


INTRODUCTION

- ❖ Internet is the first source of medical information for patients with concerns about their disease
- ❖ YouTube videos for rotator cuff repair (RCR) cover a broad spectrum from patient testimonies to educational videos
- ❖ Limited information is available on quality and content of YouTube videos for exercises post RCR

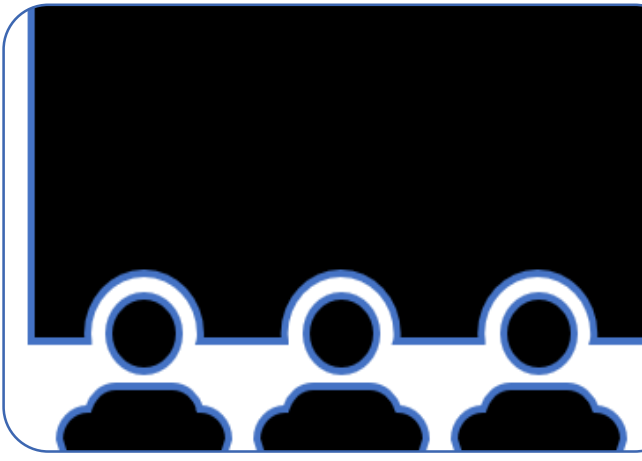
OBJECTIVES

- ❖ To analyse the content and quality of YouTube videos on:-
 - ✓ **Exercise content of videos:** RCR exercise specific checklist
 - ✓ **Credibility of information:** JAMA benchmark criteria
 - ✓ **Quality of audio-visual (AV) material:** PEMAT-AV tool
 - ✓ **Overall quality of the video:** Global Quality Scale

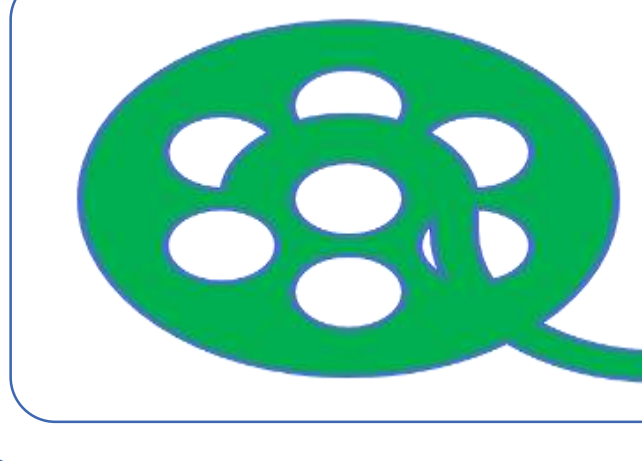
METHODS




YouTube search using standard filters
(Date of upload, duration, type and features)



5 videos selected based on highest view ratio



Analyzed by two independent reviewers (NP,GS)



Discrepancies addressed by third reviewer (KV)

Video Attributes	Tool
Credibility of information	JAMA criteria (0-4)
Understandability and actionability of AV Material	PEMAT -AV Tool (17 criteria) 0- Agree 1- Disagree
RCR specific exercise content	Self-developed RCR exercise checklist (0-14)
Overall quality of video	Global Quality Scale (1-5)

Data analysis

RESULTS

Table 1: Characteristics of included videos	
	Median(IQR)
Number of views	70,000 (53917, 418634.5)
Duration (min)	9.28 (4.34, 12.88)
Uploaded by:(n)	
Chiropractor	1
Physiotherapists	2
Orthopaedic surgeons	2
Language (n)	
English	5
JAMA criteria	3
PEMAT-AV (%)	
Understandability	57.68 (49.99, 76.91)
Actionability	75
RCR specific score	7 (5.37, 8.5)
GQS Score	3.5 (3,4)

Table 2: Analysis of the exercise content of the videos					
	Video				
	A	B	C	D	E
Phase-wise movement considerations	1	2	1	2	0
Importance of exercise	1	2	1	1	0
Equipment required	2	2	2	2	0
Exercise dosage	1	2	1	2	0
Progression criteria	1	1	1	2	0
Pain relieving methods/adjuncts	0	0	0	2	0
Criteria for termination	0	0	0	1	0

0

Not Mentioned

1

Partially Mentioned

2

Adequately Mentioned

DISCUSSION

- ❖ Videos lacked in terms of attribution of depicted information, designing and use of visual aids
- ❖ Information on dosage, progression, termination and adjuncts to facilitate exercise was inadequate
- ❖ Poor quality videos were also highly viewed

CONCLUSION

- ❖ The analysed YouTube videos on exercises post RCR were of low to moderate quality in terms of understandability, actionability and content of exercises

