activities (gathering information about disease or being informed about scientific research programs), emotional activities (gaining recognition and expressing emotions and thoughts) and lifestyle

activities (reading tips and tricks about combining the activities of daily living with the disease process). Innovation harbouring the essence of these benefits acknowledging the ethical considerations associated with the patient-clinician interaction is under development for IgA nephropathy patients. Such innovation has the potential to use the positives of the digital age to further understand the biopsychosocial aspects of patient need in order to provide more robust and widely available patient resources. From a stroke perspective, efforts to raise the profile of 'Stroke Awareness Month' using the internet and social media expanded the size and increased the interaction of the community than previous years without such technology.

Benefits to Stroke Organisations

Several studies to date have demonstrated the significant potential that Twitter holds as a learning tool during an academic conference. These include an analysis of information dissemination via Twitter at a medical education conference, which concluded that Twitter was used to discuss the key topic of medical education themes more than any other topic. Furthermore, an analysis of Twitter metrics at the International Conference on Residency Education (ICRE) demonstrated spikes in tweet activity during conference days, tweets revealed content areas of presentations on conference days and importantly trainee career related tweets (ePortfolio and continuing professional development) predominated.¹¹

In order to provide a stroke organisation and trainee perspective, we describe the experiences of using the #ESOSS17 during a recent international stroke trainee event. The European Stroke Organisation (ESO) Summer School is organized each year by a team of stroke physicians in a European city. Stroke specialists from Europe provide their expert knowledge to young physicians with a major interest in cerebrovascular diseases. The local committee selects the participants, often a maximum of two people per European country on the basis of a letter of motivation, curriculum vitae and letter of support. The last meeting took place in Leptokaraya, Greece, from the 10th-15th September and gathered 50 participants from 32 countries.

We have retrospectively analyzed the #ESOSS17 hashtag using the social media metrics website Twitter Analytics. In all, 118 tweets were sent generating over 50300 impressions (Figure 1). During the 5 day summer school period, the number of new followers increased in 145, leading to over 1500 people following European Stroke Organisation Conference Twitter Account. We assume they were directly interested in our coverage (ie, the conference and the tweets about it). One interesting finding was that the majority of retweets were non-attendees, and picture-containing tweets were most commonly re-tweeted. Despite achieving 3900 impacts per day, the number of conferences using a Twitter account for attendees is low. The pre-conference announcements and closing tweets earned 67600 impressions during the 30 day peri-conference period.

Benefits to Medical Education

The use of SoMe to enhance learning is a natural step in the evolving area of medical education technology. A systematic review of the published literature on SoMe use in medical education identified both the benefits and challenges of such interventions. ¹² The benefits included learner engagement, feedback, collaboration and professional development. ¹² The challenges included technical issues, variable learner participation and privacy/security concerns. ¹² SoMe platforms provide varying restrictions on character counts, numbers of images and video length. ¹² An example of a highly successful radiology SoMe platform is Radiopaedia.org which utilises Facebook to post image content and highlight upcoming scheduled education events, Twitter for image quizzes and Instagram for anatomical or spot diagnoses. ³ Importantly, the authors use a hashtag #FOAMRad, based on the concept of #FOAMed (Free Open Access Medical Education). ³ The use of a hastag helps with analytics of audience interactions as demonstrated in Figure 1. Importantly, it is crucial to use SoMe as an additional resource to develop alongside existing medical education methods, and consider that any SoMe interaction complies with your institution's internal SoMe guidelines and policies.

Increasingly, biomedical and clinical journals are using social media platforms to disseminate published original research. *Stroke* has a Twitter handle @StrokeAHA_ASA which currently has approximately 6,500 followers and is used to update readers on the latest original articles and editorials. Unfortunately, a 2012 randomised control trial found no effect of a social media intervention on 30-day page views in the journal *Circulation*, despite prior literature suggesting a positive relationship between social media interactions and citation numbers. However, research impact is measured beyond page views and citations, a change in health policy is considered a true impact. As stroke trainees, some of whom have aspirations to be clinician scientists, establishing connections via SoMe to experienced stroke researchers is vital. These individuals are able to provide mentorship and guidance in multi-centre study design and conduct, as well as dissemination internationally. Furthermore, SoMe is an increasingly crucial metric for both peer-reviewed journals, funding bodies and host academic institutions. Ultimately, analysis of altmetric data is an increasingly novel way of characterising the impact of peer-reviewed research.

SoMe Ethics

- During the digital age, physicians have developed a multitude of mechanisms to use SoME both personally and professionally. This has led to both the American Medical Association (2013) and General Medical Council (2013) developing clear guidance covering "Doctors' use of social media". The GMC guidance includes key themes including: maintaining boundaries, maintaining confidentiality, respect for colleagues and anonymity. In Importantly, whilst highlighting the clear ethical issues, there is an outline of the potential benefits which include:
 - engaging people in public health and policy discussions
- establishing national and international professional networks
- facilitating patients' access to information about health and services.

125	Ultimately, whether the interactions via SoMe involve patients or not, it is imperative professional
126	standards are maintained and the principles of good medical practice are upheld in all SoMe
127	activity.
128	
129	Forward View
130	
131	Internationally, stroke physicians often train in one of several parent specialties including
132	neurology, geriatric medicine, acute medicine or rehabilitation medicine. Importantly, with an
133	ageing population with increasing co-morbidity, the relevance of each of these parent specialities
134	to overall stroke care is apparent. SoMe offers the opportunity to "follow" a variety of different
135	specialties latest research providing a low cost, readily accessible, platform to learn and engage.
136	There is the potential for significant benefit to be derived from rigorous mixed methods studies
137	of the use of stroke related social media. These studies could examine SoMe as a potential
138	resource for patients and carers to seek information and support to improve the recognition and
139	management of stroke disease. Ultimately, with the drive to combat the global burden of stroke,
140	SoME offers a unique opportunity for patients, practitioners, researchers and the wider public the
141	opportunity to share our views and ideas about how we are progressing with achieving this goal.
142	
143	Conclusions
144	
145	Despite a relative paucity in stroke specific examples of SoMe practice, by understanding
146	innovation and positive examples from other specialities, stroke trainees can gain significant
147	educational, professional and academic benefits from engaging with SoMe. Furthermore, the
148	authors have demonstrated exposure of science and discourse among academic colleagues via
149	altmetric data.
150	
151	Disclosures
152	

153 J.M.C-M (@josema_olvera) and JSM (@DrJMinhas) both use Twitter!

Figure Legend

154

155		
156 157	Figure 1. Twitter Analytics and International Impact for #ESOSS17 hashtag for the European Stroke Organisation Summer School, Leptokaraya in Greece.	
158		
159		
160	References	
161 162	1. Roland D, May N, Body R, Carley S, Lyttle MD. Are you a SCEPTIC? SoCial mEdia Precision & uTility In Conferences. Emerg Med J EMJ. 2015 May;32:412–3.	
163 164	2. Graham-Brown MPM, Oates T. Social media in medicine: a game changer? Nephrol Dial Transplant Off Publ Eur Dial Transpl Assoc - Eur Ren Assoc. 2017 Nov;32:1806–8.	

- Shah V, Kotsenas AL. Social Media Tips to Enhance Medical Education. Acad Radiol. 2017
 Jun;24:747–52.
- Topf JM, Sparks MA, Phelan PJ, Shah N, Lerma EV, Graham-Brown MPM, et al. The
 Evolution of the Journal Club: From Osler to Twitter. Am J Kidney Dis Off J Natl Kidney
 Found. 2017 Jun;69:827–36.
- Carlquist E, Lee NE, Shalin SC, Goodman M, Gardner JM. Dermatopathology and Social
 Media: A Survey of 131 Medical Professionals From 29 Countries. Arch Pathol Lab Med.
 2017 Jun;1–7.
- 6. Leveridge MJ. The emerging role of social media in urology. Rev Urol. 2014;16:110–7.
- Wexner SD, Petrucci AM, Brady RR, Ennis-O'Connor M, Fitzgerald JE, Mayol J. Social
 media in colorectal surgery. Colorectal Dis Off J Assoc Coloproctology G B Irel. 2017
 Feb;19:105–14.
- Mayol J, Otero J. Breaking International Barriers: #ColorectalSurgery Is #GlobalSurgery.
 Clin Colon Rectal Surg. 2017 Sep;30:277–80.
- 9. Vennik FD, Adams SA, Faber MJ, Putters K. Expert and experiential knowledge in the same place: patients' experiences with online communities connecting patients and health professionals. Patient Educ Couns. 2014 May;95:265–70.
- 10. Hundt B, Chen K. Abstract WP377: Stroke Awareness in the Age of Social Media. Stroke.
 2017 Feb 1;48(Suppl 1):AWP377-AWP377.
- 11. Jalali A, Sherbino J, Frank J, Sutherland S. Social media and medical education: Exploring the potential of Twitter as a learning tool. Int Rev Psychiatry Abingdon Engl. 2015 Apr;27:140–6.
- 12. Cheston CC, Flickinger TE, Chisolm MS. Social media use in medical education: a systematic review. Acad Med J Assoc Am Med Coll. 2013 Jun;88:893–901.
- 13. Fox CS, Gurary EB, Ryan J, Bonaca M, Barry K, Loscalzo J, et al. Randomized Controlled
 190 Trial of Social Media: Effect of Increased Intensity of the Intervention. J Am Heart Assoc.
 191 2016 Apr;5:1–8.

- 14. Kapp JM, Hensel B, Schnoring KT. Is Twitter a forum for disseminating research to health
 policy makers? Ann Epidemiol. 2015 Dec;25:883–7.
- 15. Farnan JM, Snyder Sulmasy L, Worster BK, Chaudhry HJ, Rhyne JA, Arora VM, et al.
 Online medical professionalism: patient and public relationships: policy statement from the
 American College of Physicians and the Federation of State Medical Boards. Ann Intern
 Med. 2013 Apr 16;158:620-7.
- 16. General Medical Council. Doctors' use of social media. London: General Medical Council,
 2013.