Facebook Medicine

To the Editor:

The practice of medicine has been greatly affected by the advent of the World Wide Web. Patients have access to medical information (some misleading), are able to look up information on their physicians, and can post their own reviews of clinicians. Now the doctor-patient relationship may be forced to evolve further with the increasing popularity of online social networking websites, like Facebook (www.facebook.com) and MySpace (www.myspace.com). These websites have been described as "online spaces that allow individuals to present themselves, articulate their social networks, and establish or maintain connections with others."¹ Membership is free and it allows members to post a profile, search for old friends, and make new contacts.

Recently a rheumatology patient contacted us via Facebook, requesting to be added as a friend. Facebook currently has 70 million users worldwide, and on the website it describes itself as a "social utility that connects people with friends and others who work, study and live around them." This raises questions of propriety: should patients and doctors be connected via these online networks? There are a number of articles concerned with the practice of online medicine, and the general consensus is that the Internet allows greater accessibility and efficiency to meet our patients' needs. Yet a review of PubMed did not reveal any discussion of how online social networks are to be incorporated into a physician's practice. Given the massive popularity of these websites, we expect that ours is not the first case of a patient seeking to establish an online connection with his/her physician.

Because of the ethical and professional implications, we wish to draw attention to this facet of online medicine for rheumatologists as well as other clinicians who use the Internet in their practice.

Since our Facebook account is used for family and friend communication, the decision was made to block the patient's request for access. Even though there may be potential benefit, this has crossed a line that we feel needs to be drawn. Other more appropriate avenues are available and would be more appropriate to maintain the physician-patient relationship.

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