



Can Social Media Improve Cancer Care?

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Andrew Schorr:

Hello and welcome to Patient Power. I'm Andrew Schorr. So there are some physicians who are really into social media these days. One of them is Dr. Ishwaria Subbiah, who is a palliative care specialist at MD Anderson Cancer Center. Welcome back to Patient Power.

Dr. Subbiah:

Thank you for having me, Andrew. Always a pleasure.

Andrew Schorr:

Okay. So you are a younger physician and going on the Internet and tweeting and all that. It probably is very comfortable for you. Where does social media fit in with medicine and specifically cancer medicine these days?

Dr. Subbiah:

So social media, it's here to stay, and it's a very, very young technology. And so when you look at LinkedIn, when you look at Twitter, Facebook, these really were launched in the early 2000s, so not a whole lot of time. But they have penetrated society to an extent where healthcare and oncologic care can really be affected by them.

So underlying principle of any social media platform is to bring people together. And in oncology that's no different. And so the platform where most oncologists and clinicians and patient advocates and our colleagues are active is Twitter, so I'll use that as an example. It's a pretty easy platform to master, and the goal is to remove those silos that we all are in. So in academics it can be your own institution or even your own department in your own city. Whereas, if you are a patient, it may be just your own circle of friends or your own community within your diagnosis.

And so it removes those silos, and it presents an avenue through which all the stakeholders can communicate outside of a conference, for example. In the past, we would rely on these medical conferences to bring everyone together to have those conversations, discussions on the past, the present and the future, but with social media you can continue those conversations at the same pace even outside of those conferences. And so the progress that it's led to is considerable.

Andrew Schorr:

Okay. So there's physicians tweeting now, and there are patients tweeting and patient advocates tweeting, do you feel like the next step is going to be more ways that we can work together? So for instance you deal with side effects of medicines or side effects of disease or—as a palliative specialist. I understand your husband is physician, works in early development of medicines, and too few people unfortunately are in clinical trials. So there's a lot of need for communication on either end.

Do you think we can get there, where these tools can be used to try to advance things, help people live better if they're in treatment, help people understand research opportunities they may want to be part of?

Dr. Subbiah:

Absolutely. And so it's—the natural thing that many people do when they get a diagnosis is to go on the internet and start looking for information, and so the sheer volume of information out there in the internet is overwhelming, to say the least. And it's also very unfiltered. And so if you have an opportunity to connect with a clinician, an oncologist who may be practicing the exact—practicing and a world's expert in the exact cancer that you have, that may be an opportunity for you to get information from an authority figure where you can probably place a lot more trust in what they share with you than something you may read on an unfiltered website.

And so the Twitter has its limitations, right? It used to be 140 characters, now it's 280 characters, so you can do quite a bit with it, but it's never a substitute for that clinician-patient relationship. So it's—what it is is it's a source of information, and it's a source of information from authorities, entities, institutions that you can trust. And so we use it for dissemination of information.

Andrew Schorr:

So, Dr. Subbiah, you're a younger physician, but what about the older doctors? Do you feel that they're starting to get it, some of them, about social media and the power of it?

Dr. Subbiah:

You know, us doctors are no different than anyone else. There's different levels of comfort with technology, and the important thing irrespective of whether you're a physician, you're a patient, you're an allied health professional, whichever stakeholder category you may fall under, to recognize that social media is a tool. It's a tool to ultimately better the time of care that a person, a patient gets. And so the adoption has certainly been slower, but we've had more and more physicians who are more senior show interest in engaging in social media. And we've had several workshops at our institution where we've gone over the—on a granular level how to set up your social media account and how to start interacting with others. And so we're getting buy-in slowly.

But the senior physicians are such a wealth of information. And ones that I appreciate especially as an early career investigator is they are the people that I turn to in specific scenarios, and so why shouldn't the general community turn to them as well over social media. And so they recognize the value that they have from their decades of experience and how social media is yet another way that they can share that with a much broader community.

Andrew Schorr:

Well, I see the president of MD Anderson all over it these days, so your institution is definitely attuned to it. Well, thank you, and I'm excited about the prospects of social media being used ever more broadly but being used well for good. So, Dr. Subbiah, thank you so much for being with us, and we'll see you online, okay?

Dr. Subbiah:

I appreciate it. Have a great day.

Andrew Schorr:

Okay. Andrew Schorr with Patient Power. Remember, knowledge and communication can help with the best medicine of all.

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