Twitter as a tool for nail education

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In the era of the COVID-19 pandemic, technology has expanded access to both dermatologic care and continuing medical education through modes such as teledermatology and social media. Twitter is a global online news and social networking website that allows individuals to effortlessly connect, collaborate, and rapidly disseminate information to a large audience. The medical community is currently exploring Twitter as a platform for continuing medical education, virtual journal clubs, and online conferences and webinars. We hypothesized that Twitter may be a useful way to expand access to dermatology education to other specialties and allied health care professionals. Given the established educational gaps in the diagnosis and management of nail conditions, we explored Twitter as a medium for nail education.

Between October 3, 2021, and November 7, 2021, 5 nail tweetorials—threads of multiple tweets that are drafted in advance and posted synchronically—were published on Twitter. The tweetorial lengths ranged from 11 to 16 individual tweets, and topics included nails and underlying systemic diseases, onychomycosis, nail melanoma, nail changes associated with COVID-19, and pediatric nail conditions. The tweetorials were interactive and included embedded photographs and multiple-choice questions. A brief institutional review board–approved survey posted on Twitter asked participants to report on user engagement with the tweetorials. The tweetorials and survey were posted by @DrStevenTChen who has 12,100 followers as of March 13, 2022. In a sample of 100 of his followers, 50% stated being a health care professional in their username or bio.

The user engagement with the tweetorials ranged from 357 to 2598 likes and 78 to 500 retweets per tweetorial. The survey was completed by 32 participants, of whom 20 (63%) were physicians, 9 (28%) were medical students, 1 (3%) was a pediatrician, 1 (3%) was a physician assistant/advanced practice nurse, and 1 (3%) was a layperson. Of the physician responders, 10 (50%) were dermatologists, 5 (25%) were unidentified, 4 (20%) were internists or family practitioners, and 1 (5%) was an emergency medicine physician. Of the 26 participants who reported having a clinical practice, 22 (85%) believed that the tweetorials were definitely relevant to their clinical practice and 4 (15%) believed that the tweetorials were probably relevant to their clinical practice. The limitations include the small number of survey participants and the inability to quantify how many total users the tweetorials reached.

Twitter is a useful tool to share nail education with physicians, medical students, and other health care professionals. Twitter could be especially useful for sharing information on uncommon disorders that clinicians may not encounter in daily clinical practice. Even dermatology residents may receive limited exposure to nail diseases. In addition, tweetorials may be considered a form of digital scholarship, and some call for the inclusion of such materials for academic promotion, similar to a published article. Twitter offers a promising global frontier for expanding access to nail education, and tweetorials offer an uncommon and interactive method to carry out such education. We encourage dermatologists to create and share medical education via Twitter with learners and other health care professionals.
Conflicts of interest

Dr Chen has received consulting fees from Pfizer and Novartis related to the use of digital media. Authors Nickles and Gaghan and Dr Mervak have no conflicts of interest to declare.

REFERENCES