

How Influencer Doctors Use Social Media? A Content Analysis on Marketing Communications, Patient Privacy and Ethics

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ABSTRACT

Medical doctors have a high level of source credibility and a reputable profession. Some of them also share their expertise on social media. This led to so some doctors gaining thousands and millions of followers and becoming “influencer doctors”. Every bit of information that a medical doctor share is important for the followers. Influencers are content creators with a large social media following, and this makes them appealing for brands. Collaborations with brands are common for influencers. When it comes to influencer doctors, who have more credibility due to their profession, it can be said that they have an advantage over ordinary influencers, a power to drive their followers’ decisions. However, it is prohibited by law and regulations for medical doctors to advertise in any medium. Thus, in this study it was aimed to reveal medical doctors’ compliance with Turkish Medical Association’s rules on social media. A content analysis on 13 medical doctors’ Instagram stories was conducted. Each doctor has more than 500.000 followers and they shared a total of 565 stories. According to the findings, product promotions are most common content for the stories of these influencer doctors. They also share stories that showcase or promote their services; that contain patient information in which more than half are privacy breaches; and none included a disclosure on patient permission to reveal such information.

Keywords: Source Credibility, Influencer, Marketing, Health Communication, Social Media, Privacy, Ethics

Fenomen Hekimler Sosyal Medyayı Nasıl Kullanıyor? Pazarlama İletişimi, Hasta Mahremiyeti ve Etik Üzerine Bir İçerik Analizi

ÖZ

Kaynak güvenilirliği ve itibarı oldukça yüksek olan hekimler, sosyal medyada uzmanlık alanları ile ilgili bilgiler paylaşmaktadır. Öyle ki sosyal medyada milyonlarca takipçisi olan ve “fenomen” olarak nitelendirilen hekimler bulunmaktadır. Hekimin vereceği her bilgi, takipçiler için önem arz eder. Sosyal medyada içerik üreticisi olan fenomenler, pek çok takipçisi olmaları dolayısıyla markalar için de oldukça çekicidirler; markalar elinde odaklı bir kitle bulunduran fenomenlerle işbirliği yapmaktadır. Fenomen hekimler söz konusu olduğunda, bu kadar güvenilir bir mesleğe sahip olmaları avantajı da düşünülürse ellerinde insanları yönlendirebilecekleri büyük bir güç vardır. Ancak hekimlerin hiçbir mecrada reklam yapmalarına kanunlar, yönetmelikler ve etik kurallar ile müsaade edilmemektedir. Bu çalışmada, “Hekimler sosyal medyada yaptıkları paylaşımlarda, bu konudaki kurallara ne kadar uyuyorlar?” sorusu ile yola çıkmıştır. Bu bağlamda çalışmada içerik analizi tekniği kullanılarak 500 bin ve üzeri takipçisi olan 13 fenomen hekimin Instagram’da paylaştığı 565 hikâyesi değerlendirmeye alınmıştır. Çalışmanın en çarpıcı bulguları olarak; hekimlerin içeriklerinde en çok ürün paylaşımı yer aldığı, hizmetlerinin göstermeye ya da tanıtmaya yönelik ya da övücü nitelikteki içeriklerin bulunduğu, hasta ile ilgili paylaşımlarının yarısından fazlasında hasta mahremiyetinin korunmadığı, bu paylaşımların hiçbirini için hastadan izin alındığına dair bir ibarenin olmadığı görülmüştür.

Anahtar Kelimeler: Kaynak Güvenirliği, Fenomen, Pazarlama, Sağlık İletişimi, Sosyal Medya, Mahremiyet, Etik

1. Introduction

Source credibility is an important topic for research on persuasion. Studies on source credibility suggest that people are influenced more from the sources they trust. According to Hovland and colleagues (1951-9152; 1953) two essential components of source credibility is expertise and trustworthiness (Suher, 2017, p. 305). Ohanian (1990) adds attractiveness alongside these two components.

Social media changed the way people communicate. Ease of use, low cost and ubiquity fueled user generated content, which in turn lead to the rise of social media influencers. They were called influencers, since they are mass communicators, sometimes reaching millions of followers, who have the credibility to affect and persuade. This created a golden opportunity for brands to match their products and services

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with the target audience of these influencers. Collaborations became common among brands and influencers. It can be said that this was a win-win situation.

Food, make up, decoration; in every category, there are influencers with many followers. Medical doctors, who enjoy having the most respected profession in Türkiye, are certainly not exempted from becoming social media influencers. However, there are many strict laws, regulations, and ethical guidelines that prevent medical doctors from conducting advertising and promotion or sharing private patient information on any medium. Turkish Medical Association (TMA) (2017), taking all the aforementioned laws and regulations into consideration, created a guide for doctors, titled “Guidelines on medical doctors’ and health institutions’ posts on electronic media”.

In this study it was aimed to reveal medical doctors’ compliance with TMA’s rules on social media. A content analysis was conducted on 565 stories of 13 medical doctors which have more than 500 thousand followers. Instagram allows two styles of sharing, one to the feed and the other as a story. Posts are shared on profile pages of Instagram users, and they stay there until the user decides to delete it. However, stories are automatically deleted in 24 hours. Since high number of stories are shared by influencers, stories, instead of posts, were the subject of this study. It should be noted that literature review revealed no studies on medical doctors’ social media usage in Türkiye.

2. Source Credibility

According to Aristoteles, a speaker’s i.e. the source of a message’s credibility can be explained by the term “ethos”, which states that individuals who are smart, successful and who have morals are regarded as credible, and credible individuals are highly persuasive (Tutar, 2014, p. 186). The view that Aristoteles’s ethos is the most powerful persuasion tool is accepted by many scholars working on rhetoric (McCroskey & Young, 1981, p. 24). Andrews and Shimp (2018, p. 228) defines credibility as “the tendency to believe or trust someone”. Kelman (1961, p. 68) states that to possess credibility, one’s statements must be considered truthful and valid. Academic research on source credibility began in the 21st century and sped up to support the United States government’s efforts on War such and influence the public (McCroskey and Young, 1981, p. 24; Umeogu, 2012, p. 112). For example, Hovland, Lumsdaine and Sheffield (1949) studied the permanence of a message originating from a source that is low on credibility. Some soldiers that were recruited were shown a film which was supportive of the allied during the World War II. Others (i.e. the control group, lacking the message) were not shown any film. It was assumed that the film was supported by a source that is low on credibility, the United States army. Attitudes toward the message was measured five days and nine weeks after the exposure. According to the results, there was a significant difference between the two groups. This phenomenon was called the “sleeper effect”, since a film sponsored by a source of low credibility was found to be more persuasive as time passed (Sternthal, Phillips, & Dholakia, 1978, p. 288).

Hovland and colleagues (1951–1952; 1953) continued to study on this topic and put forward the theory of source credibility after the war. According to this theory, credibility has two components, expertise and trustworthiness. If a source is an expert, and high on trustworthiness, it is regarded as a credible source. Messages originating from credible sources are effective on changing the minds of recipients (Suher, 2017, p. 305). Hovland and Weiss (1951, p. 647) concluded that opinion change is related to trustworthiness. It should also be noted that amongst their results were the finding that, retention of factual information was not affected by the trustworthiness of the source. The study conducted by Friedman et al. (1976) is supportive of Hovland. They state that the credibility of a source is related to trustworthiness and liking is an important trait of trust. A message from a trustworthy source can affect the consumer beliefs, ideas, attitudes and behavior in the process of internalization (Erdogan, 1999, p. 297). Ohanian (1990), studying source credibility in the context of celebrity endorsements, developed a scale with an acronym of ATE, in which he evaluated source credibility with three components called Attractiveness, Trustworthiness, and Expertise. According to Ohanian (1991, p. 52), a sources expertise is the most effective factor on purchase. Clow and Baack (2018, s. 197) lists doctors, lawyers, and accountants among experts and claim that experts enhance the credibility of informative advertising.

According to Kelman (1961, pp. 67-68) apart from credibility, there are two more source attributes: Attractiveness and means control (or power). Kelman states that “an agent possesses means control if the is in a position to supply or withhold means needed by the individual”. Andrews and Shimp (2018, p. 230) related dimensions of attractiveness as similarity, familiarity and liking. About the power attribute of the source, the authors state that power and the related compliance process is likely to occur in social media messages and personalized advertising.

3. Patient Privacy in Social Media

According to European Commission (2013, p. 12), “privacy can mean many different things in different contexts” but also “most people want to maintain control over personal information and personal communications”. Kayaalp (2018, p. 9), when discussing the evolution of the term, acknowledges the complexity of the term and mentions that privacy can be defined in terms of solitude, anonymity, autonomy, control over one’s own body and more. Richards (2022, p. 22) also discusses the complexity of the term and defines it as “Privacy is the degree to which human information is neither known nor used”.

Many researchers point to the advantages of social media in facilitating doctor-patient interaction and promoting health literacy (such as, Chauhan, George, & Coffin, 2012; Melnik, 2013; Cork & Grant, 2016; Riccio, Dumont, & Wang, 2022). There is even a case where a rare disease was identified as a result of a collaborative effort by doctors from all over the world (Melnik, 2013, p. 39). However, all of the aforementioned studies also list various problems and risks that may arise from the careless use of social media by medical doctors and cautions them to abide by ethical guidelines. It can be said that, among these problems and risks, the utmost importance belongs to patient privacy. Many researchers (e.g., Lagu, Kaufman, Asch, & Armstrong, 2008, p. 1645; Chretien, Greysen, Chretien, & Kind, 2009, p. 1314) state that, improper and unprofessional use of social media creates potential for dissemination of medical information of patients and poses a significant threat to patient privacy and confidentiality, even with de-identification. In addition, what Melnik (2013, p. 39) states should also be taken into consideration: Breaches of patient privacy on social media gets reported by the news media, and this in turn damages the reputation of health services in general. Cork and Grant (2016, p. 220) consider this as a risk, which can “undermine the public’s confidence in the medical profession”. American Medical Association (2018) states that patients must be able to trust health workers in protecting their dignity and guarding their confidential information.

General Medical Council (GMC) of the United Kingdom (2013), in their guidance for doctor’s use of social media, state that “The standards expected of doctors do not change because they are communicating through social media” and state that doctors must not use social media to discuss individual patients share identifiable information about patients. The guidance also warns about little bits of information that may seem harmless at first, but can be, when they accumulate: “Although individual pieces of information may not breach confidentiality on their own, the sum of published information online could be enough to identify a patient or someone close to them”. American Medical Association (AMA) (2018) also advises medical doctors to maintain patient privacy and not to share any identifiable patient information online. Turkish Medical Association (TMA) (2017), in their social media guide, advice against sharing any confidential information about patients. The guide advice to all the precautionary measures to protect patient privacy. Berber (2017), who is the Central Council Secretary General, states that prevention of privacy violations should be the top priority for the profession. Demir Karabulut and Yıldırım (2020, p. 55) adds that photos taken and stored in doctors personal phones, computers and cloud storage are also problematic according to Turkish Personal Data Protection Law. They stress that medical photos fall in the scope of the aforementioned law as soon as they are taken and security of the devices that store them are a matter of the utmost importance.

Kayaalp (2018, p. 15) points out to the fact that protecting patient privacy is a collaborative effort from all stakeholders. He also suggests establishing rules for monitoring privacy leaks and what to do when such leaks occur.

4. Doctors as Credible Sources on Social Media

The advance of digital technologies made enormous changes in our life. In this age, dubbed as the information age, the importance of information has increased; consequently, generation of information, access to information, sharing of information and preservation of information has become easier (Bulduklu & Şeker, 2020, p. 249). In addition, the habits, and the ways of searching for information has changed in a very short period of time. This is also true for health information. Various studies on national scale conducted in Türkiye also points out to this. The usage ratio of internet as a communication tool to reach health information was 19,9% in 2014 (Durusu Tanrıöver, Yıldırım, Demiray Ready, Çakır, & Akalın, 2014), but this ratio has risen to 48,6% in 2018. Especially with the COVID-19 pandemics, people tended to use internet more for information gathering. According to the study by Çerçi, Canöz and Canöz (2020) people used social media most to follow the latest developments and keep track of news during the pandemic.

Graffigna, Barellò, Bonanomi and Riva (2017, p. 1919) states that in the studies on internet and health research, internet users are active information seekers, and they are more participative patients. These studies show that individuals that are accessing health information online are more eager to learn about treatments and also, they acquire new healthy behavior. These individuals tend to use social media more to be more conscious about health, to share their knowledge about health, and to lower their anxiety about health. It can be argued that internet can help patients gain more control of their own health i.e., improve patients' self-efficacy, and make it easier for them to participate on their own health care decisions. Individuals with self-efficacy may help to improve patient-doctor relationships (Tekin, Kaya, Demirel, & Özbek Yazıcı, 2013, p. 33). According to Zülfişkar (2014, p. 51), patients with chronic diseases who gather health information on the internet state that this information aids them or the people around them to manage their own health. In addition, some patients (such as patients with cancer) state that the information they have gathered through internet empowered their decision making and helped in their conversations with doctors. Since people search Google and social media about their illnesses and the doctors they will be seeing before making health decisions, administrations of private hospitals and clinics, and doctors with their own offices feel obliged to use social media (Öz, 2021).

The parties that are using social media to share health information are public and private institutions (such as Ministry of Health, hospitals), associations (such as Turkish Society of Cardiology, Turkish Heart Foundation), pharmacies and pharmacists, medical doctors, and students studying medicine. According to Avcı (2018, p. 50), doctors are using social media to search and discover medical information, to exchange information among colleagues, to share problems relating to their profession and to share clinical experiences. Some are contributing to the information on social media by sharing new information on a daily basis. In doctors view social media provides helpful feedback and aid in the care of patients. In addition, they state that since their patients are on social media, it is inevitable for them to be there too.

Ordinary citizens are also using social media to share their experiences and advice related to health. However, when non-experts share information on social media, this may lead to disinformation and confusion on what is true and what is not (Avcı & Avşar, 2014, p. 185). In a project by Koçer Çamurdan (2021) titled "Understanding the Spread of Misinformation in Turkey in the Context of Covid-19 from the Perspective of Media Users and Developing Preventive Action Suggestions" It was found that as the virus spread, disinformation on social media spread too. It was concluded that more than half of the media users surveyed were not checking if the COVID-19 information they were accessing was accurate.

On the other hand, social media is a space that people are using not only for information sharing but also for entertainment and sharing personal posts about their daily lives. There are some "influencers" that are one step ahead among others with their high follower counts. An author of Influencer Marketing Hub, Werner Geyser (2022), defines influencers and their characteristics as:

"Influencers in social media are people who have built a reputation for their knowledge and expertise on a specific topic. They make regular posts about that topic on their preferred social media channels and generate large followings of enthusiastic, engaged people who pay close attention to their views. Brands love social media influencers because they can create trends and encourage their followers to buy products they promote."

Some social media users have the ability and power to “influence” millions of people. Some of such users are medical doctors. Doctors are using social media, putting forward their titles as doctors, to share both health information and their personal lives. Doctors’ usage of social media, on one hand, benefits both patients and doctors, on the other hand, raise questions about ethics. This is because some doctors are not just sharing medical information, but also conducting promotional activities. As Gupta, Dorfman, Saadat, and Roostaeian (2020, p. 697) states, patients trust the products recommended by medical doctors. Conducting promotional activities is forbidden by law (Aydın, 2021). Since health is a topic that is very serious and of vital importance, the Turkish state introduced some rules and prohibitions to prevent exploitation of advertisements. In the field of health, even the word “advertising” is avoided in favor of “informing and presentation” (Özdoğan, n.d; Gürdin, 2017, p. 19).

Turkish Medical Association (TMA), is an association in which self-employed doctors are obliged to become a member (TTB, n.d.). Half of the doctors working in public health system are also members of this association. In order to prevent ethics violations, TMA published a guide called “Guidelines on medical doctors’ and health institutions’ posts on electronic media”. This guide lists what doctors can or cannot share in social media according to Law on the Practice of Medicine and Related Arts (219), Law on Turkish Medical Association (6023), Regulation on Medical Deontology, Code of ethics for medical doctors and others regulations limiting advertising on health services (TTB, 2017).

Due to the concerns such as, health services turning into a commercial commodity, misguiding with advertisements to earn more and surpass the competition, and health services not being provided as intended, advertising was prohibited by several laws and regulations. It is argued that individuals who are in need of health services, with the influence of their illnesses, are more prone to misdirection and more prone to being affected by advertising messages. Therefore, advertising in the field of health may misguide them or may affect their decision making to lead them to inappropriate treatments (Aydın, 2021).

This is especially important about influencer doctors. The profession is highly reputable in Türkiye. According to Türkiye Professional Reputation Research (2014), medical doctors have the most respected profession. In addition, according to the findings of studies on trust toward medical doctors, patients have a high level of trust on doctors (Deniz & Çimen, 2020, p. 15; Gülcemal & Keklik, 2016, p. 84; Karsavuran, Kaya, & Akturan, 2011, p. 209; Gezergün, Şahin, Tengilimoğlu, Demir, & Bayer, 2006, p. 140). The topic of trust becomes especially sensitive considering the influencer doctors with millions of followers.

Several researchers studied health professionals’ attitudes toward patient privacy. Arslan and Demir (2017) interviewed 10 health professionals and found that all the participants stressed the importance of patient privacy. The authors note that according to some of the participants information identifying patients should be kept private, however, anonymized information about the patients can be shared. Tanrıverdi and Özmen (2011) studied 87 health professionals and 500 patients and revealed that those who receive training on patient rights are more knowledgeable and answer questions about confidentiality, privacy and informing in a more conscious manner. Özata and Özer (2017) surveyed 471 participants and they also found that training about patient privacy enhances the care undertaken by health professionals. Atasever and Yücel Özçırpan (2023) interviewed 25 nursing students and found that some of the students working as interns in the perinatal field were prevented from protecting patient privacy by their senior health professionals, and their concerns were not taken into consideration. Some of the participants added that health professionals should be trained about patient privacy and physical conditions of the clinics should be adjusted for privacy. Mert Karadaş, Koç, Sayar, Şahin and Sevgi (2021) surveyed nursing students and found that 13,7% percent shared posts about their internship and among these students, 81,2% did not take permission from patients or patient companions. Another finding is, 86,7% of the students stated that privacy is being violated in social media.

5. Methodology

Advertising and promotion in the field of advertising is bound to strict rules of law, regulations and guidelines. This study aims to reveal medical doctors’ compliance with these rules on social media.

Instagram has two ways to share content: Posts and stories. Posts on an Instagram user’s profile are permanent; they are accessible until the user decides to delete it. However, stories have a 24 hour lifespan,

they are deleted automatically, unless the user decides to pin it to their profile. After story feature made its debut, many users focused their attention on it, both for personal and commercial content. Stories increase engagement and attract attention. Brands collaborate with influencers to attract more people (Ticimax, n.d.). Among influencers are medical doctors with millions of followers. The problem of this study is: Are medical doctors following rules and guidelines on what can and cannot be shared on social media?

The technique of content analysis was conducted on influencer doctors' social media content. Purposive sampling, which is one of the non-probability sampling methods, was used in this study. In non-probability sampling, instead of giving equal chance, units are selected based on their specific qualities. In purposive sampling the researcher decides on which units to include in the sample according to the study goals (Koçak & Arun, 2006, p. 26).

A list of doctors possessing more than 500 thousand followers (Boomsocial, n.d.) were obtained. Only medical doctors who share medical information and who include their title (as Dr.) in their Instagram bios were selected. Stories shared by these IDs between 24.11.2022-01.12.2022 were analyzed. It was aimed to include the days of mass discount (known as black friday or "magnificent friday" in Türkiye) when deciding on the research timeframe. Many influencers talk about these discounts before and after the day of black friday in their Instagram stories as part of their collaboration with brands.

A total of 14 doctors were selected, however, one of the doctors did not share any stories in the research timeframe. As a result, 565 stories were collected. Doctors selected for this study have high numbers of followers, so they were called "influencer doctors" and abbreviated as IDs in this study. In order to hide their identities, they doctors are given tags such as ID1, ID2 and so on.

Most of the coding scale was prepared according to TMA's guidelines on social media. These guidelines are based on the laws and regulations in Turkey. These include items about patient privacy (see Table 4 below). An item about patient permission was added among these items since posts invading patient privacy can sometimes be shared with such an explanation. However, it is not permitted to share any patient information regardless of patient permission.

Additional items to reveal more detail were written, such as the category of the products and services advertised, and the existence of sponsorship disclosure. In addition, IDs name, follower count, area of expertise, story date, story type, and content of the story was among the items. Story contents (Table 2) and promotion categories (Table 3) were not based on any previous study, they were open ended items. In order to hide the identities of the doctors, names, number of followers and area of expertise were hidden from the findings.

TMA's guidelines included an item about "sharing of a patient's personal information that are secret", however, this item was excluded from the findings, since it is not clear what counts as secret or not. It can be said that all information about a patient should be regarded as secret. Laws state that a doctor has a strict obligation to keep information secret (Büyükcay, 2004, p. 395). The guidelines also include an item about expressions that are exaggerated, misleading, misguiding, inaccurate or that can cause fear or panic. Examples for this item can be found in the administrative penalties issued by the Turkish Ministry of Trade Advertising Council (T.C. Ticaret Bakanlığı Reklam Kurulu Kararları, 2023). In one case, it was a doctor used a title that he did not have; in another case, it was providing unauthorized services; and in another, it was a name that is not listed in the license was used for promotion. Other examples can be found in news, where some doctors were criticized for sharing gruesome and fear inducing pictures from the operation room (Gander, 2017). As it can be seen from Table 5, there were no such content shared by IDs.

TMA's guidelines do not include an item on a disclosure of the patient's consent when a doctor shares patient information. However, patient information can only be shared if a patient gives consent, and this consent must be documented (Aşkın, 2021, p. 1369; T.C. Sağlık Bakanlığı Sağlık Hizmetleri Genel Müdürlüğü, 2013).

This study is limited to Instagram stories of medical doctors who have more than 500 thousand followers on Instagram. The stories were collected in a limited timeframe, between 24.11.2022-01.12.2022.

This study is important as it reveals what IDs share on their Instagram stories.

Research Questions:

RQ1: What does influencer doctors share on Instagram stories?

RQ2: Do influencer doctors share information about patients?

RQ3: Do influencer doctors sharing patient information, respect the patient's privacy?

RQ4: Do influencer doctors advertise or promote product and services?

6. Findings

In this study "stories" shared by medical doctors that have more than 500.000 followers on Instagram between 24.11.2022 and 01.12.2022 were examined. The Instagram accounts were limited to medical doctors who use the "Dr." initials on their profiles and who share medical information. Since these doctors have many followers, they were called "influencer doctors" (IDs) in this study, and they were tagged as "ID1", "ID2" and so on, to hide their identities.

Table 1. Number of Stories Shared by Influencer Doctors (IDs)

Influencer Doctor	Frequency	Percent	Influencer Doctor	Frequency	Percent
ID1	91	16,1%	ID8	89	15,8%
ID2	84	14,9%	ID9	34	6,0%
ID3	53	9,4%	ID10	4	,7%
ID4	15	2,7%	ID11	2	,4%
ID5	25	4,4%	ID12	25	4,4%
ID6	60	10,6%	ID13	52	9,2%
ID7	31	5,5%	Total	565	100,0%

Out of the 13 doctors who shared stories on their accounts, 5 were female and 8 were male. Among all the 565 stories shared, 45,8% (N= 259) were shared by females and 54,2% (N=306) by males. It can be said that the number of stories is balanced among genders. There are variations in the number of stories shared among IDs. The highest percentage is 16,1% (N=91), while the lowest percentage is down to 0,4% (N=2). Among all the stories shared by IDs, 89% (N=503) are photos, and 11% (N=62) are videos.

Table 2. Story Contents

Story contents	Responses		
	Frequency	Percent	Percent of Cases
Products	156	22,1%	27,6%
Health information	126	17,8%	22,3%
Personal stories	152	21,5%	26,9%
Events	33	4,7%	5,8%
Polls / Q&As	131	18,5%	23,2%
Service promotion / Physical environment	65	9,2%	11,5%
Patient information	44	6,2%	7,8%
Total	707	100,0%	125,1%

Stories shared by IDs were made up of various contents. Almost a quarter of the stories (22,1%, N=156) were about products. This type of content also has the highest percentage among all story contents. It is followed by personal stories (21,5%, N=152) and "polls / Q&As" (18,5%, N=131). Health information resides in the fourth place with 17,8% (N=126). Cross tabulations were conducted to reveal differences between genders. Women and men share almost same amount of stories about products, it was 51,3% for women and 48,7% for men. Similarly, the percentages among genders were very close for other types of stories.

Table 3. Promotion Categories

	Frequency	Percent	Valid Percent
Supplements	54	9,6%	45,4%
Personal care	15	2,7%	12,6%
Book	14	2,5%	11,8%
Medical products	11	1,9%	9,2%

Toy	5	0,9%	4,2%
Food	4	0,7%	3,4%
Clothing / Accessories	4	0,7%	3,4%
Language course	4	0,7%	3,4%
Detergents	2	0,4%	1,7%
Furniture	2	0,4%	1,7%
Other	2	0,4%	1,7%
Home textile	1	0,2%	0,8%
Gym	1	0,2%	0%
Total	119	21,1%	100%
Missing	446	78,9%	
Total	565	100%	

Among the 565 stories shared by IDs, 119 (21,1%) contained advertising or promotions. Supplement advice were the most shared among such promotional stories (45,4%, N=54). It is followed by personal care products like tooth paste and shampoo (12,6%, N=15), books (11,8%, N= 14) and medical products (such as a nebulizer) (9,2% N=11). Other types of products can be seen on the table. When differences among genders were analyzed, it was also found that promotional stories about supplements were shared most by male IDs (90,7% N=49).

Table 4. Items Related to Patient Privacy Based on TMA’s Guidelines

Question	Value / Total	Frequency	Percent	Valid Percent	Cumulative Percent
Are there anything about a patient in the story?	Yes	82	14,5%	14,5%	14,5%
	No	483	85,5%	85,5%	100,0%
	Total	565	100,0%	100,0%	
Is the privacy of the patient respected?	Yes	32	5,7%	39%	39%
	No	50	8,8%	61%	100,0%
	Total	82	14,5%	100,0%	
Are there any before-after comparisons?	Yes	33	5,8%	40,2%	40,2%
	No	49	8,7%	59,8%	100,0%
	Total	82	14,5%	100,0%	
Are there any visuals taken during treatment?	Yes	45	8,0%	54,9%	54,9%
	No	37	6,5%	45,1%	100,0%
	Total	82	14,5%	100,0%	
Can the doctor be seen with the patient’s companion?	Yes	5	,9%	6,1%	6,1%
	No	77	13,6%	93,9%	100,0%
	Total	82	14,5%	100,0%	
Can the doctor be seen with the patient?	Yes	20	3,5%	24,4%	24,4%
	No	62	11,0%	75,6%	100,0%
	Total	82	14,5%	100,0%	
Does the story disclose patient’s permission to be shared on Instagram?	Yes	0	0%	0%	0%
	No	82	14,5%	100,0%	100,0%
	Total	82	14,5%	100,0%	

Among all the 565 stories shared by IDs, 82 (14,5%) contained some information about a patient. Among these stories, none contained any disclaimer that the patient’s consent was obtained before sharing. It was found that the privacy of the patient is breached in 61% of the stories shared. Among the stories that contain patient information, 40,2% have before-and-after comparisons, 54,9% have images shot during the treatment, 24,4% have the doctor and patient in the same frame, and 6,1% have images of patient’s companion.

There are several differences among stories shared by male and female IDs. Male IDs (68,3%, N=56), in comparison with female IDs (31,7%, N=26), shared more about their patients ($\chi^2(1) = 7,718, p = 0,005$). Among all stories shared by males, 18,3% (N=56) contain patient information. This is 10% (N=26) for females. Among the stories shared by males which contain patient information, patient privacy

was not protected in 76% (N=38). Percentages are higher in almost all of the stories shared by males; they share more before-and-after images (75,8%, N=25), more images shot during the treatment (82,2%, N=37, $\chi^2(1) = 7,602$, $p = 0,006$), more images where the doctor and the patient is visible in the same frame (100%, N=20, $\chi^2(1) = 11,602$, $p = 0,001$). In addition, all the images of patients companion were shared by males (%100, N=5).

Table 5. Items Based on TMA’s Guidelines.

Question	Value / Total	Frequency	Percent	Valid Percent	Cumulative Percent
Are there any expressions in the story that are exaggerated, misleading, misguiding, inaccurate or that can cause fear or panic?	Yes	0	0%	0%	0%
	No	565	100,0%	100,0%	100,0%
	Total	565	100,0%	100,0%	
Are there any expressions in the story that are advertising nature?	Yes	129	22,8%	22,8%	22,8%
	No	436	77,2%	77,2%	100,0%
	Total	565	100,0%	100,0%	
Are there any images of the doctor’s office or medical equipment?	Yes	66	11,7%	11,7%	11,7%
	No	499	88,3%	88,3%	100,0%
	Total	565	100,0%	100,0%	
Are there any advices of treatment?	Yes	14	2,5%	2,5%	2,5%
	No	551	97,5%	97,5%	100,0%
	Total	565	100,0%	100,0%	
Are there any reviews or showcases of gratitude towards the doctor?	Yes	29	5,1%	5,1%	5,1%
	No	536	94,9%	94,9%	100,0%
	Total	565	100,0%	100,0%	

As it can be seen from the table in none of the stories, there were expressions that are exaggerated, misleading, misguiding, inaccurate or that can cause fear or panic. On the other hand, in 22,8% of the stories, there were content that are advertising or promoting something. Doctors’ office was visible in 11,7% of the stories. Treatment advice was shared in 2,5% of the stories and 5,1% contained reviews and gratitude toward the doctors.

When stories are compared according to genders, it can be seen that most of the stories that contain promotion belong to males (76%, N=98, $\chi^2(1) = 32,028$, $p = 0,000$). In addition, males also share more about their offices (77,3%, N=51, $\chi^2(1) = 16,080$, $p = 0,000$). Treatment advice was found on 9 (64,3%) of the males’ stories without a significant difference from females. However, males (51,7%, N=15) and females (48,3%, N=14) have shared almost the same number of stories that contain reviews and gratitude.

Table 6. Product Related Items.

Question	Value / Total	Frequency	Percent	Valid Percent	Cumulative Percent
Does the story contain links to non-profession related web sites?	Yes	140	24,8%	24,8%	24,8%
	No	425	75,2%	75,2%	100,0%
	Total	565	100,0%	100,0%	
Are there any price, campaign, discount information?	Yes	56	9,9%	9,9%	9,9%
	No	509	90,1%	90,1%	100,0%
	Total	565	100,0%	100,0%	
Does the doctor state that he/she advice the product?	Yes	45	8,0%	8,0%	8,0%
	No	520	92,0%	92,0%	100,0%
	Total	565	100,0%	100,0%	
Does the story contain someone else’s recommendation of the doctor’s products or services?	Yes	22	3,9%	3,9%	3,9%
	No	543	96,1%	96,1%	100,0%
	Total	565	100,0%	100,0%	
Does the story contain product advices with expressions about the doctor’s or doctor’s family members use of the product?	Yes	8	1,4%	1,4%	1,4%
	No	557	98,6%	98,6%	100,0%
	Total	565	100,0%	100,0%	
Does the story contain #işbirliği hashtag?	Yes	62	11,0%	11,0%	11,0%
	No	503	89,0%	89,0%	100,0%
	Total	565	100,0%	100,0%	

Does the story contain both advertising/promotion and a video in which the doctors present products/services themselves?	Yes	12	2,1%	44,4%	44,4%
	No	15	2,7%	55,6%	100,0%
	Total	27	4,8%	100,0%	

Links directed to web sites that are non-medical profession related can be found on 24,8% of all the stories shared. In addition, 9,9% of the stories contained price, campaign and discount information, 8% contained doctor's product advice, 3,9% contained somebody else's recommendation of the doctor's products or services (usually in the form of reposts), and 1,4% contained product advices with expressions about the doctor's or doctor's family members use of the product. Stories that contain both advertising/promotion and a video in which the doctors present products/services themselves are 2,1%. Among all the stories shared, 11% contains #işbirliği (collaboration) hashtag as a sponsorship disclosure. Male IDs were linking to external, non-medical profession related sites (such as online shopping sites) more (62,1%, N=87, $\chi^2(1) = 4,778$, $p = 0,029$) than female IDs. Stories containing price, campaign and discount information were mostly shared by males (87,5, N=49, $\chi^2(1) = 27,832$, $p = 0,000$). Males also shared more stories that include other people's recommendations 63,6% (N=14). On the other hand, females shared more stories that states they and their families use the product or the service (87,5%, N=7, $\chi^2(1) = 5,673$, $p = 0,017$). Most of the stories in which the doctor makes a product advice belongs to females (73,3%, N=33, $\chi^2(1) = 14,886$, $p = 0,000$).

According to the sponsorship disclosure guidelines published by Turkish Ministry of Trade, an influencer has to state partnerships with brands. Writing #işbirliği (collaboration) is a popular way of sponsorship disclosure. A cross tabulation between the use of this hashtag and product related stories revealed that 30,1% (N=47) of the stories included #işbirliği, while 69,9% (N=109) did not. It should also be noted that although there are other hashtags for disclosing sponsorship, such as #reklam (ad) or #ortaklık (partnership), none other than #işbirliği was found on the stories. In addition, most of the stories that include the aforementioned hashtag are shared by women (76,6%, N=36).

7. Discussion and Results

In this study, 565 Instagram stories of 13 influencer doctors' (5 female, 8 male) were analyzed. Literature review revealed that, although there are many studies on patient privacy, there are no studies analyzing social media accounts of medical doctors in Türkiye. Although this makes this study novel, it can also be said that this makes it hard to do comparisons on the findings since there are no other studies on Turkish doctors to compare. The closest study to this study is by Lagu et al. (2008) where they studied blog posts by health professionals.

In this study, out of the 565 stories shared by influencer doctors, 54,2% was shared by males and 45,8% was shared by females. Most of the shared stories consisted of photos. Among the story contents were medical information, products, personal stories, events, services promotions, polls and Q&As, patient information. Most common story content was product promotion with 22,1%. Medical information resides in the fourth place. The ratio for product promotion is almost same for both males and females.

Among all the stories, 14,5% contained information on patients, and 61% of such stories does not respect patient privacy. Although strictly forbidden by law, before-and-after comparison photos (50,2%) and photos taken during the treatment (54,9%) were present in half of the stories shared. There was no information about the consent of the patient in any of the stories. In comparison, Lagu et al. (2008), found that 42,1% of the blogs operated by health professionals included comments about patients. Among all, 17,7% were negative comments.

There were no stories that violate TMA's guideline on sharing false, exaggerated, misleading information that might cause fear and panic. This may be because influencer doctors' belief that such information would hurt images. However, advertising and promotion could be seen in 22,8% of the stories. Advertising and promotion is also prohibited according to TMA's guidelines. It should also be noted that, in 11,7% of the stories, doctor's office or medical equipment can be seen; 5,1% contain reviews of and gratitude towards the doctor that is sharing the story; 2,5% contains advice of treatment, all

of which are also prohibited. In Lagu et al.'s (2008) study, the authors found that there were promotions of health care products in 11.4% of the blog posts. In addition, Blakemore, Bayer, Smith and Grifo (2020) studied Twitter and Instagram accounts sharing information about infertility and its cure. They found that 28% of Twitter posts and 14% of Instagram posts were promotional posts, although it must be stressed that the accounts they analyzed were not limited to health professionals and they did not specify how much of these promotional posts belongs to medical doctors.

Links leading to non-profession related sites were found on 24,8% of the stories shared by IDs. Among these, the sponsorship disclosure hashtag, #işbirliği (collaboration) was present in 11%. In addition, price and campaign information (9,9%), ID advising the product himself/herself (8%), ID reposting somebody else's advice of the doctor (3,9%), and ID claiming that he/she is using the product with his/her family. The last type is mostly shared by females, and others by males.

One of the most important findings of this study is that, almost a quarter of the stories contain advertising and promotion, which medical doctors should not be sharing according to laws, regulations and guidelines. Some IDs even went as far as promoting honey and language courses themselves, adding that they have gained huge benefits from using these products and services. Even in the stories where medical information was shared, IDs could be seen promoting themselves or sharing their offices/clinic/surgery rooms.

Another important finding is that, some stories by IDs included patient information. And almost three quarters of such stories did not respect the privacy of the patient. No story had a disclaimer stating that the patient's consent was taken.

IDs that are sharing a lot of stories are self-employed; they either have a private office or a clinic. It is clear that laws and regulations put the patient first. The rules and prohibitions are there to protect patient rights and ensure doctors are practicing in accordance with professional ethics. From the perspective of the doctor who owns a clinic, it can be said that there is a need to make the doctor known to the public. However, this is not an excuse for doctors working on brand collaborations, sharing links to shopping sites, or conducting other types of advertising and promotion activities with brands. It is clear that doctors, who have a prestigious profession and high source credibility, are acting against the ethical values of their profession when they try to persuade their followers with advertising in which they promote products themselves. It might be helpful for all parties to open this topic to debate, rethink what medical doctors can share about their profession and their offices, taking patient rights and ethics into consideration. It can be suggested for researchers in this field to focus on the doctor's perspective and reveal why some doctors need so much advertising.

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The authors' contribution rates in the study are (Güldane Zengin)%100 form.

Çıkar Çatışması Beyanı / Conflict of Interest

Çalışmada herhangi bir kurum veya kişi ile çıkar çatışması bulunmamaktadır.
There is no conflict of interest with any institution or person in the study.

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