## LETTER

## Social media and physicians: the Indian scenario

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Once online, it's always online.

-Anonymous

Consent and ethics are integral to a physician's work. Patient images have been used for multiple purposes in medical practice; as an adjunct to clinical care, displayed to colleagues, students and other audiences in educational settings, and published in medical journals. But nowadays there is an increasing trend towards sharing patient pictures and videos online, on social media platforms. Though usually shared privately with friends, these photographs and videos end up in the public domain, accessible to everyone. Most often, these photographs do not even comply with the basic rules of clinical photography, especially of making the patient unrecognisable. Such behaviour on the part of a physician, some may say, is tantamount to invasion of privacy and poses a serious threat to the relationship of trust between doctor and patient. A physician should always respect his patient's privacy (1). In hospitals, patients usually feel a sense of gratitude towards the physician treating them. As a result, patients usually don't complain when their photographs are shared by doctors (2). Though the responsibility for these photographs shared online lies with the physician, patients must be made aware that with the evolution of electronic publication, once an image is published there is no efficient control over its future misuse.

There is also the issue of getting written consent from patients for the use of their photographs. None of the photos shared on social media has accompanying information regarding the patient's consent. Patients should be informed clearly about the use of their photographs, and written consent should be mandatorily received before sharing any photograph or video for any purpose including clinical publications, especially sharing on the social media. With the proliferation of published images on the internet it has become particularly important to obtain permission for all uses that will be made of patients' images and videos, including worldwide distribution through various electronic media (3). The blanket consent used for the patient's treatment does not cover these factors.

We would recommend using the protocol applicable to clinical photography while using the patient's material on the media and that only after getting the patient's informed consent for the same (4). Efforts should be made to anonymise the images and photographs used so that such information does not raise ethical and legal concerns (5).

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