Social Networking Among Upper Extremity Patients

To the Editor:

I read with great interest the article titled “Social Networking Among Upper Extremity Patients” in the May 2010 issue of the Journal. In this paper, the authors estimated that “more than one-third of surveyed upper extremity patients in their clinic (170/450, 38%) currently use social networking sites.”

With this in mind, they were quite clever in their initiative and should be congratulated for investigating the role of social networking in surgical patients. Furthermore, I feel compelled to relate one of my life-changing experiences with hope that further studies like this one by Dr. Rozental will continue.

As many of us know, the promising subspecialty of composite tissue allotransplantation, mainly hand and face transplantation, will soon become a clinical standard. In 2008, I started my fellowship training in plastic surgery at the Cleveland Clinic (Cleveland, OH). As time went by, I began participating, under the leadership of Dr. Maria Siemionow, as project coordinator for the face transplant project. We all know that physician–patient communication in the setting of life-altering surgery such as limb replantation or brachial plexus reconstruction can be complicated and time consuming, given the patient’s long road to recovery; therefore, one can easily imagine how this was exceptionally challenging, given its unprecedented status.

In short, following the landmark surgery in December 2008, the rest of the team and I spent numerous hours throughout the day and night on the phone, communicating to a variety of people, including the patient’s loved ones, the dedicated team of physicians and surgeons, and the well-appreciated ancillary staff involved at the Clinic. Thus, in retrospect, it would have been exceptionally helpful to have had a secure “web-based initiative” as described here available for means of communication. As hand and face transplantation becomes more and more popular around the United States, many other surgeons will find themselves in a similar setting.

Therefore, the purpose of this letter is to support wholeheartedly the notion that social networking and/or other secure, instantaneous, web-based initiatives should be developed in the near future. As stated in their enlightening article, today’s “social networkers are younger, more educated, and more likely to be employed.” With this, one can only hope that this younger generation at hand (no pun intended) will not only produce brilliant hand and face transplant surgeons but will also produce medically oriented software engineers. Perhaps, with this letter in mind, one or two of these young, inspired, technology-savvy gurus will strive to improve modern-day physician–patient communication.

Chad R. Gordon, DO
Division of Plastic & Reconstructive Surgery
Massachusetts General Hospital
Harvard Medical School
Boston, MA
doi:10.1016/j.jhsa.2010.11.018

REFERENCES