

MEDICAL CROWDSOURCING

WHAT ARE PHYSICIANS COMMUNICATING DURING COVID-19?

Qualitative analysis of G-MED's Global
Physician Online Community

Period: March 23th – April 11th 2020

Wave 3

15th April 2020

This is a complimentary report

Bringing you a regular pulse on what Physicians around the globe are discussing about COVID-19



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During a global crisis – and in unpredictable times – data is more important than ever. As part of our commitment to the healthcare industry, Ipsos and G-MED are working together to bring the voice of Physicians from around the world to you through social data analytics and medical crowdsourcing (problem solving through sharing online).

The data analysed for this short report comes from organic, unprompted and authentic posts from Physicians across the globe. Doctors are using closed communities to share case examples, get advice and share experiences.

IMPORTANT TO NOTE:

This research is based on qualitative analysis of a select number of posts from a closed healthcare professional forum. The findings do not represent the experiences of all physicians, nor represent any market-level findings.

Methodology

Qualitative analysis on a collection of Physician posts from G-MED's Global Physician Forum*

Data was accessed from the G-MED Global Physician Online Community. Selected posts concentrate on COVID-19 only. They are all unmoderated exchanges with no external probing, with questions posted by Physicians themselves to generate content.

1,047 posts were written between 23th March – 11th April 2020.

Physicians from the following 24 countries contributed to the posts:

Argentina, Belgium, Brazil, Canada, Chile, Colombia, Ecuador, France, Germany, Greece, Israel, Mexico, Peru, Poland, Portugal, Romania, Slovakia, Spain, South Africa, Turkey, UK, Ukraine, US & Venezuela



*G-MED medical crowdsourcing platform with verified physicians from all over the world. Physicians “opt in” to participate on this forum.

Total posts on COVID-19 covered across all waves 1,704 posts.



The debate around instances of potential off-label drug usage intensifies

On the G-MED community, there is extensive and heated discussion around the argument for and against risking the potential side effects of off-label usage to tackle COVID-19.

On the one hand, some Physicians insist it is unethical to trial these medications in the coronavirus setting. Others argue that it is, in fact, unethical to wait for robust trial data and not use (and gather data on) drugs that could potentially save many lives.

The community is helping Physicians deal with this difficult ethical dilemma.



Colleagues calling for a more wait & see approach to therapeutic data validation in clinical trials and those pushing for instituting semi-proven drug regimens to fend off the inundation of ICUs with moribund patients are BOTH valid. Having said this, there is an emerging "therapeutic protocol".

Physician, USA

Ipsos MORI





Discussions are increasingly turning to the importance of prevention

Physicians on the community are starting to strongly express the need to give at-risk patients relevant prevention advice. Types of advice ranges from homeopathic approaches, vitamin use, as well as breathing techniques, which are believed to help patients stay healthy even prior to catching COVID-19.

Physicians are sharing advice with one another and specifically, there is considerable thought on which course of treatment can best mitigate a cytokine storm.



Totally agree with this attitude treating people before complications, that has always been the right way in medicine, prevention rather than treatment.

Physician, GB

In France treatment generally is for serious cases! ICU unit patients.

Physician, France



Shortage of PPE is widely acknowledged, but Physicians continue to treat

Physicians on the community have experienced, first- or second-hand, a lack of appropriate personal protective equipment (PPE), when treating confirmed & suspected COVID-19 patients.

Many Physicians claim they make do with masks and gloves, but feel exposed. There is a general consensus for goggles, overhead masks and long-sleeve clothing to protect against sites of frequent contact with the hands, to reduce contamination via nose and mouth.

The repercussions of inappropriate PPE go beyond the danger to themselves, but also the risk of spreading the virus to patients and family. Despite the personal risk (with some community HCPs currently COVID-19 positive), there is no contemplation of avoiding work until adequate PPE is available – just a need to have their concerns heard.



I'm not sure about refusing to work, but I think there should be more collective medical pushback on testing and PPE. Everything seems way behind the curve. Is being a 'hero' coded language for working in a negligently dangerous environment?

Physician, USA

Ipsos MORI





PPE is not the only concern: Testing rates are also raised as a challenge

The current level of COVID-19 testing across the majority of countries is seen to be too low. Data on death rates and infection rates are treated with scepticism – as they depend on a country's approach to testing.

Physicians desire further clarity on infection rates and projected death rates. The need for certainty on these figures is driven by wanting to rationalise an increasingly emotional challenging and personal situation.

Lack of testing doesn't just leave physicians feeling in the dark, it also leaves them, their patients and their families at risk.



Currently the testing rate in the UK is pitifully low, and there seems to be approximately zero testing of frontline staff, hindering a logical action plan for A&E and respiratory departments.

Physician, GB

Ipsos MORI





Health systems are beginning to feel the ripple effect of COVID-19

Besides the obvious strain on ICU and respiratory teams across the globe, there are extensive ripple effects being felt across health systems. Some Physicians mention that, due to increased and unexpected off-label usage of a few different medications, some of their patients are unable to fill their prescriptions and get a hold of their drugs.

As well as specific prescription drug shortages, there is limited availability of some OTC pain management medications, due to panic buying. Many patients are also having to put their life on hold as elective operations and some transplant lists have been deprioritised to fight against COVID-19.

“ We schedule all patients for a virtual visit and send blood pressure cuffs (and recommended digital scales) to their homes. If after the virtual visit we believe they need a visit, we book them in the office in a socially distant schedule.

Physician, USA

Ipsos MORI





Pregnant women are looking to Physicians for advice and reassurance

Physicians claim that pregnant women are confused by the seemingly ambiguous advice they are hearing from the media. They have been told they are an “at-risk” group and that the extensive protective measures are just a precaution, due to the lack of evidence of increased risk for either them or their babies. As such, they are seeking advice from trusted sources (Physicians, online forums*)

Despite the assumption Physicians will provide COVID-19 advice specific to pregnant women, often these conversations provide no further insight or reassurance (due to the newness of the disease and subsequent lack of data). Physicians feel in an uncomfortably uninformed position, despite the fact practical measures are being taken to protect mother and child e.g. virtual appointments, remote monitoring tools.



The management of the pregnant woman is equal acetaminophen, good hydration and rest.

Physician, Venezuela

Ipsos MORI





Not the time to entertain conversations about relaxing social distancing

While Physicians on the community are largely critical of their government's speed of response to the pandemic, most are now content with the current levels of social distancing that are in place.

The majority of Physicians on the community are reporting from countries that are approaching, or currently experiencing, the peak number of deaths related to COVID-19 and there is a strong sense that social containment measures are the best way to avoid a rise in the death rate.

Physicians on the community who discuss these measures share the similar opinion that lockdown in their country should be maintained or potentially extended.



Relaxation of social distancing could only be countenanced if the resources had been made available for rigorous testing and contact tracing, to mitigate the effect of any secondary wave.

Physician, GB

COVID-19: We won't give up, but we need continued government and public support

Doctors in their own words on the G-MED community

- Physicians on the community are continuously keen to hear and share each others' experiences of treating confirmed COVID-19 patients. Conversations are starting to turn toward understanding best practice for early treatment and even potential preventative methods, more so in countries further behind the pandemic curve.
- A degree of positivity is seen, following the discovery of potential treatment solutions in drugs approved for use in other conditions. COVID-19 is, unsurprisingly, having a huge knock-on effect on health systems, with many Physicians experiencing inadequate PPE, insufficient testing rates and patients not having access to services that many deem essential.
- Though many Physicians on the community were initially unimpressed with government inaction in their respective countries, following the strict measures introduced they feel far more comforted that action has finally been taken. There is a strong sentiment from Physicians that lockdowns and isolations are completely necessary to enable health systems to succeed against COVID-19 – and commitment to these measures should remain.

THANK YOU.

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About

Ipsos

Ipsos' Healthcare team partners with pharmaceutical, bio-tech and medical device manufacturers to inspire better healthcare. Operating in over 50 countries, our 1000+ experts support key business decisions for our clients throughout the commercial lifecycle, from early-stage strategy, to launch, to performance optimisation.

We do this through a uniquely integrated combination of therapeutic and market expertise, gold standard real world evidence, and market-leading custom research approaches – all underpinned by a global footprint and unprecedented access to today's healthcare stakeholders.

G-MED

G-Med is the largest global physicians only community, reaching over 1 million verified physicians from more than 120 countries and 100 specialties. G-MED medical crowdsourcing platform enables physicians from all over the world to talk real-world medicine, collaborate together to solve patient cases, and earn honorarium from surveys and market research.

G-Med's business solutions offer a unique digital bridge to connect life science companies and healthcare partners in order to drive physician awareness and gain deep insights about brand perceptions.