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## In Focus

# Web Logs Offer Viewers a Rare Glimpse Into the World of Medicine

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## Introduction

What if you could read the private journals of doctors, nurses, and other hospital workers, complete with confessions of medical mistakes, anecdotes about difficult patients, or irate missives about administrators? How would you like to know what other healthcare workers are thinking about today's headlines or the latest medical controversy? Would you be willing to share your own thoughts or experiences for anyone else to read?

Such interactions may seem unimaginable in the world of medicine where "open communication" remains an elusive goal. Yet every day, hundreds of healthcare professionals and patients engage in just such frank exchanges in a virtual underground of medical "blogs." The word "blog" is short for "Web log," which essentially is a personal journal posted on the Internet.

Some bloggers remain anonymous so they can vent more freely, although many identities are only thinly cloaked. Others are known and respected, including faculty at medical schools and practicing physicians, who blend humor with thoughtful commentaries about the world of medicine and beyond.

Although no one knows how many medical blogs currently exist, a tour around the Web turned up at least 100, with names that hint at the content the reader is likely to find. "[A Chance to Cut is a Chance to Cure](#)" is the aptly named blog of a general surgeon; "[Trust Me, I'm a Doctor](#)" offers critiques of newly published clinical findings; and a retired urologist shares her opinions on "[The Hormone Diva Speaks!](#)"

A recent posting on the well-read "[DB's Medical Rants](#)" blog addressed an article from the *New York Times* about doctors who don't spend enough time listening to their patients. "*Physicians, try allowing the patient to tell his/her entire story,*" writes "rcentor," who, most blog aficionados know, is a medical professor in Alabama. "*It really does not take that long, I know, because I have done it. And amazingly, I generally learn more from their story than my questions ... Our questions should clarify the story, add flesh to the bones, help achieve a fuller tale. Perhaps we should restudy Socrates, and his question-asking skills.*"

## A Diary for Public Viewing

A variety of Web sites allow individuals to create their own blogs for free with minimal technical expertise. Bloggers are free to post any information they want, as often as they want. Many choose to "blink" to other blogs, providing links that direct readers to similar sites. Some blogs are highly sophisticated, with complex linking systems, archives, and computer code descriptions. Many, however, are nothing more than a simple diary exhibited for the world to see.

*"There's always a point in the night on call, no matter how tired you are, that you can start to see the light at the end of the tunnel,"* writes Michelle Au on her blog, "theunderweardrawer." *"I relish that moment that the first resident walks into work that morning that I'm post-call. There's that feeling that finally, there's someone else here to take some responsibility."*

Dr. Au is a pediatrics resident in New York City who also produces a cult comic series, "[Scutmonkey](#)," which is accessible on her blog. In fact, she even sells merchandise sporting her irreverent parodies of life in medical training. Her blog is

popular with medical students and residents, but she also has drawn sharp criticism, a risk a blogger like Dr. Au takes when she exposes her private thoughts to an unknown audience. A recent rebuke from a reader prompted 22 replies from other readers, all offering support for her outspoken discourse.

Although such exchanges are made possible by software that allows readers to comment on others' sites, the true art of blogging is more an individual exercise.

"It's like parallel play for children," explains Jacob Reider, MD, considered a founding father of medical blogs. "A weblog is not a conversation; it's much more like a monologue."

Dr. Reider, an Associate Dean and Assistant Professor of Family Medicine at Albany Medical College in New York, has been blogging since late 1999, when there were only a handful of sites devoted to medical issues. His main interest is the educational value of these sites, and he uses his own blog ([www.docnotes.net](http://www.docnotes.net)) to document his "self education," keeping detailed notes about patients and things he learns in the practice of medicine.

## An Educational Tool

In fact, students in his program are required to post "essays" on a school blog while they are at remote training locations. Dr. Reider also believes medical blogs could be a useful tool in continuing medical education (CME), though many of them currently do not meet strict CME criteria.

Dr. Reider oversees a separate site that compiles links to as many medical blogs as he can find, and he is constantly adding more. Some sites are well known in the blogging world and are mentioned on most of the other sites. But many blogs, especially new ones, are discovered each day by avid readers.

Dr. Reider calls the more personal journals "Doogie Howser diaries," named after the 1990s-era television show about a precocious medical student by that name. Although those blogs may not contribute much to the practice of medicine, he said, "to some degree they enhance the transparency of medicine." Patients reading those blogs see a human side of doctors not readily apparent in the office, and other medical professionals feel a close connection with each other that often is absent in practice.

Ideally, medical blogs may be able to foster greater understanding among different branches of the medical world and with patients, though even the most ardent advocates recognize their limitations, too.

"I guess I would stop short of saying that this is going to revolutionize things or enhance communication," said Dr. Reider. "If you can't communicate with the nurse down the hall, a weblog won't help."

However, some bloggers do find that the activity fosters a sense of community.

"I love hearing what it's like from the patient's point of view," said "geena," a critical care nurse in northern California who anonymously operates the site: <http://www.codeblog.com>. She often writes about her experiences at work, which readers describe as "heart wrenching." She also answers questions that patients post on her site.

"I'm continually amazed at how confusing it is for patients," she said. "My prime motivation (for writing) is educating the public."

Many bloggers say they write primarily for the cathartic value, although having an audience clearly is important otherwise they wouldn't post their thoughts on the Internet.

"To be honest, if I didn't think someone was reading it, it would be hard to make myself do this," said Dr. Alice Dick, an internist better known by her pen name, "feetfirst" on her web log, <http://www.feetfirst.blogspot.com>. She finds that the discipline required in posting regularly on her blog has helped make her a better writer, which was her primary goal when she started, she said.

Whatever their motivations for writing, bloggers share a respect for each other and for the process that has the potential to inform, amuse, provoke, and promote understanding for a virtually unbounded audience.

In a recent posting, Dr. Dick wrote about a dying patient who had multiple diseases and who was a survivor of the Holocaust.

*"I keep thinking of this man who fought so hard to survive," she writes, "whose body is now betraying him and falling apart. . . . He has his daughter, and his caregiver, so I suppose things could be worse; but I can't do much now except ensure him a comfortable death. I will do that. I promised his daughter."*

Less than 24 hours later, she added this post: *"The gentleman I told you about yesterday died at five o'clock this morning. It's probably the best way it could have happened."*

To access any of the sites mentioned in this article, go to [www.medlogs.com](http://www.medlogs.com), which offers the most comprehensive listing of medical blogs available.

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Disclosure: Christine Wiebe has no significant financial interests or relationships to disclose.

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