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The birth of @ISNeducation



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he challenge to present information accurately, concisely, and effectively in today's scientific environment is, in certain ways, more difficult than it was at any time in the past. However, as nephrology professionals and educators, this challenge must be faced head on. Generations of educators have illuminated the way forward, and no one better exemplifies this journey than Burton Rose. It is safe to believe that nearly every nephrologist has, in some manner, come into contact with his teachings or at least has heard of him. What people are unlikely to know is that Rose could be considered one of the founding figures of today's nephrology social media community. Nearly 45 years ago and as a young nephrology fellow, Rose set off on a journey that many of us continue to travel today. In 1971, long before Twitter, smartphones, laptops, and commercially available Internet, Rose began the arduous task of summarizing complex concepts in nephrology.¹ For the next 4 decades, he and many other educators have continued this mission of presenting complex concepts/ideas into smaller and easier-to-understand packets of information. Today, that challenge remains but exists in a rapidly changing and increasingly complex scientific environment. To meet the challenge and continue the mission that generations of educators have pursued, the International Society of Nephrology (ISN) assembled the first-in-kind Social Media Task Force (SMTF).

For some time, the ISN had wanted to incorporate social media into its educational platform. Like Pereira and others, the ISN leadership had correctly identified the value of social media as a mechanism to improve health care delivery and educate learners.² Still, operationalizing a coordinated social media strategy in today's dynamic environment would be a challenge in and of itself. Thus, the ISN commissioned the SMTF to devise a cogent and *de novo* strategy to effectively share accurate and concise medical information with the global nephrology community. After numerous beta tests and revisions, the final strategy would then be executed during the 2017 World Congress of Nephrology (WCN). As the ISN's premier educational event, the WCN 2017 was a high-stakes 4-day conference in which to launch the new strategy. Rather than select a smaller, secondary, and less risky conference, the ISN concluded that the sheer amount of information presented at WCN 2017 necessitated a unique method for sharing. Factoring the risks and the stakes with the needs made the WCN 2017 the best venue to operationalize the new SMTF strategy.

The SMTF crafted a 6-part plan that it believed would make the overall strategy successful, and it met these challenges (Figure 1). The first component of the strategy began with the makeup of the SMTF itself. The team needed passionate individuals whose belief in the mission was strong. In fact, social media expertise was not a factor in recruitment. The latter is a skill that can be taught; the former is an intrinsic trait. There were other factors that we ignored by design, including social media reputation/popularity, previous social mediarelated accomplishments/projects, and current social media-based affiliations. Thus, our 30-day recruitment period began in October 2016 in which we took an unorthodox approach and searched for individuals within our applicant pool who met only 1 criterion. At the end of the recruitment period, we made 21 offers to applicants and had a 100% acceptance rate (Figure 2).

Each member of the team was either aware of or had personal experience with presenters who expressly prohibited any social media activity of their sessions. Stories of faculty and conference organizers publicly warning individuals to not use social media to share knowledge diffused through our initial discussions. Some were apprehensive that such prohibitions would spread through the WCN 2017. To mitigate these concerns, we implemented the second component and opened a private e-mail dialogue between the SMTF and each faculty member whose session we selected to broadcast through social media. We detailed our social media activity during their respective session(s) and offered each faculty member an opportunity to discuss our

"Fresenius Medical Care"



Figure 1 | Six innovations introduced into the social media coverage of the 2017 World Congress of Nephrology by the International Society of Nephrology Social Media Task Force.

Belgrade, Belgrade, Serbia; ¹⁶IRCCS Arcispedale S. Maria Nuova, Reggio Emilia, Italy; ¹⁷Apollo Hospital, Navi Mumbai, India; ¹⁸Good Samaritan Medical Center, Brockton, Massachusetts, USA; ¹⁹Instituto Nacional de Ciencias Médicas y Nutrición Salvador Zubirán, Mexico City, Mexico; ²⁰Kocaeli Community Hospital, Kocaeli, Turkey; ²¹National Institute of Health El Salvador, San Salvador, El Salvador; ²²Barts Health NHS Trust. London, UK; ²³Max Healthcare,

plans. Of the 149 faculty members whom we approached, only 1 rejected our plans (http://twitter.com/WCN2017/statuses/8560961657 91539200).

With the SMTF team in place, sessions for social media coverage selected, and 99% of select WCN 2017 faculty agreeing with our efforts, we executed the third component and petitioned the leaders of the ISN. Our team needed a physical space that would serve multiple social media purposes. We requested a central location where we could execute our assigned social media tasks, share best practices with one another, analyze various metrics to make data-driven decisions about our strategy, and interact with and educate WCN 2017 attendees interested in social media. Our petition and the immediate approval by ISN leadership resulted in the creation of the ISN SMTF Social Media Genius Bar, the first such feature found in any major nephrology scientific meeting (https://twitter. com/ISNeducation/status/85110032317123788 9). The Genius Bar also served as an on-site recruitment tool for both the ISN and the SMTF, with our 22nd team member officially joining the team after multiple visits to the Bar!



Figure 2 | Members of the 2016-2017 International Society of Nephrology Social Media Task Force.

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While adopting the mission that a generation of nephrology educators embraced, we realized that there would be 2 key differences. Rose's initial efforts led to a 36-page summary of his syllabus.¹ It became clear to us that we would not be afforded the same luxury. Rather, our efforts would be severely restricted by the technology of our time. Twitter's key feature of constraining messages to no more than 140 characters would certainly have an impact on our ability to share complex medical information effectively. We questioned whether the succinctness of tweeting would come at the expense of accuracy and effectiveness. To resolve this dilemma, we decided to capture the scientific content from the WCN 2017 in its original form. By broadcasting video interviews of faculty speakers, award winners, poster presenters, and general attendees, we could increase the density of scientific information in each tweet. Moreover, a first-person account of the science presented at WCN 2017 would increase the effectiveness at which that information was shared. Thus, we added live video interviewing as the fourth component to our strategy (https://twitter.com/ i/moments/855861241096544256 and https:// twitter.com/i/moments/856082060590456832). We operationalized this component by using the Social Media Genius Bar and shattered all records to date by conducting 55 interviews during the WCN 2017 (http://twitter.com/ISNkidneycare/ statuses/856640144215949312).

Another luxury that the SMTF did not have was time. Today's technology is often touted for its instantaneous and rapid pace of information delivery. This feature, however, makes it difficult for many people to keep up. Even social media–savvy nephrologists, who may pride themselves on "high-frequency" tweeting, have had difficulty absorbing scientific information at such a high frequency. Couple this challenge with the comprehensive scientific agenda at the WCN 2017, and we feared that speed could become the enemy of effective communication. Admittedly the SMTF could not "solve" this problem because the speed at which information would be transmitted is a central feature of the technology that we would use. To mitigate the potential deleterious effect that speed would have on effectiveness, we implemented real-time archiving. As part of the fifth component of the strategy, the SMTF would organize and categorize all tweets into a chronologically ordered summary within minutes after the completion of a scientific session. In this way, the reader would not have to search through a plethora of disorganized and unrelated tweets to find specific information. Instead, the reader would have a temporally ordered collection of tweets that pertained to a particular topic (https://twitter.com/i/ moments/856888872508305408).

It took the SMTF 5 months to brainstorm ideas, formulate a detailed strategy, beta-test each component within that strategy, and subsequently revise each component to ensure the maximum amount of success. A final question remained: how would we define and measure success? To the best of our knowledge, no previous nephrology society/organization had executed a coordinated and structured social media campaign before. We had neither data from previous similar efforts with which we could compare our activities nor an established set of metrics by which success would be defined. Despite the novelty of social media analytics, we believed that data had to be collected so that, at a minimum, we could establish a baseline on which future social media activities could be compared (Figure 3). Thus, we partnered with NOD Analytics to add a data analytics component to our strategy (goo.gl/mfziXG).

There is an old adage that the more things change, the more they stay the same. Certainly the times have dramatically changed since 1971. The field of nephrology has welcomed an increasing number of educators from many nations with varying backgrounds and education levels. The technology that educators use today gives them an unprecedented reach. Indeed, nephrology itself is more complex as research findings have raised the threshold of what is known. In the midst of these changes is an immutable mission to effectively educate individuals through concise and accurate means. After evaluating the work of the SMTF and the subsequent reviews, the ISN decided to adopt this mission as a core feature of its educational platform (https://twitter.com/i/ moments/857174210254442496). The Social Media Task Force is now the @ISNeducation Social Media Team and a component of the ISN Education Team. Composed of both original SMTF members and new educators from around the world, @ISNeducation will



Figure 3 | Twitter activity by (a) participant origin and (b) advanced metrics from the 2017 World Congress of Nephrology social media campaign. Data from 21–25 April 2017 (inclusive). (a) Numbers represent all tweets authored by all participants from a specific nation. (b) Green: official ISN accounts (@ISNkidneyCare and @ISNeducation). Red: all other participants.



Figure 4 | Members of the 2017-2018 @ISNeducation social media professional team.

continue this mission through various novel social media applications (Figure 4). Inspired by Weening's words, @ISNeducation will bring equity in learning to the global community of nephrologists through infographics of clinical trials, webinars on hot topics, highlighting videos of fundamental concepts, near real-time forum discussions of clinical questions, and more.³ If you share such a similar passion, join our team by visiting https://twitter.com/ ISNeducation.

DISCLOSURE

TD is the owner of NOD Analytics. All the other authors declared no competing interests.

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