



Short communication

Methods for using microblogs for health communication with a pharmacist-based account

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ABSTRACT

Objective: To implement and assess the effectiveness of using microblogging for health communication with a pharmacist-based account.**Methods:** We created a private and public “iPharmacist” account on the Weibo microblogging platform using the “Brief, Evidence-based, Ethical, and Plain-language (BEEP)” principle to post messages and to interact with patients. From November 2012 to November 2013, a content analysis was performed of the original microposts by iPharmacist, as well as original messages directed to iPharmacist by other accounts, and private messages received by iPharmacist.**Results:** A total of 598 original messages were posted by iPharmacist, which were reposted 34442 times with 6013 comments received; while 310 messages were posted by other Weibo users directed to the iPharmacist alone with 131 private messages.**Conclusions:** The use of iPharmacist account allowed the provision of quality microposts to educate the Chinese public. The public messages were well disseminated.**Practice implications:** Microblogging could be an effective tool for patient education and health communication.

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1. Background

Microblog is a Web 2.0 technology that provides an online social networking platform [1] for communicating and sharing information rapidly among users. Microblog users post messages of 140 characters or less that are read by other users who “follow” the person who posted the message [2]. Then followers can “repost” messages that they receive, posting it for their followers to see (and to potentially repost as well). Also, messages can be directed to someone using an @message where the message includes “@username,” and the username is the intended recipient’s microblog account. Subsequently, the user can view the micropost containing his/her name in a special “replies tab” (e.g. accessible at <http://twitter.com/replies> for logged-in users) that notifies them of a message. Microblog users also can send private, direct messages similar to instant messages [2,3].

In 2014, 23% of online adults used Twitter [4] as their microblog platform (www.twitter.com). In addition, Twitter is the most widely used tool (59.9%) in the U.S. among those patients using social media for health communication [5]. The main motives for using Twitter were to increase knowledge (28%), exchange of advice (24%), social support (21%), physician-patient communication (18%), and self-care (14%) [5]. Physicians and local health departments in the U.S. have used microblogging to disseminate health information and advice to the public with the potential to improve health outcomes [6,7]. The key advantage of using microblog for health communication is to increase the accessibility and widen access of health information rapidly to the public and patients and to offer a new dimension of interaction and engagement with patient communities to foster interactions outside of the traditional boundaries. [8]. Meanwhile, the information exchanged needs to be monitored for quality and reliability, and the users’ confidentiality and privacy need to be maintained [9]. Guidelines regarding proper use of social media for health care professionals have been published [10–13]. As microblogging provides an opportunity for pharmacists to promote better and convenient patient interactions, this study aimed to assess the use of microblogs for health communication with a pharmacist-based account.

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2. Methods

2.1. Development and content analysis of the messages

In November 2012, we created a private and public account “iPharmacist” (<http://weibo.com/ipharmacist>) on Sina Weibo, the most popular microblog platform in China [14]. Based on Center for Disease Control and Prevention guidelines for using Twitter [10–12], we used the “BEEP” principle (Brief, Evidence-based, Ethical conduct, Plain-language) to conduct health communication (Appendix1). This research was approved by the Institutional Review Board of the School of Pharmaceutical Sciences, Peking University, Beijing, China.

Topics for microposts were selected based upon current public health information or news and to facilitate communication of microblog users. For example, during the 2013 public health outbreak of H7N9 virus in China [15], we posted a series of messages regarding hygienic methods to prevent respiratory viral infections, provided information on antiviral drugs, and clarified misleading information on herbal medicine usage. Meanwhile, we also used microposts to facilitate communication with patients by answering their questions. Messages related to individual patient’s

health information were replied by private messaging (Fig. 1). @message or comment message not related to patient information were replied by comment messages. If the question was a good learning opportunity for other users, we posted answers publicly as a new message to protect the identity of the sender.

Questions from Weibo users relating to drug information or requesting education were posted by one clinical pharmacy faculty and one senior pharmacy student. The pharmacist developed most of the messages and provided oversight for the consistency and accuracy of the messages posted by the student. Typically, 30–60 min was devoted by the pharmacist per day to answer questions from patients and to develop new microposts. The length of time depended on the quantity and depth of questions from patients and whether an illustration was needed. There was a lag-time for feedback but most of the questions were answered within 24 hours. We also occasionally reposted microposts related to rational drug use from other health care professionals.

Previous methods were utilized for content analysis of microblog messages [16–18]. Two researchers independently reviewed the messages and classified them into broader categories developed according to the content of messages, and when necessary discussed with a third author to reach consensus. The categories

Health communication model on microblogging platform

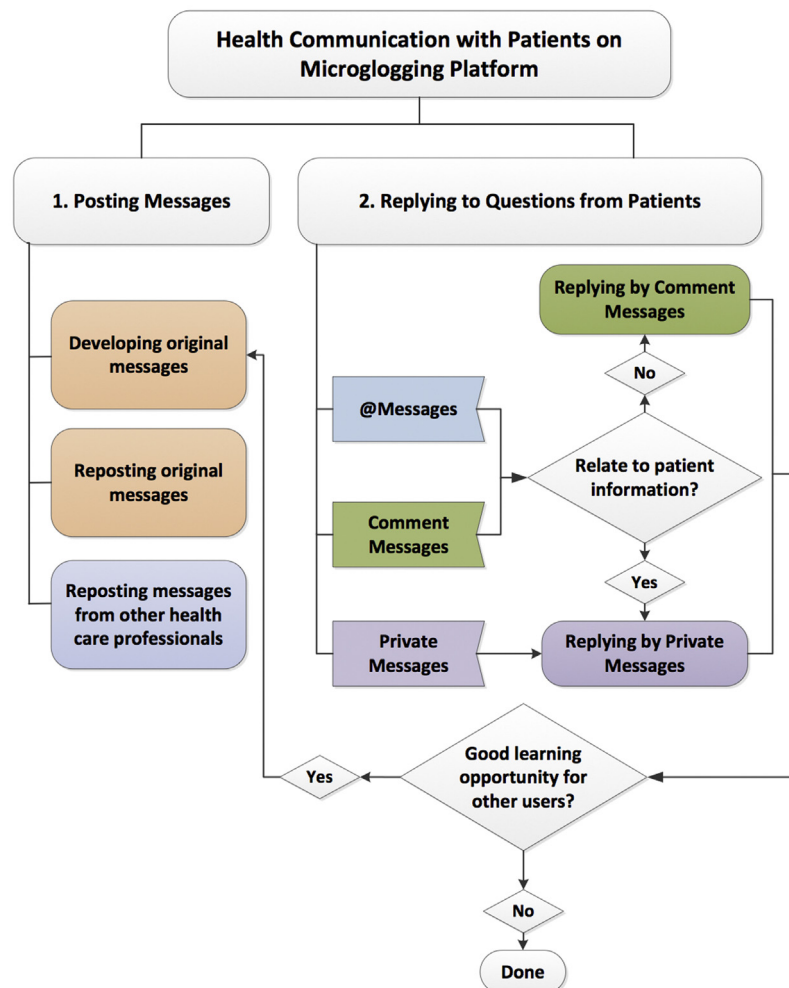


Fig. 1. Health communication model on microblogging platform.

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