

Medicine and social networks: What to do about medical misinformation?

Medicina y redes sociales: ¿Qué hacer ante la desinformación médica?

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To the Editor,

The development of technology and Internet in the XXI century impose new challenges on medical science. As it is true that there is more and more development in medical, surgical and clinical specialties, at the same time, more information is generated. In the middle of this dichotomy are the social media, led by celebrities, politicians and leaders of our society. Their opinions come to have a consistent impact with the millions of followers they have, therefore, the slightest mistake about health-related aspects triggers a calamity of unpredictable consequences: medical misinformation.

Last January 29, the editorial of *Circulation: Medical misinformation. Examine the message!* signed by Dr. Joseph A. Hill, which had among its collaborators –in an unprecedented way– another 23 editors of leading cardiology journals in the world¹. In the aforementioned article, two examples are placed that could be common in medical consultations of Cardiology and Pediatrics.

In the first one, a Mrs. Jones refuses to take statins claiming to have read too many frightening things about this medication on the Internet, in addition to expressing concern about some doctors recommending it for reasons of financial gain, noting that she also found the latter “on line”. The second situation refers to the concern of some parents about the MMRV vaccine (Measles, Mumps, Rubella & Varicella), which could cause autism.

Regardless of whether these situations are not daily in the medical practice of our country due to

free health services, it is considered necessary to refer to the issue for two reasons: first, the impact of this article on the medical community with important replicas of other publishers of Latin American cardiovascular journals, not initially included among those signed in *Circulation*²; second, the fast growth in the use of Internet and social media in Cuba, considered one of the countries that has grown in recent years according to the annual report of “We Are Social”, which is published in January and collects data from the digital world of 230 countries. Cuba has 6.47 million people who have ever been connected to Internet, of which 2 075 578 were incorporated actively to social networks in 2018, for a higher growth of 47%, the fourth highest among all countries of the world³.

The exercise of communication in the medical art is born at the sacred moment of the consultation, the starting point of the current controversy, and it is biased by several factors, with the doctor playing the leading role in mitigating them. His/her courtesy from the beginning of the consultation with an affectionate greeting, his/her diaphanous attitude as an interlocutor, knowing how to listen and the use of a language according to the level of understanding of the patient will facilitate the favorable outcome and a decision-making process, in which the patient has an increasingly active role⁴.

Among the great teachings left by the father of medicine, Hipócrates de Coss, is the fact that those of us who exercise this particular science should worry about the way our patients live. In correspondence with the times, it could be added that we

should also worry about how they think and where they get the information. A trident would be formed (how they live - how they think - where they get the information) that would lead to a more comfortable environment in the consultation, we would be closer to their concerns and finally we could avoid medical misinformation.

Despite the above, there is recognized that it is not simple to solve the problem of misinformation, which has become “viral” in social networks, gigantic platforms with a global reach of several thousand millions of people, where censorship is minimal and there is no objective control over the opinions of celebrities, leaders or politicians, regarding scientific subjects of medicine or healthy lifestyles.

Then, several questions arise: What else could we do to fight the calamity of medical misinformation? Is a change in attitude in medical practice enough? Could it be that we must interact more with our patients in spaces where they feel more comfortable like the social networks themselves?

Cardiovascular and oncological diseases remain the first causes of death in the initial two decades of the still young XXI century and new conceptions arise in both specialties along with the increase in the longevity of the human being. New battlefields are on the horizon of medicine. A change is necessary not only in the minds of health professionals, but also in the traditional schemes and almost obsolete education from an early age of every individual. There is an urgent need to include materials according to the times we are living, like the study of the scientific method and the social media, to promote a critical attitude, but reasonable, among those who

always have the right to speak.

Paraphrasing the eminent philosopher and writer Juan Jacobo Rousseau, “*not everything is responsibility of doctors and patients, society is also responsible*”.

CONFLICTS OF INTERESTS

None.

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