Dear Editor

Technology is quickly progressing; accordingly, social media, web, and mobile technologies are increasingly used by physicians and healthcare employers (1). Today, social networks, including Facebook, Twitter, and Instagram, are widely used by people from all different walks of life. Moreover, these increasingly popular social networks are used by the public, professionals, and medical students to acquire and share information (2). Based on studies in the United States, the prevalence rate of social network application was approximately 78% among the internet users in 2016 (1).

Smartphones and social networks are highly popular in developing countries similar to other parts of the world. Social networks have a huge impact on the perception of health system problems, acquisition and exchange of health-related information, and personal experience sharing. However, they can have significant effects on the spread of misinformation about disease outbreaks (1-3). Health system staff face many challenges in using social networks. Clinical photography plays an important role in medical practice by facilitating the determination of the patient’s state and their condition progression and treatment (3). Clinical photography is highly practiced in various medical specialties, such as dermatology, oncology, plastic surgery, pathology, orthopedics, and emergency medicine (4).

Ethics is defined as a discipline dealing with moral duties and obligations; in this regard, medical ethics is focused on the patient-doctor relationship (1, 3). Social media communication eliminates the geographical limitations of face-to-face encounters. Such media facilitate the exposure of individuals’ personal profiles to other anonymous users from other cultures, communities, and different walks of life as the members of the social network.

There are many concerns regarding social network privacy (3). In a study performed by MacDonald et al., it was indicated that 25% of young medical graduates who used Facebook did not activate the privacy options; therefore, their information was readily available to the wider public (4). In many cases, physicians use the clinical pictures of their patients in the social networks to advertise, show their abilities, and attract attention; therefore, they do not activate the privacy options. As a result, they could violate the professional boundary with their patients (for example, by posting the photos of their admitted patients without obtaining their permission).

In a study carried out by Erfanian et al. on social networking sites among the Iranian students during 2011-2012, it was shown that 22.5% of medical students used social networks. Therefore, they highly recommended to enhance the educational and cultural quality of these sites for more appropriate and optimal use of these media (5). Nonetheless, in 2018, the wide use of smartphones and social applications was reported among Iranian people. In the mentioned investigation, 71.3% of the people were Facebook and Instagram users based on the StatCount site (http://gs.statcounter.com/social-media-stats/all/iran). However, there is no training or ethical education for medical students or healthcare employers.

The majority of students and physicians usually use the clinical photographs of patients and share them without obtaining their informed consent or meeting the confidentiality terms because they are mostly unaware of ethical guidelines. The moral significance of obtaining informed consent from patients before sharing their clinical photography plays a decisive role in safeguarding personal autonomy. The clinical photographs of patients should not disclose the individual’s information; accordingly, they should respect patient’s privacy. In this regard, when sharing computed tomography and magnetic resonance images, the characteristics of the patients and the name of the magnetic resonance imaging center should remain confidential.

Based on Deneck et al., the protection of patients’ privacy and confidentiality is an issue of paramount importance and the availability of data and information can be useful in many settings while preventing data misuse (2). Finally, it seems essential to implement ethical education on the
rules of taking clinical photographs and radiographs and sharing them in social media during residency program or in medical education system since we are behind the rate of technological advancement in this area.

References