

Social Media Use and Impact on Plastic Surgery Practice

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Abstract

Background: Social media (SM) has revolutionized the way people communicate, network, and develop relationships. However, little data exists on how SM has been adopted by plastic surgeons (1-2). The purpose of this study is to evaluate the extent to which SM platforms have been implemented by practicing plastic surgeons and what effect that implementation has had on their practices.

Methods: An anonymous web-based survey of members of the American Society of Plastic Surgeons (ASPS) was conducted using a 26-question survey instrument that assessed how members utilize SM. Responses were analyzed to determine current trends in SM use among respondents.

Results: Nearly equal numbers of respondents reported using SM (50.4%) versus not using SM (49.6%) in their professional practice. Various factors were cited as reasons to use SM. The top three responses were "incorporation of social media into medical practice is inevitable" (56.7%), "effective marketing/advertising tool" (52.1%), and "provides a platform for patient education" (49%). Cosmetic surgery was the primary type of plastic surgery practice using SM. The majority reported that SM had no effect on their practice (64.6%). A third (33.8%) reported that SM had had a positive impact on their practice, and 1.5% reported a negative impact on practice. For those reporting a negative impact, the majority (43.1%) reported that negative patient comments hurt practice and referral base.

Conclusions: The use of SM is pervasive in our field. While many plastic surgeons see it as a way to positively promote their practices and provide patient education, others have been subject to negative online postings. The role that our professional societies will play in monitoring surgeons' ethical use of SM platforms, in providing assistance to surgeons with responses to negative online attacks, or in establishing guidelines to ensure best practices with regard to patient confidentiality will continue to evolve

References:

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Disclosures: none