



SDI Review Form 1.6

Journal Name:	British Journal of Applied Science & Technology
Manuscript Number:	2014_BJAST_12750
Title of the Manuscript:	Medicine and social media – ethical challenges of the 21st century
Type of the Article	Review Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



SDI Review Form 1.6

PART 1: Review Comments

	Reviewer's comment	Author's comment <i>(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
<u>Compulsory</u> REVISION comments	1) Given the amount of literature on this topic, I find the study to be lacking in a number of areas. It is a bare discussion of only a few issues that are not discussed very thoroughly. It misses being either a general overview or targeted discussion. This is due in part to the methodological decisions made by the authors. The methods section should therefore be expanded significantly. The following aspects should be addressed: a) Search interface - why did the authors only search in PubMed? Insights relevant to healthcare can also be gained from internet research in other fields, which are often further in their thinking on these types of issues. Also, why such a standard approach to the topic? Many reviews of web-related issues generally also use web searches and so-called gray literature such as policy documents. A number of leading institutions and professional have developed social media policies to address the blind spots that professionals might have in using social media. The author(s) refer(s) to a few in the section on 'guidelines', but it seems that these were picked at random, rather than in a structured manner. Were they returned in the PubMed search results or collected separately? If the latter, what was the search	The methodology section was re-written and completed. A new search was done to confirm if all the relevant articles were used. Policy documents were all analyzed (they were all in Pubmed at the time I submitted the article). However, since a few months have passed since the last research, a new research was conducted and some new policies were added to the discussion section. Other databases were used to confirm if all the relevant articles were used. A few new references were added. The results section was re-written. The discussion section was re-written. Thank you for your feedback.



SDI Review Form 1.6

	process and what were the inclusion criteria? b) Search terms - why did the author(s) not search for 'web 2.0' (the precursor term to social media and addressing many of the same applications), its derivative 'health 2.0' (making it specific to health care), individual types of applications (e.g. blogs, media sharing sites, etc), and other named applications than Facebook (Twitter, YouTube – much has been written on YouTube-specific ethical issues and attention for Twitter is growing!)? To cover this area thoroughly, the potential search terms should be exhausted, giving confidence of the validity of the search (i.e. that no crucial literature was missed). c) Search parameters - what is the reason for limiting the articles to 2008 (not necessarily an illogical choice, but should be justified with proper argumentation)? d) Initial versus utilized search results and justification of exclusion - How many initial returns were there? How many of these were included c.q. excluded, and how was this decision made (exclusion criteria)? There is no evidence of consistency in the approach and while it may have been so, this cannot be assessed from the information given. 2) The structure of the results section is not logical and there does not seem to be much 'discussion', as the section heading suggests. It begins with accessibility, and then proceeds to connectivity and privacy,	
--	--	--



SDI Review Form 1.6

	followed by guidelines. In the first section it is unclear what the ethical and professionalism issues are, while in the last, seemingly more practical section, a myriad of issues are raised. The relationship between the topics raised in these sections also remains implicit, but should be explicated in the text. The author should restructure the results section along thematic lines and build more coherency in the text by outlining the order of topics at the beginning of the section and then adding writing bridges within and between subsections to connect the various topics better. Parallelism in sub-headings (preferably <i>per ethical/professional content theme</i> - so, no heading called 'guidelines') would also help the reader gain a better overview of the issues at stake. 3) I miss the presence of any kind of framework of ethical assessment. As such, terms such as confidentiality and privacy become conflated, although in ethical and legal circles these terms are used separately, rather than synonymously! 4) Is it possible to make a separate discussion section where the author(s) make(s) more effort to translate the insights from literature into more practical points (i.e.: move 3.4 out of the results, make it its own section, and expand it)? 5) When writing, please remember that paragraphs should always have at least three sentences. Now	
--	--	--



SDI Review Form 1.6

	there are a number of 'one-liners' thrown in, between other paragraphs. This makes the writing very choppy and does not do justice to the issue being raised. In my experience, such random sentences are usually an indication that an author has difficulty making coherent choices regarding content (i.e. what to leave out) or knowing how to argue the relevance of a point or how to link it to other points. If there is nothing more to say on these individual points they should not be included; if they are included, they should be worked out more thoroughly. One example is the discussion of who has access to a physician's statements, p 3 lines 138 ff. What are the ethical consequences (and there is more than just the issue of confidentiality!) of the issue named here and then explain what this means for practice. Working such thoughts out further would apply to all of the single sentences thrown into the text.	
Minor REVISION comments	None	
Optional/General comments	None	