MEDICAL CROWDSOURCING

WHAT ARE PHYSICIANS COMMUNICATING DURING COVID-19?

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

Period: May 18th - July 3rd 2020

Wave 5

8 July 2020
Welcome to Wave 5 of our public report

Bringing you a regular pulse on what physicians around the globe are discussing about COVID-19 on the G-MED forum

Key themes covered in previous reports:

Wave 1
CV19 epidemiology – Government guidelines – Bracing for the CV19 ‘storm’ – Novel treatment approaches

Wave 2
In-depth CV19 overview – Need for PPE guidance – Acceptance of situation – Physicians sharing advice – Preparing for virtual care with apprehension

Wave 3
Off-label drug use for CV19 – Prevention narrative – PPE and testing rate fears – Importance of maintain distancing – Need for support from Government and Public on restrictions

Wave 4
Information overload – Mental health impact – Concern about lack of face-to-face patient contact

Current key themes/this report: Wave 5)

1. Discussion of treatment practices for both CV19 and non-CV19 patients
2. The lasting impact of the pandemic and protocol for managing patients in future
3. Hopes for vaccine development and the concerns this also brings
4. Physicians’ comfort with virtual learning and technology-driven care
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.

324 new posts analysed between May 18th – July 3 2020. Total CV19 posts are 2884 to date.

Physicians from the following 26 countries contributed to the posts:
Argentina, Belgium, Brazil, Canada, Chile, Colombia, Ecuador, France, Germany, Greece, Israel, Latvia, Lebanon, 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. 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.
The calm after the storm: Physicians’ conversations online are turning to the longer-term management of CV19

Amongst physicians in the G-MED community, conversations have moved beyond the high-alert emergency topics of PPE, ventilation and hospitalisations and moved into calmer territory, such as:

- Establishing treatment protocols for CV19 and non-CV19 patients
- Lasting effects of CV19 and specific population concerns
- Hopes (and concerns) around vaccination development
- Physicians’ increased comfort with virtual education

"most of the patients have been treated by primary care. If they have symptoms, we assume that they have Covid 19 since they are not tested unless they get worse. Paracetamol, isolation and almost daily telephone follow-up, especially in the second week, which is when they usually get worse.

Physician, Spain"
Physicians are recognising the impact of CV19 on specific patient groups

There is emerging discussion around temporary and longer-term symptoms that may or may not linked to CV19. One lasting side effect that has been linked is a high number of cases of hypokalaemia. However, in some cases, doctors worry they may be misaligning symptoms to CV19 as they are on high alert.

"I've had many Covid 19 patients with hypokaliemias"

Physician, France

As numbers of children having had CV19 rises, physicians start to consider how (if at all) the effect the virus has differs for children and infants vs. adults.

""Physician, Brazil

In paediatric patients, we have observed neither a better therapeutic response nor an increase in adverse events, although our n is small. In part, paediatric patients do not usually develop more severe conditions, and do not have associated heart disease that would increase the complications caused by SARSCoV-2.

Increased discussion around potential for foetal abnormalities and long-term effect on pregnancy, however conversations are limited to the anecdotal with physicians lacking a real view of risks to pregnant women and foetus.
There remains a growing concern about the patients who are being ‘left behind’ in the wake of CV19

- Physicians are working tirelessly to ensure a good standard of care for patients suffering from conditions, both chronic and acute, other than CV19. Despite their best efforts, there are worries amongst some in the community as to the impact on the quality of care they are able to offer during this time.

- Physicians admit it has become increasingly difficult to offer the level of care they see as ideal. The difficulty lies in the balance between risking the spread of CV19 between patients (by maintaining appointments) and risking patients' wellbeing, by delaying appointments and treatments. An additional worry is the fear of catching CV19 themselves, whilst in contact with patients.

The best possible treatment for the patient in given circumstances. Every intervention evaluated by risk and benefit ratio according to up to date knowledge that will change as the knowledge changes.

— Physician, Latvia

For safety reasons we must try to limit contact with the patient, but it is difficult: the patient should be visited and not always can be done remotely.

— Physician, Spain
In the G-MED community, we observe enthusiasm at the prospect of a CV19 vaccination on the horizon, seen particularly in countries that are currently struggling most with the pandemic, such as Brazil.

In USA and some European markets, there is a level of apprehension; with some doubts about it’s efficacy and some sentiments that the vaccine development may be overly expedited with economic interest at the forefront. Further to this, some physicians comment on the potential consequences if anti-vaccination groups spin the vaccination to look unsafe.

It will be interesting to see how these conversations develop as some markets, such as UK, come close to having a CV19 vaccine developed.

“I don’t think the vaccine solves everything, it may have to be changed everywhere like the seasonal flu”  
**Physician, Italy**

“We urgently need the vaccine for COVID-19. We should distribute the vaccine as soon as possible.”  
**Physician, Mexico**
When looking at the impact of CV19 on general vaccination behaviour, physicians on G-MED expect higher future uptake across vaccines

78% of physicians responding to our poll anticipate higher rates of general vaccination post COVID-19

For many physicians on the forum, COVID-19 will have a positive impact on the general rate of vaccinations in years to come. This impact is expected to be most felt in the uptake of flu vaccinations. However, many of the physicians who replied to this poll believed the rates of vaccination would likely trail off, since the behaviour will most likely be post-CV19 panic, rather than a fundamental change of belief.

Some of the physicians on the community are apprehensive about the potential impact anti-vaxxers may have on the positioning of the CV19 vaccine. Some of these physicians expect anti-vaxxers to equate expedited vaccination development with lower efficacy and safety, which could influence the wider public. On top of this, some fear what could happen to vaccination rates if the CV19 vaccine is later proven to be unsafe.

**SOURCE:** G-MED’s Global Physician Forum

**BASE:** Physicians opting into G-Med Physicians Only Community replying to this poll (n=629)
As the storm subsides, it is also apparent that doctors are engaging with virtual education opportunities…
Physicians have more opportunities to engage with virtual events, however, they miss the interactivity of in-person events.

**Fairly high uptake**
70% of physicians report having participated in a virtual conference (G-MED Global Physician Forum Poll)

**Missing interactivity**
"I prefer contact in person."
- Canada

**Increased exposure / ability to attend**
"It is a very good experience. I have been able to attend more conferences and listen to more diversity of experts."
- Chile

**Trying to make the best of a bad situation**
"Nothing can replace the human direct interaction, but during these circumstances we are obliged to interact virtually."
- Lebanon

**Virtual fatigue**
"Just as with other novel modes of communication, early on it takes some getting used to."
- US

**Sharing knowledge**
"It is good and beneficial and updating your knowledge at this time of COVID-19."
- Kuwait

**BASE:** Physicians opting into G-Med Physicians Only Community replying to this poll (n=335)
ASCO’s virtual conference: Almost a quarter of Oncologists prefer virtual conferences for convenience, however majority still struggle with aspects of it

Opinion on virtual format

- I strongly prefer virtual conferences: 23%
- It didn’t make so much difference for me, I was able to enjoy it fully as in the previous years: 6%
- I was able to enjoy it, but I miss the social and professional networking and other aspects: 36%
- I didn’t adapt well to the virtual conference and strongly prefer traditional conferences: 35%

Q. What are your thoughts on the virtual conference format?  
Base: n=95 (open community)

Physicians mentioned that virtual exhibits could be improved by making them more interactive:

- Provide short on-demand content
- Share more information about the exhibits’ benefits and features
- Find novel ways to engage online (e.g. gaming, VR)

Full ASCO report available for purchase
There is a sense of cautious optimism amongst physicians on the community

Summary learnings in this wave from the G-MED Community:

Physicians feel they have been ‘through the worst’ of the pandemic and have cautious optimism, specifically regarding a potential CV19 vaccine

CV19 is expected to increase general vaccination uptake – at least for the short-term future

Physicians are engaging with virtual learning opportunities, particularly those not treating CV19 with decreased caseloads
THANK YOU.

Reena Sangar
Head of Digital and Connected Health
Reena.Sangar@Ipsos.com

Jemma Reast
Senior Research Executive
Jemma.reast@Ipsos.com

Ilan Ben Ezri
CEO
Co-founder of GMED
ilan@g-med.com

Other contributors: Emma Rogers
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.