

Clinicians embracing social media in the response against COVID-19

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Dear editor

On 11 March 2020, the WHO director declared the rapidly spreading COVID-19 a pandemic.¹ The very next day, a group of Italian doctors working in Belgium, sensitised by personal contact with Italian clinicians in the forefront of the pandemic, decided to take action. Concerned about the imminent impact on the hospitals and the complex management of patients with COVID-19, they created a Facebook group in French to share information. It allowed clinicians from Belgium, France and Switzerland to efficiently communicate with each other, and exchange guidelines and research, as well as personal experiences. The group was named 'Coronavirus/COVID-19 pour les médecins' which translates from French to 'Coronavirus/COVID-19 for doctors'.

The wide response among colleagues allowed the group to rapidly grow from a few members to over 4000 clinicians in the first 3 days, eventually reaching over 15 500 doctors at the time of writing. Initially, members were mainly from Belgium, then France and Switzerland; now the group hosts clinicians from 86 countries worldwide. The group has not only crossed borders, when humans could not, but also medical specialties. Doctors from practically every field and level of experience are represented, from junior doctors to world renowned virologists. About 60% of members are female and about 61% are aged 25–34 years. The onset of COVID-19 has put us in unprecedented territory, we have had to adapt quickly to a new way of practising medicine while tackling a condition we know little about.² We are faced with many questions, lots of them remain unanswered. The platform has managed to create a feeling of belonging to a wider

community, not only to learn from each other but also to support each other.

The group rules were well defined, including reserved access to medical practitioners only in order to maintain confidentiality. To ensure this, the identity of new members is systemically verified by a large group of dedicated moderators, through the completion of a short questionnaire. Every member is asked to present themselves, their medical specialty and affiliation before posting a public question or comment in the threads. Moreover, political comments are refused, and any criticism of the policy adopted by healthcare institutions according to local governmental guidelines is discouraged. Clinical questions arising from daily practice with patients with COVID-19 which are posted on the group are verified by dedicated moderators.

In the group, hundreds of messages have been shared per day. Many important issues concerning clinical signs and symptoms have been addressed through anonymised personal cases and imaging. Latest articles from eminent scientific journals were shared on a daily basis, often followed by a discussion on relevant passages. Thus, members had easy access to an up-to-date database of relevant bibliography. In less than 2 months, 1078 publications have been shared, leading to 57 000 exchanged messages and 46 400 reactions. The most popular section has been 'Questions and Answers', showing the need for physicians to address issues with their peers.

The rich discussion regarding the diversity of the presentation of patients with COVID-19 highlighted different clinical patterns of the virus. More interestingly, this vibrant confrontation led some members to initiate clinical studies to confirm these findings. As an example,



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anosmia and dysgeusia were mentioned in the group as frequent symptoms; later, other physicians started to systematically investigate the olfactory and taste in their patients with COVID-19, before the features were incorporated into several guidelines worldwide.^{3,4}

However, there is a balance between permitting group members open access to questions, views and opinions and ensuring there is no spread of false information. Another challenge is the need to ensure patient confidentiality and privacy issues related to groups like these on Facebook. Hence, we underline that groups such as this one, ought to be administrated and moderated by a multidisciplinary group of clinicians and platforms specific for clinicians, should be created. When performed correctly, social media can be a tremendous instrument for advancement of knowledge and spread of awareness.⁵

Social media is playing a key role in many aspects of our society and its role is set to expand in times to come. In the current climate, it has enabled clinicians to seamlessly share information with each other across nations arming them with knowledge and support against the spread of the COVID-19 pandemic. We, as clinicians, must take responsibility to allow a safe, efficient and transparent transfer of information among our peers that will inspire investigative thought and formal research to truly collaborate as a global community. We urge all healthcare professionals across the world to continue this unison: it is only together that we will prevail.

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