

The Impact of Social Media on Dermatology Practice in the Philippines: A Cross-Sectional Study

Ma. Fatima Lourdes Omangayon^{1*}, Luella Joy Escueta-Alcos², Clarisse G. Mendoza², Johannes F. Dayrit²

¹Neo Skin Solutions Dermatology Clinic, Biñan City, Laguna, Philippines

²Department of Dermatology, Research Institute for Tropical Medicine, Muntinlupa City

Correspondence: Ma. Fatima Lourdes Omangayon; Neo Skin Solutions Dermatology Clinic, Tri-Ax Three Center, Biñan City, Laguna, Philippines; Email: fatima.omangayon@gmail.com

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Abstract: The rise of social media has significantly transformed how people communicate and share information, including within the medical field. In dermatology, practitioners increasingly use social media to engage with patients and disseminate medical knowledge. This study examined dermatologists' preferences and usage patterns of social media for professional purposes and assessed their perceptions of its advantages and disadvantages in practice in the Philippines. In this cross-sectional study, 279 dermatologists including residents, diplomates, and fellows completed an online questionnaire on their social media usage and perceptions, and the responses were statistically analysed using SPSS. Most respondents were board-certified dermatologists (diplomates and fellows), with 53.41% in solo practice and 41.22% in group practices. The majority were female (86.02%), with a median age of 35.5 years. Among the surveyed dermatologists, 58.84% used social media for online consultations, and 51.26% used it to share health information. Facebook was the most commonly used platform for both purposes. In clinical practice, the majority of respondents reported that 20–40% of their patients were referred through social media. Dermatologists strongly agreed that social media is a valuable tool for promoting collaboration among healthcare professionals, but they also expressed concerns about potential violations of patient confidentiality and privacy. Despite these risks, social media offers significant opportunities to provide reliable health information, enhance patient engagement, improve adherence to treatment plans, strengthen doctor-patient relationships, and foster professional networking. To maximize these benefits, dermatologists must safeguard patient privacy, ensure information accuracy and credibility, and adhere to ethical guidelines established by their professional societies and countries. Responsible and informed use of social media is essential to harness its potential for improving dermatology practice and patient care.

Keywords: Social media, Dermatologist, Digital healthcare, Facebook, Instagram, Teledermatology, Patient education, Online marketing

Introduction

Social media are interactive platforms that enable user-generated content, real-time communication, and collaboration across diverse audiences [1]. With over 4.62 billion users worldwide in 2022, including 73 million in the Philippines, social media continues to reshape various sectors, including healthcare [2]. A study by Griffis et al. [3] in the United States reported that 99% of hospitals had adopted at least one social media platform to interact with patients, underscoring its growing integration into healthcare delivery.

In dermatology, “internet dermatology” has rapidly emerged as a popular topic, with social media platforms [4] such as Instagram, Facebook, YouTube, and TikTok becoming widely used for dermatologic information and consultations. Given the highly visual nature of dermatology, it is likely that dermatologists utilize social media more frequently than specialists in other fields [5].

The COVID-19 pandemic further accelerated the adoption of digital healthcare solutions [6]. Lockdowns and social distancing measures prompted a significant shift toward telemedicine to ensure continued care while minimizing the risk of SARS-CoV-2 transmission. In 2020, the American Academy of Dermatology (AAD) Teledermatology Task Force reported that the use of teledermatology among its members surged from 14.1% to 96.9%, with most dermatologists expressing an intention to maintain teledermatology services post-pandemic [7].

In the Philippines, a similar trend was observed. A study by Angeles et al. highlighted a substantial impact of the pandemic on dermatology practice, including a more than 50% reduction in clinic hours, patient volume, and both aesthetic and non-aesthetic procedures. During this period, 15% of dermatologists managed patients exclusively via tele-dermatology, another 15% continued face-to-face consultations, and the majority (70%) adopted a

hybrid approach. A six-fold increase in teledermatology utilization was noted, with Viber and Facebook Messenger being the most commonly used consultation platforms. Other tools included WhatsApp, Zoom, SeriousMD, Medifi, Skype, and Google Meet [8].

Beyond telemedicine, dermatologists increasingly leverage social media to build their personal brand and engage with patients [9]. A recent study by Alhayaza et al. in Saudi Arabia found that 82.8% of dermatologists believed social media had transformed their practice [10]. In this technology-driven era, keeping pace with digital advancements is essential for thriving in dermatology. While social media is widely used, there remains limited evidence on whether a dermatologist’s online presence directly influences patient acquisition.

Given the Philippines’ high social media penetration, this study aimed to examine how dermatologists in the Philippines use social media for both personal and professional purposes. It also evaluated their perceptions and attitudes toward social media use and assessed its influence on their clinical practice. To the best of our knowledge, there is a scarcity of publications exploring dermatologists’ use of social media as a tool in dermatology practice, as well as their perceptions and attitudes toward it, in the Philippines. The researchers anticipate that the findings will help guide future strategies for social media engagement and telemedicine utilization among dermatologists in the Philippines and neighbouring Asian countries.

Methodology

Study Design

A cross-sectional study was conducted between April and October 2023 using a self-administered questionnaire distributed to dermatology residents and board-certified dermatologists in the Philippines to explore their social media usage and perceptions of its impact on their practice. Respondents included dermatologists

practicing in academic institutions, non-academic private clinics, and government-affiliated facilities, and were recruited through a non-probability snowball sampling method.

Study Procedures

The questionnaire was developed by the authors based on a review of relevant literature and findings from previous studies [10,11]. It was created using the Google Forms platform (Google Inc., Mountain View, CA) and included items on demographic data, social media usage for online consultations, health information dissemination, and perceptions of social media's impact on dermatology practice. Pilot testing of the online questionnaire was conducted among dermatology residents, diplomates, and fellows to assess its reliability, completion time, and clarity. Additionally, face validation was conducted to ensure that the questions adequately and accurately measured both positive and negative perceptions. Feedback on their survey experience was collected and incorporated into revisions of the questionnaire. The respondents for pilot testing were excluded from the final study sample.

The finalized questionnaire was disseminated online to eligible respondents via email and through the Philippine Dermatological Society (PDS) Viber group, which comprises approximately 1,000 active members. To increase the response rate, respondents were encouraged to invite other board-certified dermatologists who were willing to participate, regardless of their social media use. To ensure response validity, the Google Form was limited to one submission per email address. Email addresses were collected solely to provide respondents with a copy of their completed responses.

Sample Size

The sample size was calculated based on the assumption that 50% of dermatologists perceived

social media as having a negative impact on their practice. With an α level of 0.05, a maximum tolerable error of 5%, and considering the estimated active members of the PDS ($n=1,000$), the required sample size was 278 respondents.

Study Variables

Sociodemographic characteristics

Respondents' sociodemographic profile, including age, gender, credentials, area of practice, and years of experience, was collected. In addition, respondents were categorized according to their professional status within the PDS:

- **Residents:** dermatologists-in-training currently enrolled in an accredited residency program in dermatology.
- **Diplomates** board-certified dermatologists who have passed the diplomate examination and have less than three years of independent dermatologic practice.
- **Fellows/Consultants:** dermatologists who have attained fellowship status with the PDS, typically signifying advanced training, extensive clinical experience, and/or contributions to the field through academic or leadership roles.

Social media use

Information on the preferred social media platforms for both personal and professional purposes, as well as the frequency and duration of use, was collected.

Perceptions

Respondents' perceptions regarding the benefits, applications, and risks of social media were assessed using both open-ended questions and Likert-scale items. Items were rated on a five-point scale, ranging from strongly agree (5) to

strongly disagree (1), and average scores for each category were then computed.

Ethical Consideration

This study was approved by the Research Institute for Tropical Medicine Institutional Review Board (RITM IRB Approval No. 2022-31). Ethical principles were strictly observed, ensuring voluntary participation, informed consent, and respondent anonymity. No compensation was provided for questionnaire completion. Consent was obtained at the beginning of the questionnaire, and approval of the electronic informed consent was mandatory for participation. If consent was not provided, the questionnaire was automatically terminated.

Statistical Analysis

Data were analysed using SPSS statistical software. Frequencies and percentages were reported for qualitative variables, while median scores and interquartile ranges were calculated for attitudes towards social media use. Respondents' attitudes were compared across age, sex, credentials, years of experience, and frequency of social media use. Depending on the applicability, the Mann–Whitney U test and Kruskal–Wallis test were used for group comparisons. Odds ratios were also calculated to compare qualitative variables between groups. A p-value of <0.05 was considered statistically significant.

Results

Sociodemographic Characteristics of Respondents

A total of 279 dermatologists participated in the study, resulting in a response rate of 28.5%. The majority were female (86.02%), with a median age of 35.50 years. Most respondents were board-certified dermatologists (diplomates, fellow, consultant), while the remainder were

dermatology residents. Among respondents, 53.41% were engaged in independent practice, while 41.22% shared practiced in group settings (**Table 1**).

Table 1. Sociodemographic criteria of respondents (n=279).

	Frequency	Percent
Median age (IQR)	35.5	(10)
Range	18-80	
Age (years old)		
<31	34	12.19
31-40	163	58.42
41-50	40	14.34
>50	39	13.98
Missing data	3	1.08
Sex		
Female	240	86.02
Male	39	13.98
Professional Title		
Diplomate/Fellow/Consultant	208	74.55
Resident and others*	70	25.09
Missing data	1	0.36
Practice Setting		
Independent practice	149	53.41
Shared practice, hospital or any health care institution	115	41.22
University or academic based practice	55	19.71
Others**	8	2.87
Missing data	1	0.36
Years in practice		
<5 years	106	37.99
5-14 years	97	34.77
15-24 years	44	15.77
25-35 years	20	7.17
>35 years	12	4.30

*Included physicians in pre-residency-a two-month preliminary training period in PDS-accredited institutions undertaken prior to entry into residency proper.

**Includes mixed or combined practice types, such as independent and government practice, private and government practice, fellowship or resident practice, visiting consultants (non-plantilla), hospital-based practice, and those planning to practice in provincial areas.

Social Media Usage of Respondents

Table 2 illustrates the characteristics of social media usage among respondents. A vast majority (99.28%) reported having their own social media accounts, with Facebook (97.47%) and Instagram (85.56%) being the most frequently used platforms. Other commonly used platforms included YouTube (33.57%), Twitter (19.49%), and TikTok (12.27%). The purposes for which respondents engaged with social media were also explored. Most respondents (93.50%) reported using social media for personal reasons unrelated to clinical practice, while a substantial proportion used it for professional purposes, including online consultations (58.84%) and dissemination of health-related information (51.26%). Furthermore, 31.79% of dermatologists reported that 20–40% of their patients were referred via social media.

Table 3 shows respondents' social media usage for online consultations and health information, along with their user experience ratings. Among those using social media for online consultations, Facebook was the most frequently chosen platform (67.48%), followed by consultation applications such as SeriousMD, NowServing, Medifi, Doxy.me, and PPD (13.50%). More than a third of respondents (36.20%) used social media 2–4 times per week, while 20.86% used it monthly. Experience rating refers to a self-assessed measure where respondents evaluated the quality of their experience on a scale from 1 (very bad) to 10 (very good). Those using social media for online consultations reported a median score of 7.

For sharing health information, Facebook remained the preferred platform (73.24%), followed by Instagram (42.96%), with other platforms including Viber, YouTube, Twitter,

TikTok, and Snapchat. Usage frequency varied, with the majority (50.70%) contributing information monthly. Median experience ratings for sharing health information were 8, reflecting overall satisfaction.

Table 2. Respondents' social media usage (n=279).

	Frequency	Percent
Having social media account?		
Yes	277	99.28
No	2	0.72
Social Media Platforms used		
Facebook	270	97.47
Instagram	237	85.56
YouTube	93	33.57
Twitter	54	19.49
TikTok	34	12.27
LinkedIn	32	11.55
Viber Messenger	7	2.53
Others*	15	5.42
Purpose of Using Social Media		
Personal	259	93.50
Online consultation	163	58.84
Contributing health information	142	51.26
Others**	13	4.69
Practice Attributable to Social Media Referrals		
<20%	73	26.07
20-40%	89	31.79
>40%	28	10.00
Do not use social media in practice	83	29.64
Missing data	7	2.50

*Snapchat, SeriousMD, Google Meet, Reddit, NowServing, Zoom

**building professional networks, promoting services, updating clinic schedules, posting announcements, and sharing clinic information.

Table 3. Respondents' social media usage for online consultation and health information.

	Online Consultation		Contributing Health Information	
	(n = 163)		(n = 142)	
	Frequency	Percent	Frequency	Percent
Social Media Platforms Used				
Facebook	110	67.48	104	73.24
Instagram	5	3.07	61	42.96
Viber Messenger	16	9.82	46	32.39
Google Meet	12	7.36	–	–
Zoom	9	5.52	–	–
YouTube	2	1.23	8	5.63
Consultation apps*	22	13.50	–	–
Others	5**	4.29	11***	7.75
Not specified	4	2.45	–	–
Frequency of Social Media Use				
Daily	24	14.72	3	2.11
2–4 times per week	59	36.20	15	10.56
Once a week	30	18.40	41	28.87
Monthly	34	20.86	72	50.70
Missing data	16	9.82	11	7.75
User Experience Rating		(n=158)	(n=140)	
Median (IQR), Range	7 (2) 1–10		8 (2) 1–10	

*SeriousMD, Doxy.me, NowServing, Medifi, PPD; ** WhatsApp, Telegram, Institution, WeChat; ***Twitter, TikTok, Snapchat;

Perceptions of Social Media Use Among Respondents

This study explored the perceived benefits and drawbacks of using social media for dermatology consultations and the dissemination of health information, based on responses to open-ended survey questions. The qualitative data were analysed to identify recurring themes, which are summarized in **Table 4** and **Table 5**.

In the context of dermatology consultations via social media, the most frequently cited benefit was convenience and accessibility, as it enables remote consultations and broader patient outreach. Other reported advantages included low or no cost, enhanced visibility and marketing, and a reduced risk of infection due to the absence of face-to-face contact. However, several concerns emerged.

Respondents highlighted issues related to patient data privacy and confidentiality, as well as the inherent limitations of online consultations, such as the inability to perform physical examinations, the risk of misdiagnosis due to poor image quality, and reduced opportunities to establish personal rapport. Other concerns included potential miscommunication, patients' expectations of free services, difficulties with medication dispensing, scheduling conflicts, and challenges in verifying patients' conditions.

For disseminating health information, social media use was generally perceived positively for several reasons. Among the reported benefits, the most frequently cited was its extensive reach, enabling dermatologists to engage with a broader and more diverse patient population. Respondents also emphasized the convenience and efficiency of using these plat-

Table 4. Respondents' perception of social media for online consultation.

	Frequency	Percent
Perceived advantages		
Convenience	73	44.79
Accessibility	68	41.72
Low cost/Practical/Free	12	7.36
Easy to communicate/ Visibility/Marketing	8	4.91
Can send photos/videos	6	3.68
No face-to-face contact/Safe	6	3.68
Continuity of care	6	3.68
Others*	2	1.23
Perceived disadvantages		
Inability to perform physical examination	35	21.47
Privacy and confidentiality concern	29	17.79
Patients reaching out beyond professional hours	28	17.18
Blurry photos or videos	28	17.18
Lack of interaction or rapport	20	12.27
Internet issues (low connectivity/no access)	20	12.27
Miscommunication issues	9	5.52
Time consuming	5	3.07
Others**	8	4.91

*helps patients, less expenses

**patients expect it to be free, inability to dispense medicine, scheduling issues, difficult to verify patients' issues.

forms, which enhances the accessibility of reliable health-related content. Additionally, social media was regarded as a valuable tool for patient education, raising awareness, and promoting dermatology practices.

However, several concerns were identified. A key issue was the spread of misinformation, as dermatologists noted that content shared on social media could be misinterpreted, taken out of context, or altered by non-experts. On open platforms, posts may be reposted without attribution, edited with misleading headlines, or combined with unverified advice from influencers or commercial entities. Challenges were also reported in content creation, which some respondents described as

both difficult and time-consuming. Additional concerns included negative audience feedback, the absence of standardized processes to verify information accuracy, ethical dilemmas related to marketing and promotion, and instances of unauthorized content use. Once health information is disseminated on social media, there is no mechanism to ensure its accuracy when it is reposted, summarized, or reinterpreted by others. More broadly, this highlights a fundamental limitation of social media, where medical information can be freely distributed without undergoing peer review.

Some respondents also expressed worry that patients might overly rely on online advice, potentially replacing traditional consultations.

Table 5. Respondents' perception of social media for contributing health information

	Frequency	Percent
Perceived advantages		
Accessibility/greater reach	56	39.44
Ease of sharing information/convenience	40	28.17
Health education/awareness	29	20.42
Marketing	19	13.38
Engagement with audience/patients	8	5.63
Low cost platform	5	3.52
Perceived disadvantages		
Fake news/misinformation	33	23.24
Time consuming/difficulty in creating posts	14	9.86
Negative feedback or comments	13	9.15
No way to evaluate validity of information	13	9.15
Can be misinterpreted	11	7.75
Security/privacy risks	8	5.63
People rely on online advice	6	4.23
Become consultations	4	2.82
Not all have social media	4	2.82
Others*	3	2.11

*Content used without consent from the doctor, posts can be easily ignored, may be perceived as self-promotion, technical issues (internet).

Additional challenges reported included limited inclusivity due to unequal access to social media, the possibility of posts being overlooked, perceptions of self-promotion, and technical limitations such as unstable internet connectivity and restrictions on content formats.

Attitudes Toward Social Media Use Among Respondents

As shown in **Table 6**, respondents generally expressed positive viewpoints regarding the role

of social media in dermatology practice (overall median = 3.71, IQR = 0.78). The strongest agreement was with the statement that social media enhances collaboration among physicians (Median = 5.0, IQR = 1.0). Respondents also agreed that social media improves healthcare delivery, facilitates patient education, and increases professional visibility. However, they disagreed with the statement that social media cannot breach patient privacy and confidentiality (Median = 2.0, IQR = 2.0), indicating ongoing concerns about data security.

Table 6. Respondents' attitudes toward social media use.

	Median	IQR	Interpretation
The use of social media in dermatology is overall positive for the field.	4	2	Agree
The use of social media in dermatology does not worsen the image of the field.	4	1	Agree
Patients respond positively to social media use by dermatology practices.	4	2	Agree
Use of social media helps in recruiting new patients.	4	1	Agree
Patients are more likely to prefer a dermatologist with a social media presence over one without.	3	1	Neutral
Social media strengthen physician-patient relationship.	4	1	Agree
Social media can help in the delivery of healthcare.	4	1	Agree
Social media can help improve professional knowledge.	4	1	Agree
Social media can increase collaboration among physicians.	5	1	Strongly Agree
Social media cannot damage one's professional image.	3	2	Neutral
Social media is a good tool for public health awareness.	4	1	Agree
Social media is a good tool for increasing patient management compliance.	4	1	Agree
Social media could not breach patient privacy and confidentiality.	2	2	Disagree
Social media does not have poor quality of information.	3	0	Neutral
Overall Median	3.71	0.78	Agree

1.00–1.80 = Strongly Disagree; 1.81–2.60 = Disagree; 2.61–3.40 = Neutral; 3.41–4.20 = Agree; 4.21–5.00 = Strongly Agree.
Source: Sözen, et al. [12]

Association Between Demographic Factors and Frequency of Social Media Use

Table 7 (Supplementary) summarizes the relationship between respondents' demographic profiles and the frequency of social media use for online consultations. Overall, professional title and years in practice demonstrated statistically significant associations with the frequency of social media use ($p < 0.05$). Specifically,

residents and other junior practitioners reported a higher likelihood of using social media at least 2–4 times per week compared to diplomates and fellows (OR = 2.20, 95% CI: 1.05–4.62). Similarly, dermatologists with fewer than five years of practice were more likely to engage in frequent online consultations (71.01%) than those with longer practice durations. Meanwhile, respondents with 15–24 years (OR = 0.18, 95% CI: 0.06–0.54) and 25–35 years (OR = 0.07, 95%

CI: 0.01–0.40) of experience showed a markedly lower likelihood of frequent social media use.

Regarding age, younger dermatologists aged 31–40 years tended to use social media more frequently (OR = 2.90, 95% CI: 0.99–8.52), although this result did not reach statistical significance. Similarly, no significant associations were observed for sex (OR = 1.48, 95% CI: 0.51–4.26).

Table 8 (Supplementary) summarizes the association between respondents' demographic characteristics and the frequency of social media use for sharing health information. The results show no statistically significant relationships across variables such as sex, age, professional title, and years in practice. These findings suggest that demographic factors did not substantially influence how frequently dermatologists used social media to share health-related content.

Association of Demographics and Social Media Use Frequency with Attitudes Toward Social Media

Table 9 (Supplementary) summarizes the association between respondents' demographic characteristics and their attitudes toward social media use. Significant differences were observed across age groups, professional titles, and years in practice ($p < 0.05$). Younger dermatologists (<31 years) reported more favourable attitudes toward social media (Median = 3.86, IQR = 0.50) compared to older groups, particularly those aged 41 and above. Similarly, residents and other junior practitioners demonstrated more positive perceptions (Median = 3.86, IQR = 0.50) than diplomates, fellows, and consultants (Median = 3.64, IQR = 0.79). Dermatologists with less than five years of practice also expressed stronger support for social media use (Median = 3.86, IQR = 0.43), whereas those with over 15 years of experience generally reported less favorable views. In contrast, sex was not significantly associated with attitudes toward social media ($p = 0.468$). These findings show that respondents'

attitudes toward social media may be influenced by their professional title, age, and years of experience.

Table 10 (Supplementary) illustrates the relationship between the frequency of social media use for online consultations and health information dissemination and respondents' attitudes toward these platforms. Significant associations were observed for both purposes ($p < 0.05$). Dermatologists who used social media more frequently for online consultations (2–4 times per week) exhibited more positive attitudes (Median = 3.93, IQR = 0.43) compared to those using it once a week or less (Median = 3.64, IQR = 0.78). Similarly, dermatologists who shared health information more often (2–4 times weekly) reported the highest positive attitudes (Median = 4.14, IQR = 0.29), whereas less frequent users showed comparatively lower attitudes (Median = 3.86, IQR = 0.57). Hence, greater engagement with social media is associated with more favourable attitudes toward its use in dermatology practice.

Discussion

Over the last decade, social media use has expanded rapidly worldwide, and healthcare professionals, including dermatologists, have increasingly integrated these platforms into their practice. During the COVID-19 pandemic, teledermatology became an essential tool for maintaining continuity of care. Social media platforms complemented teledermatology by enabling dermatologists to engage with patients, disseminate health information, and provide virtual consultations, effectively bridging the gap between traditional practice and digital healthcare delivery. This study explored the patterns of social media use among dermatologists in the Philippines and examined their perceptions and attitudes toward these platforms.

Our findings revealed that most respondents owned social media accounts, which they used for online consultations, sharing

health-related information, and personal purposes. Among the platforms, Facebook emerged as the most frequently used for consultations, followed by consultation-specific applications such as SeriousMD and NowServing, while Instagram was used less often. These findings align with the study by Naik [13], which also reported Facebook as a primary channel for dermatologic consultations. Facebook was similarly identified as the preferred platform for disseminating health information, followed by Instagram. Interestingly, a study by Quijote et al. [14] highlighted that most healthcare content creators on social media were board-certified dermatologists, particularly active on Instagram and TikTok, underscoring their strong online presence.

In this study, a notable portion of respondents reported that approximately 20–40% of their patient referrals were attributed to social media, consistent with previous research indicating that social media plays only a minor or no role in patients' selection of a dermatologist [5]. Although the proportion of referrals is not high, this finding underscores the growing influence of digital platforms in dermatology practice. Other studies have also shown that some patients actively seek practitioners with a strong social media presence [15]. To maximize patient engagement, dermatologists are encouraged to highlight patient reviews, professional expertise, and original medical content on these platforms [5]. Given the inherently visual nature of dermatology, the specialty is particularly well-suited to leveraging social media for enhancing practice visibility and patient interaction.

Social media was also perceived to offer several advantages for online consultations, particularly in terms of accessibility, remote care, and continuity of consultations during the COVID-19 pandemic. However, several limitations were noted. These included the inability to perform physical examinations, especially for conditions requiring palpation or

assessment of high-risk lesions and hair-bearing areas [16,17]. Other challenges reported included poor image quality, unstable internet connectivity, and difficulties in establishing strong doctor–patient rapport in virtual settings. In addition, concerns were raised regarding data privacy and confidentiality. For example, despite Facebook's strict privacy policies, apprehensions remain about potential third-party access to sensitive user data, including health records [18]. Therefore, despite the advantages of using social media in their practice, dermatologists should adopt secure practices, comply with data protection regulations, and ensure the ethical and responsible use of social media in clinical settings.

Many respondents supported the use of social media for health education, citing its wide reach and capacity to raise public awareness as key benefits. Pizzuti et al. [19] similarly reported that nearly 85% of physicians viewed social media as an effective educational tool, using it to share knowledge, participate in discussions, follow conference updates, and receive information from health authorities. Beyond patient engagement, these platforms facilitate professional networking by connecting dermatologists with colleagues, researchers, marketing professionals, conference organizers, and other industry stakeholders. Such networks not only enhance professional visibility but also foster opportunities for meaningful collaborations within the dermatology community [20].

Despite its benefits, significant challenges persist, particularly regarding misinformation, non-medical influencers, and ethical concerns. Quijote et al. [14] found that while Instagram hosts more physician-led content, platforms such as YouTube and TikTok are dominated by non-expert influencers. Inaccurate medical information disseminated by unqualified individuals can mislead patients and compromise public trust [21]. These findings emphasize the importance of maintaining a strong dermatologist-led presence online to

ensure that evidence-based information remains accessible to the public.

Additional ethical challenges involve the unauthorized use of physicians' content by companies for advertising purposes, often without consent. Similarly, dermatologists expressed concern about unethical product endorsements, which may compromise the credibility of health information. To address these issues, transparency is essential when promoting products or services online, especially when potential financial conflicts of interest exist. Given the ease of including product names and links in social media posts [22], clear disclosure practices are critical to preserving trust and professional integrity.

Lastly, generational differences in social media use were observed. Younger practitioners—particularly residents and early-career dermatologists—reported higher levels of engagement with digital platforms compared to their senior colleagues. This finding aligns with previous studies showing that younger physicians are generally more comfortable and proficient with digital tools [23,24]. In contrast, older dermatologists were less inclined to adopt these platforms, highlighting a potential digital gap. Targeted support and training for senior practitioners may help bridge this divide. Given the increasing integration of digital tools in patient education, professional networking, and practice promotion, providing structured guidance and education could further enhance digital engagement while mitigating potential ethical concerns.

Conclusion

This study provides an overview of dermatologists' perceptions and attitudes toward social media use in dermatological practice in the Philippines. It highlights the diverse ways these platforms are utilized, from online consultations to the dissemination of health information. Social

media offers substantial potential for professional growth, patient education, and improved accessibility, yet challenges remain regarding privacy, misinformation, and ethical considerations. Dermatologists are encouraged to use these platforms responsibly by protecting patient data, maintaining professional boundaries, and sharing evidence-based information.

Given the growing role of social media in dermatology, professional bodies including dermatology societies, medical regulatory boards, and healthcare institutions should consider establishing clear guidelines for its ethical and responsible use. Furthermore, these organizations should provide support and resources to assist dermatologists in navigating the evolving digital landscape of healthcare communication.

Limitations of the Study

Selection bias may be a factor in our results, as those dermatologists with strong opinions on this topic may have been more inclined to respond than others. Moreover, the study may include potential response bias and underrepresentation of older dermatologists due to the online nature of the survey.

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Potential Conflict of Interest

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Supplementary Table

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