

Sleepless in times of COVID-19

An interview with social media crusader and digital health enthusiast Melvin Sanicas, MD

Raquel Billiones
Alexion Pharmaceuticals

Correspondence to:

Raquel Billiones
medical.writing@billiones.biz

Abstract

Melvin Sanicas, MD, is a physician, scientist, and medical communicator with a very strong social media presence. On top of his day job as medical director at Takeda Vaccines (Zurich, Switzerland), he does pro bono work for many not-for-profit organisations, including the WHO (as a digital health expert since 2019), the World Economic Forum, and TEDEd. In addition, he is a fellow of the Royal Society of Tropical Medicine and Hygiene, the Royal Society for Public Health, and the Royal Society of Arts. I am delighted to have interviewed Melvin for this issue of *Medical Writing* (MEW) on social media.

MEW: You have been active on social media since 2016 (long before COVID-19!). How did it start and what was the main motivation?

Melvin: I have been active in science communication and writing global health news articles and op-eds since January 2016. With more and more anti-science misinformation (false or inaccurate information) and disinformation (deliberate spread of incorrect information) on the internet and in social media, I felt there was a need to speak up. With encouragement from fellow scientists like Dr Peter Hotez (who were already actively speaking up for science), I got myself a Twitter account three years ago and started to simplify scientific news, debunk falsehoods, and engage scientists and science communication organisations. [**Note:** Peter Hotez is an American scientist, paediatrician, and

advocate in the fields of global health, vaccinology, and neglected tropical diseases. He is the author of several books, including *Vaccines Did Not Cause Rachel's Autism: My Journey as a Vaccine Scientist, Pediatrician, and Autism Dad*.]

MEW: You are active on several social media platforms. Do you have a favourite? What are the differences between these platforms?

Melvin: I am active on Facebook, Twitter, and LinkedIn. These platforms have slightly different audiences. Facebook is for family, friends, friends of friends, and primary/high school/college/university classmates. LinkedIn is mainly for your business and professional network, such as current and former colleagues. LinkedIn connects professionals while Facebook connects people in general. Twitter also connects everyone (unless you keep your Twitter account private), but the conversation on Twitter is here and now, timely, dynamic, and constantly changing. In Twitter, time is of the essence, not so much on accuracy – hence misinformation and disinformation travel faster on Twitter. For content less focused on timing, Facebook is a better platform. Twitter allows people to follow topics, people, and conversations that they find interesting. It is more about ideas than social connection. It really depends on the topic and the audience you are trying to reach. LinkedIn status posts can be up to 1,300 characters, Twitter has a 280-character limit, whereas Facebook allows you to write as long as you want. There must be a character limit, but I have not experienced being told that my post is too long. [**Note:** Melvin also contributed to past issues of MEW].^{1,2}

MEW: How has the COVID-19 pandemic affected your social media activities?

Melvin: Before COVID-19, I had over 2000 followers on LinkedIn and only 11,000 followers on Twitter. Both accounts grew over 300% since end of January 2020 due to the pandemic. Currently, I have 6,850 followers on LinkedIn

and 33,250 on Twitter. My followers include ministers of health, supranational organisations, scientific institutions, etc. In January 2021, I had 9,800 profile visits, 1,750 new followers, and 720,000 impressions.

New pathogens, including the novel coronavirus SARS-CoV-2, are accompanied by high levels of uncertainty. The public understandably wants answers and we see people turning to social media. One of my most liked tweets on the pandemic was featured by several news organisations and platforms like Vox.³ I was the first one to summarise different infectious diseases, their respective R_0 (R_0 naught/basic reproduction number), the case fatality rates and compare them with the novel coronavirus (as it was called in January 2020).

MEW: World leaders, celebrities, health experts, follow you on social media and repost/reshare/retweet you. What was for you, the most significant and memorable retweet?

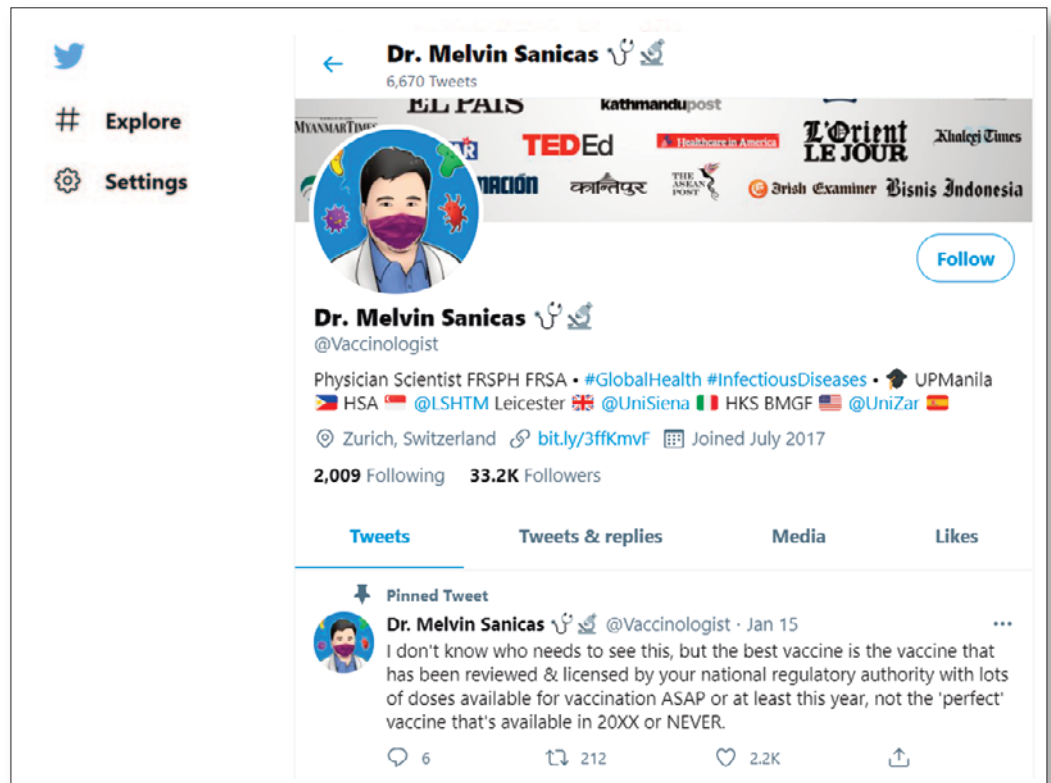
Melvin: My most “memorable” retweets were from the actor and UN Sustainable Development Goals advocate Forest Whitaker, as well as Chelsea Clinton, and the Liverpool F.C. goalkeeper Alisson Becker.

MEW: In addition to social media, you are also a TED educator and contribute content to the World Economic Forum. Can you tell us more about these activities?

Melvin: I have created some online lessons (on tuberculosis, influenza, meningitis)⁴⁻⁶ for TEDEd. TEDEd aims to celebrate ideas and knowledge, the sharing of different topics to teachers and students around the world. TEDEd is currently an award-winning education platform that serves millions of teachers and students globally. With the current pandemic, I have also supported lessons on coronavirus, ventilators, and vaccine development.

The World Economic Forum's Agenda takes

some of the world's most important and sometimes complex issues and makes them accessible to a broader audience. The blog is visited by over 5 million people every month. I have written 18 op-eds⁷ for [the World Economic Forum] on various topics including breastfeeding, immunisation, rabies, antimicrobial resistance, and fake news.



MEW: In 2019, you were designated by the WHO as one of their digital health experts. Can you elaborate more on this?

Melvin: In May 2019, WHO established a global multi-disciplinary technical group to advise them on issues related to digital health. The Digital Health Department aims to harness the power of digital health technologies and steer developments to contribute to the attainment of all people to the highest level of health through the General Programme of Work triple billion goals and Sustainable Development Goal 3 [Ensure healthy lives and promote well-being for all at all ages]. To support this work, WHO also established a roster of experts in various areas related to digital health.

MEW: You spend hours of your free time doing research and posting on social media. You are actively campaigning against disinformation and misinformation. All for voluntary causes. How do you manage your time?

Melvin: I don't sleep much on weekdays.

MEW: Why is it important for scientists and medical communicators to be active on social media? What are the risks and the benefits?

Melvin: Now more than ever before, the world needs more scientists who can translate their expertise into effective communication on global health issues. It is our responsibility as public health experts, scientists, and allies of scientists to speak up (in any way we can) with interviews,

op-eds, podcasts, blogs, or just our own immediate social circles through our personal social media posts. There is an important role for physicians, scientists, and public health specialists as advocates for society as a whole because when there is a void of accurate scientific-based information, what fills the vacuum? Bots, trolls, and conspiracy theorists spreading seeds of doubt and misinformation that may have dangerous consequences.

And social media misinformation and disinformation will only get worse unless people develop some critical media literacy skills.

Conflicts of interest

The interviewer and interviewee are employed by the pharmaceutical industry.

Disclaimer

The opinions expressed in this article are their own and do not necessarily represent those of their employers or EMWA.

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Author Information

Raquel Billiones is Editor-in-Chief of *Medical Writing*.