This study by Fijačko et al. explores the impact of US football player Damar Hamlin’s cardiac event and resuscitation live on national broadcast through the lens of social media. The purpose was to evaluate whether witnessing such an event was associated with more interest in cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) use and provide insight on emotions expressed. Using specific hashtags associated with the event, Fijačko et al. analyzed the sentiment of posts and classified language using the National Research Council of Canada's World-Emotion Association Lexicon to analyze 8 emotions. Fijačko et al. found the most common sentiment was anticipation, followed by trust, fear, joy, surprise, sadness, anger, and disgust. One of the most common words posted was pray, and on day 1, one of the most common sentiments was anticipation. On day 2, sentiment changed to an increase of anger. Only 1% of posts included the hashtags #CPR, #AED, or #SuddenCardiacArrest, and this decreased in the second 24 hours. Fijačko et al. suggest this was a missed opportunity for public health education during and after the event on the utility of CPR and AED use.

The events that occurred during this football game startled many viewers, as the news traveled rapidly of the dramatic on-air resuscitation that occurred. As we have observed in the last few years during the COVID-19 pandemic, the power of messaging on traditional and social media can directly influence public sentiment and the framing of the narrative, as well as the public’s perception and understanding of public health events. Social media platforms have been a powerful force for spreading COVID-19 information and disinformation. The last several years have elicited several case studies on the influence these types of platforms have had on our lives and how social media has seemingly become a vessel that can be used to disseminate science and data, but also misinformation and lies. Fijačko et al. felt an event such as this could be used to provide effective public health messaging in a more global way. There is some truth to this sentiment, and there are many who continue to work in that space. However, the challenge remains how to ensure the messaging that is being disseminated is factual and how to evaluate the impact of this messaging.

Although not described by Fijačko et al., there was also misinformation spread surrounding the event, such as the fabricated national news headline claiming the cardiac arrest was due to a vaccine injury. These types of disinformation also influence the perceptions of individuals engaging with social media and traditional media. The blurring of lines of truth and fiction on social media becomes a challenge when trying to engage with the public and provide messaging and ensure the information being disseminated is factual and evidence based. Leveraging social media and traditional media to accomplish better public health awareness could be incredibly impactful for our nation’s health, and there are many individuals and organizations who do provide this service by consistently combatting misinformation. Unfortunately, the concern that occurs with the evolution of our social media platforms is the ability to selectively provide amplification to those who disseminate misinformation. The recent disruptions occurring with the transition of ownership of Twitter exemplify this issue. Systems that had previously been implemented to monitor and address disinformation and misinformation campaigns, such as account with blue checkmarks to verify medical experts, were replaced with a fee-for-service checkmark available to anyone willing to pay. The ensuing and continued confusion over what is factual, what is a lie, which accounts are sharing verified information, and which are sharing information for personal gain or to stoke the flames of...
misinformation and chaos, became even more difficult to disentangle. Moving forward, with the removal of some safeguards against disseminating misinformation, social media platforms may become a more difficult landscape to navigate and provide effective public health messaging. And with some health care workers attempting to use these platforms to push their own agendas, it can become even more challenging to create effective public health messaging campaigns when the misinformation is sometimes coming from within our own house.

Traditional medical school training has not typically included education on public health messaging using innovative pathways, such as social media engagement and initiatives. With the rapid dissemination of misinformation that can occur on these platforms, as seen during this national event witnessed by millions, the need to provide education on incorporating these types of skills into health care workers’ tool belts cannot be emphasized enough. There are effective strategies that can be used to amplify evidence-based information, fight misinformation, and create effective public health campaigns.

It is imperative that we as a health care community continue to provide training and support to others on how to effectively use these platforms to disseminate evidence-based information. But to do so, we must invest in this type of work and make it a priority. Unlike the days before social media, our patients and communities are receiving and distributing health information online, and if we do not work to engage in the spaces where our patients are, we are doing them and our communities a disservice.

Along with the need to educate on how to effectively use these platforms for public health messaging, another key point to further investigate is whether the analysis of specific chosen hashtags did indeed reflect broader perspectives. Fijačko and colleagues felt that this was a missed opportunity for public health education during a national event. But it is also possible the analysis of specific hashtags, such as #CPR and #AED, in the immediate aftermath may not show the broader influence of the online dialogue after the initial shock. After the event, there were examples of the collective outcomes associated with Mr Hamlin’s cardiac event, with a national increase in the dialogue surrounding cardiac arrest and resuscitation, as can be seen by data reported by National Public Radio and the American Heart Association. There was an increase in urgency to get AEDs in schools, and the American Heart Association reported a 620% increase in the page views to hands-only CPR pages. Looking at these types of examples of outcomes, the question remains, is identifying a few hashtags the best way to assess the nation’s response to this event?

Social media is everywhere and has a direct influence on how many people receive their news, health information, and interact with the world. Events, such as the cardiac event Mr Hamlin experienced on national television, re-emphasize the power of our words and the need for effective strategies and education on how to most effectively use these platforms to disseminate accurate information and the need to find ways to assess the impact of these types of messaging campaigns.

**ARTICLE INFORMATION**


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**REFERENCES**


