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# Should doctors be on social media?

**Patients are seeking medical advice on Instagram and TikTok, where it's hard to tell fact from fiction. Stephanie Santos Paulo finds that doctors are divided on whether medical professionals should be joining the conversation**

Stephanie Santos Paulo *freelance journalist*

Consultant geriatrician Elena Mucci had no idea what Instagram was before creating an account, on the advice of her trainees, at age 45. Five years later, she is still making short videos in which she shares the medical knowledge she has amassed over 25 years of clinical practice.

Her magnetic social media presence has attracted 290 000 followers and even a couple of visits from presidents of African countries, who have flown to see her in her private clinic in Hastings.

Speaking at a Royal Society of Medicine debate on whether being on social media is an advantage to doctors, Mucci said, "If you're a doctor with all that knowledge, you need to share it. That knowledge is now consumed via social media."

Nearly one in four people in the UK reported turning to social media and artificial intelligence chatbots for health guidance, in a survey of 2000 people conducted by the health tech startup Semble.[1] Similarly, in the US more than one in five people made health decisions based on information seen on social media, according to survey data from more than 7270 adults, published in *JAMA*.[2]

But while health information online is abundant and easily accessible, the quality of advice given can be questionable. In the US survey 78% of respondents believed that health information on social media was false or misleading.

Experts have called for tighter regulation of medical content on social media, arguing that health influencers, whether medically trained or not, are subject to biases such as entrepreneurial and financial interests.[3]

Meanwhile China's internet content regulator has gone as far as banning unqualified content creators from posting health advice on social media.[4]

## Sharing medical advice online

In an era where social media has become a conduit for ever more rampant health misinformation (and disinformation), the role of the medically trained doctor in these online spaces is an increasingly important and contentious question.

Speaking at the Royal Society of Medicine debate, Connor Cummings, a clinical radiologist, said that people need doctors on social media to "cut through the noise."

"The individuals most vulnerable to misinformation on social media do not subscribe to the *New England Journal of Medicine*, and on social media they do not know who to believe," he said.

He argued that social media propagates misinformation and overmedicalisation but that doctors can serve as an antidote to this, providing "impartial, evidence based voices" in online spaces.

"There is no stopping conversations about health happening on social media. The only choice we have is whether we want some doctors to be present in those conversations."

However, Mucci emphasised that doctors should share health advice only within the limits of their competence.

"I'm seeing vast numbers of very young doctors on social media who simply cannot have the experience and knowledge to share that information," she warned.

While early career doctors may be well placed to share content about their student experiences or life in the NHS, she argued that they do not necessarily have the knowledge or experience required to give medical advice on social media.

Mucci also expressed concern about doctors being sponsored to promote products such as supplements or AI tools. She suggested that regulations should be put in place to stop this.

Cummings echoed this call for clear guidelines and regulations around what doctors can and cannot do with their social media presence. One possibility, he suggested, would be to establish a central body of doctors who were licensed or authorised to be the "social media face of [the medical] profession."

## Sharing advice in short form

Scarlet Nazarian is a general surgical registrar at University College London Hospital who has gained 24 700 Instagram followers by sharing medical advice on her account.

One of Nazarian's reels shows her and a colleague miming a phone conversation to the tune of a hip hop track. She asks, "Paracetamol in pregnancy causes autism?" and her colleague says "Yeah . . . that's not true." The video ends with the two dancing in an operating room, while the onscreen text reads "Paracetamol is still the recommended pain relief in pregnancy when used as directed." The video, which has more than 82 000 views, is just 10 seconds long.

In the caption, Nazarian lists several bullet points, citing a large study showing there is no evidence to support the claim that paracetamol use during pregnancy is linked with autism. She emphasises the importance of treating pain and fever during

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pregnancy with paracetamol and not alternatives such as ibuprofen.

"One of the biggest challenges with social media is communicating accurate, evidence based information in a format that people will actually engage with," Nazarian tells *The BMJ*.

"While the videos themselves are short, I sometimes use the caption to provide additional context, explain important caveats, and acknowledge where there may be exceptions."

Nazarian says her content is intended for general education rather than medical advice to individuals and encourages anyone with symptoms or concerns to seek advice from their own doctor. But she still receives messages asking for medical advice "all the time."

"Without taking a proper history, examining the patient, understanding their medical background, and reviewing relevant investigations and records, I don't think it's safe or appropriate to provide individual advice over social media," she says.

While she does not answer person-specific medical queries, she does answer some general medical questions publicly where appropriate, "as they can benefit a wider audience."

## Steering clear of social media "minefield"

Doctors have a role in countering their patients' misconceptions about health, but some doctors think that this does not extend to online spaces.

"I don't see the role of doctors as being the police officers of social media," said Tim Mitchell, consultant ear, nose, and throat surgeon and former president of the Royal College of Surgeons, speaking during the debate.

He also highlighted the perils of phone addiction, such as reduced attention spans and emotional dependence on social media interactions. "Any small benefits [of social media use] are vastly outweighed by the costs."

Meanwhile, John Dale-Skinner, a medicolegal adviser at the Medical Defence Union, says that social media is a "high risk environment" for doctors.

In the UK, a doctor's conduct on social media is subject to scrutiny by the General Medical Council. The regulator warns that a doctor's online activity may become public—even when communicating in private online groups.[5]

When it comes to discussions about health online, doctors must comment only on topics that they are qualified and competent to speak on, making sure not to leave out relevant information, and declaring any conflicts of interests, says Dale-Skinner.

From a medicolegal standpoint, he would direct doctors "away from that minefield," to avoid falling foul of regulators and professional codes of conduct.

## Sharing political views

Even when a doctor shares non-medical content on social media, the content of their posts may still be scrutinised by the GMC.

The GMC states that medical professionals, like everyone else, have the right to freedom of belief and expression. However, they caveat this by saying that "exercising these rights . . . has to be balanced with the possible impact on other people's rights and interests."

The freedom of doctors to express political views, within and outside of work, has become a contentious issue.

Earlier this year consultants urged unions and regulators to protect their freedom of speech, including their ability to speak out on matters of public conscience, international conflict, and humanitarian law. This followed high profile cases of doctors facing regulatory action as a result of social media posts, including Ghassan Abu-Sitta, a British Palestinian plastic surgeon and humanitarian doctor.[6]

In June 2026, the Mann review of antisemitism and racism in the NHS concluded that there should be stricter rules on staff uniform, such as disallowing the wearing of symbols that could be deemed political and may "cause distress to patients."[7 8] The report, commissioned by the government, also recommended that NHS England review its guidelines in relation to political expression, including what is acceptable to share on social media accounts using the NHS name, logo, or branding.

Maz Sadler, a foundation year 1 doctor working in the east of England, says that doctors should be free to express lawful political views on social media, provided they do so "respectfully and in keeping with the standards expected of the profession."

"It would be hypocritical to encourage doctors to campaign publicly on issues such as pay, working conditions, or health policy, which are all highly political, while restricting other political expression simply because particular opinions are unpopular or fall outside the prevailing consensus," Sadler tells *The BMJ*.

"The line should be drawn not at political opinion but at discriminatory or inflammatory content that undermines public trust or raises legitimate concerns about a doctor's ability to provide fair and equitable care."

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Conflict of interest: None declared.


1 Semble. Beyond the search bar: from AI curiosity to connected care. https://www.semble.io/from-ai-curiosity-to-connected-care-report

2 Pedroso AF, Dhingra LS, Khan M, etal. Use of Social Media for Health Information Among US Adults. *JAMA* 2026;336:-9. pmid: 42377946. doi: 10.1001/jama.2026.8682

3 Heiss R, Woloshin S, Dave S, etal. Responding to public health challenges of medical advice from social media influencers. *BMJ* 2025;391:e086061. pmid: 41338610. doi: 10.1136/bmj-2025-086061

4 Danao M. China's influencer crackdown bans unqualified voices from covering "sensitive topics"—should the US follow? Yahoo! Finance. 4 Nov 2025. https://finance.yahoo.com/news/china-influencer-crackdown-bans-unqualified-140000836.html

5 General Medicine Council. Using social media as a medical professional. https://www.gmc-uk.org/professional-standards/the-professional-standards/using-social-media-as-a-medical-professional/using-social-media-as-a-medical-professional

6 Waters A. Consultants demand action to protect their freedom of speech in wake of Abu-Sitta case. *BMJ* 2026;392:. pmid: 41791795. doi: 10.1136/bmj.s449

7 O'Dowd A. Doctors face ban on "political" badges at work and wearing uniforms at protests, says official antisemitism review. *BMJ* 2026;393:e688241. pmid: 42248584. doi: 10.1136/bmj-2026-688241

8 Department of Health & Social Care. Lord Mann review of antisemitism and other forms of racism in the NHS and healthcare regulatory system. 2 Jul 2026. https://www.gov.uk/government/publications/lord-mann-review-on-antisemitism-and-other-forms-of-racism-in-the-nhs/lord-mann-review-of-antisemitism-and-other-forms-of-racism-in-the-nhs-and-healthcare-regulatory-system


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