

Original article

Dentists' Perspectives on the Influence of Social Media on Patients' Decisions to Seek Aesthetic Dental Treatments: A Cross-Sectional Online Survey

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Corresponding email. seh124am@gmail.com**Abstract**

Social media has become an influential source of health-related information and increasingly affects patients' awareness, expectations, and decision-making regarding aesthetic dental treatments. While previous studies have primarily examined patients' perspectives, limited evidence is available regarding dentists' perceptions of how social media influences clinical practice and patient behavior. This study aimed to investigate dentists' perspectives on the influence of social media on patients' decisions to seek aesthetic dental treatments, with particular emphasis on treatment preferences, patient expectations, consultation patterns, and challenges encountered during clinical practice. A cross-sectional online questionnaire-based study was conducted among 215 practicing dentists from different practice settings. The questionnaire collected demographic information and assessed dentists' perceptions regarding the impact of social media on aesthetic dental treatment decisions, commonly requested procedures, perceived benefits, and associated clinical challenges. Descriptive statistics were used to summarize the data, while Pearson's chi-square test was performed to examine associations between demographic characteristics and dentists' perceptions. Statistical significance was established at $p < 0.05$. Among the 215 respondents, 56.3% were female, and 41.9% were aged 31–40 years. Most dentists (82.3%) agreed that social media has increased patients' interest in aesthetic dental treatments, while 74.4% reported that patients frequently referred to social media during consultations. In addition, 68.8% believed that social media significantly influenced patients' treatment decisions. Tooth whitening (72.6%), porcelain veneers (65.1%), and clear aligners (52.1%) were the procedures most frequently requested following exposure to social media. The most commonly reported challenges included unrealistic patient expectations (76.7%), requests for unnecessary aesthetic procedures (61.9%), and misinformation obtained through social media (58.6%). Significant associations were observed between years of clinical experience and perceptions of social media influence on treatment decisions ($\chi^2 = 8.42$, $p = 0.015$) and between practice setting and reports of unrealistic patient expectations ($\chi^2 = 9.31$, $p = 0.025$). Social media has become a major factor influencing patients' interest in aesthetic dentistry, treatment preferences, and expectations. Although digital platforms provide valuable opportunities for patient education and professional communication, they also contribute to unrealistic expectations and misinformation that present challenges for clinical practice. Strengthening evidence-based communication and promoting the ethical use of social media may improve patient education, support informed decision-making, and enhance the quality of aesthetic dental care.

Keywords: Aesthetic Dentistry, Social Media, Cosmetic Dentistry, Patient Decision-Making.**Introduction**

The demand for aesthetic dental treatments has increased substantially over the past decade, reflecting growing public interest in improving dental appearance and smile aesthetics. Advances in adhesive dentistry, digital smile design, tooth whitening techniques, ceramic restorations, and minimally invasive cosmetic procedures have expanded the range of treatment options available to patients. Alongside these technological developments, increasing awareness of facial aesthetics and self-image has contributed to a greater emphasis on dental appearance as an important component of overall health, confidence, and quality of life [1–3].

Social media has emerged as one of the most influential sources of health-related information, fundamentally changing the way individuals' access, share, and interpret healthcare information [4,5]. Platforms such as Instagram, Facebook, TikTok, YouTube, and Snapchat provide users with immediate exposure to dental content, including before-and-after treatment images, patient testimonials, educational videos, promotional advertisements, and recommendations from influencers and celebrities [5,6]. These platforms have enabled dental professionals to educate the public, showcase clinical outcomes, and communicate directly with prospective patients. However, they have also facilitated the widespread dissemination of commercialized content that may not always accurately represent treatment indications, limitations, risks, or expected outcomes [6,7].

The influence of social media on patients' healthcare decisions has become increasingly evident across multiple medical and dental specialties [8,9]. In aesthetic dentistry, patients frequently seek information online before consulting a dental professional, often arriving with predetermined treatment preferences based on content viewed on social media [9,10]. Digital platforms can enhance public awareness of available cosmetic procedures, encourage preventive dental care, and motivate individuals to improve their oral health. Conversely, unrealistic portrayals of treatment results, image-editing technologies, and influencer-driven marketing may create expectations that are difficult to achieve in routine clinical practice [10,11]. Consequently, dentists are increasingly required to address misconceptions, educate patients regarding evidence-based treatment options, and manage expectations during treatment planning [11,12].

Recent trends suggest that patients are becoming more involved in shared decision-making, with online information playing an increasingly important role in treatment selection [12,13]. While informed patients may actively participate in discussions regarding available treatment options, excessive reliance on social media may influence clinical decision-making in ways that conflict with professional recommendations. Patients may request unnecessary aesthetic procedures, prioritize cosmetic appearance over oral health, or underestimate the biological, financial, and long-term implications of treatment [13,14]. These challenges highlight the importance of understanding how digital media shapes patient attitudes toward aesthetic dental care. For dental professionals, social media represents both an opportunity and a challenge. Many dentists use these platforms to promote oral health education, communicate with patients, build professional reputations, and market their clinical services [14,15]. Ethical and professional guidelines emphasize that online communication should provide accurate, balanced, and evidence-based information while avoiding misleading claims or unrealistic promises. Maintaining professionalism in digital environments has therefore become an essential component of contemporary dental practice [15].

Despite the growing body of literature examining patients' use of social media for health information, relatively few studies have explored this phenomenon from the perspective of practicing dentists [16]. Dentists interact directly with patients influenced by online content and are uniquely positioned to evaluate how social media affects treatment expectations, consultation behaviors, acceptance of aesthetic procedures, and overall clinical decision-making. Their perspectives may also provide valuable insights into the benefits and challenges associated with the increasing integration of social media into dental practice.

Understanding dentists' experiences is important for developing strategies that promote responsible communication through social media while supporting evidence-based patient education [17]. Such information may assist professional organizations, educators, and policymakers in establishing recommendations for the ethical use of digital platforms, improving health literacy, and enhancing communication between dentists and patients. Furthermore, identifying the perceived impact of social media may help optimize patient counseling, strengthen shared decision-making, and improve satisfaction with aesthetic dental treatments. Therefore, the present study aimed to investigate dentists' perspectives on the influence of social media on patients' decisions to seek aesthetic dental treatments. Specifically, the study explored dentists' perceptions regarding the extent to which social media affects patients' treatment preferences, expectations, consultation patterns, decision-making processes, and the challenges encountered during clinical practice.

Methods

Study Design and Setting

This cross-sectional, questionnaire-based online survey was conducted to investigate dentists' perspectives on the influence of social media on patients' decisions to seek aesthetic dental treatments. The study was carried out over three months from February to April 2026. The survey targeted practicing dentists in professional settings to obtain diverse perspectives regarding the impact of social media on aesthetic dental practice.

Study Population and Eligibility Criteria

The study population consisted of licensed dentists currently engaged in clinical practice. Dentists from all specialties, including general dentistry and dental specialties, and with varying levels of professional experience, were eligible to participate. Inclusion criteria were: (1) being a licensed practicing dentist, (2) currently involved in clinical dental practice, and (3) willingness to participate voluntarily in the study. Dentists who were not actively practicing, incomplete questionnaires, and duplicate responses were excluded from the final analysis.

Sample Size Calculation

The minimum required sample size was calculated using the standard formula for estimating a population proportion:

$$n = Z^2 \times p(1 - p) / d^2$$

where $Z = 1.96$ for a 95% confidence level, $p = 0.50$ to maximize sample size in the absence of previous prevalence estimates, and $d = 0.05$ representing the margin of error. Based on these assumptions, the minimum required sample size was calculated to be 384 participants. Due to the use of convenience sampling and limitations in participant recruitment during the study period, a total of 215 complete responses were obtained and included in the final analysis. Although the achieved sample size was smaller than the calculated requirement, the study was considered exploratory and provided sufficient data for descriptive and inferential statistical analyses.

Questionnaire Development and Validation

Data were collected using a structured, self-administered questionnaire developed following a comprehensive review of the literature related to social media, patient behavior, health communication, and aesthetic dentistry. Relevant studies and professional guidelines were reviewed to identify key domains associated with the influence of social media on patients' decisions regarding aesthetic dental treatment.

The initial questionnaire was evaluated by a panel of three experts in aesthetic dentistry, dental public health, and health communication to assess content validity, relevance, clarity, and comprehensiveness. Subsequently, a pilot study was conducted among 20 practicing dentists who were not included in the final sample to evaluate the clarity, feasibility, and comprehensibility of the questionnaire items. Minor modifications were implemented based on participant feedback. Internal consistency reliability was assessed using Cronbach's alpha coefficient, and the questionnaire demonstrated acceptable reliability (Cronbach's alpha > 0.70).

The final questionnaire was prepared in English and consisted of four sections:

1. Demographic and professional characteristics, including age, gender, country of practice, years of clinical experience, specialty, and practice setting.
2. Patterns of social media influence, assessing dentists' perceptions regarding the impact of social media on patients' decisions to seek aesthetic dental treatments.
3. Clinical experiences, including the frequency of patients requesting treatments based on social media content, unrealistic expectations, misinformation, and commonly requested aesthetic procedures.
4. Professional opinions, evaluating perceived benefits, challenges, ethical considerations, and the overall influence of social media on patient education and clinical decision-making.

Most questionnaire items were presented using multiple-choice questions and five-point Likert scales ranging from "strongly disagree" to "strongly agree."

Data Collection Procedure

The questionnaire was created using an online survey platform and distributed electronically through email, professional dental associations, social media platforms, and professional dental groups and networks. Participants were invited to complete the survey voluntarily and anonymously. To minimize duplicate responses, participants were instructed to complete the questionnaire only once. No personally identifiable information was collected, and all responses were stored anonymously. Submission of the completed questionnaire was considered evidence of informed consent.

Outcome Measures

The primary outcome of the study was dentists' perceptions regarding the influence of social media on patients' decisions to seek aesthetic dental treatments. Secondary outcomes included dentists' perceptions of the benefits and challenges associated with social media, commonly requested aesthetic procedures following social media exposure, and associations between demographic characteristics and perceptions of social media influence.

Statistical Analysis

Data were entered, cleaned, and analyzed using IBM SPSS Statistics software (Version 26.0; IBM Corp., Armonk, NY, USA). Descriptive statistics were used to summarize demographic and professional characteristics. Categorical variables were presented as frequencies and percentages. Associations between demographic variables and dentists' perceptions were evaluated using Pearson's chi-square test or Fisher's exact test when appropriate. Statistical significance was established at a two-sided p-value of less than 0.05. The results were presented using tables and summary statistics to facilitate interpretation.

Ethical Considerations

The study was conducted in accordance with the ethical principles outlined in the Declaration of Helsinki. Ethical approval was obtained from the Institutional Review Board/Ethics Committee. Participation was voluntary, and all participants provided electronic informed consent before accessing the questionnaire. Confidentiality and anonymity were maintained throughout the study, and no personally identifiable information was collected, stored, or disclosed.

Results

Demographic Characteristics of the Participants

A total of 215 practicing dentists completed the online questionnaire and were included in the final analysis. The largest proportion of participants was aged 31–40 years (41.9%, n = 90), followed by those aged 21–30 years (32.6%, n = 70), 41–50 years (17.7%, n = 38), and over 50 years (7.9%, n = 17). Female dentists represented 56.3% (n = 121) of the study population, while males accounted for 43.7% (n = 94).

Regarding clinical experience, nearly half of the participants (48.4%, n = 104) had between 5 and 10 years of professional experience, whereas 29.3% (n = 63) had more than 10 years of experience and 22.3% (n = 48) had less than 5 years of experience. Private practice was the most frequently reported practice setting (36.3%, n = 78), followed by government hospitals (30.2%, n = 65), university-based practice (18.6%, n = 40), and mixed practice settings (14.9%, n = 32) (Table 1).

Table 1. Demographic characteristics of the participants (N = 215).

Characteristic	n	%
Age (years)		
21–30	70	32.6
31–40	90	41.9
41–50	38	17.7
>50	17	7.9
Gender		
Male	94	43.7
Female	121	56.3
Years of experience		
<5 years	48	22.3
5–10 years	104	48.4
>10 years	63	29.3
Practice setting		
Private clinic	78	36.3
Government hospital	65	30.2
University	40	18.6
Mixed practice	32	14.9

Dentists' Perceptions of the Influence of Social Media

Most respondents perceived social media as having a substantial impact on patients' interest in aesthetic dental treatments. Overall, 82.3% (n = 177) of participants agreed or strongly agreed that social media had increased patients' demand for aesthetic dentistry. Furthermore, 74.4% (n = 160) reported that patients frequently referred to information obtained from social media during dental consultations. Approximately two-thirds of respondents (68.8%, n = 148) believed that social media significantly influenced patients' treatment decisions. Additionally, 63.3% (n = 136) agreed that social media improved patients' awareness of available aesthetic dental procedures. However, a large proportion of dentists (79.5%, n = 171) considered that social media contributed to unrealistic patient expectations regarding treatment outcomes (Table 2).

Table 2. Dentists' perceptions regarding the influence of social media on aesthetic dental treatment.

Statement	Agree/Strongly Agree n (%)
Social media increases demand for aesthetic dentistry	177 (82.3)
Patients mention social media during consultations	160 (74.4)
Social media influences treatment decisions	148 (68.8)
Social media improves patient awareness	136 (63.3)
Social media creates unrealistic expectations	171 (79.5)

Responses represent participants selecting "Agree" or "Strongly Agree" on the Likert scale.

Aesthetic Dental Treatments Commonly Requested Following Social Media Exposure

Tooth whitening was identified as the aesthetic procedure most frequently requested following exposure to social media, reported by 156 dentists (72.6%). This was followed by porcelain veneers (65.1%), clear aligners (52.1%), composite bonding (47.0%), smile makeover procedures (41.4%), and gingival contouring (20.9%) (Table 3).

Table 3. Aesthetic dental treatments commonly requested after social media exposure.

Treatment	n	%
Tooth whitening	156	72.6
Porcelain veneers	140	65.1
Clear aligners	112	52.1
Composite bonding	101	47.0
Smile makeover	89	41.4
Gingival contouring	45	20.9

Participants were permitted to select more than one response; therefore, percentages do not total 100%.

Challenges Encountered by Dentists

Among the reported challenges associated with patients' use of social media, unrealistic patient expectations were the most frequently identified (165 respondents, 76.7%). Requests for unnecessary aesthetic procedures were reported by

133 dentists (61.9%), while 126 (58.6%) identified misinformation obtained through social media as a common clinical challenge. Approximately half of the respondents (50.7%) experienced difficulties explaining treatment limitations to patients, and 43.7% reported that social media-related discussions increased consultation time (Table 4).

Table 4. Challenges associated with the influence of social media on dental practice.

Challenge	n	%
Unrealistic patient expectations	165	76.7
Requests for unnecessary treatment	133	61.9
Misinformation	126	58.6
Difficulty explaining treatment limitations	109	50.7
Increased consultation time	94	43.7

Participants were permitted to select multiple responses.

Perceived Benefits of Social Media

Despite the reported challenges, participants acknowledged several beneficial aspects of social media in aesthetic dentistry. Increased public awareness of aesthetic dental treatments was identified by 65.6% (n = 141) of respondents, while 60.5% (n = 130) believed that social media encouraged patients to seek professional dental consultation. Furthermore, 54.9% (n = 118) of dentists agreed that social media improved communication between dentists and patients, whereas 53.0% (n = 114) considered social media to be a valuable tool for oral health education (Figure 5).

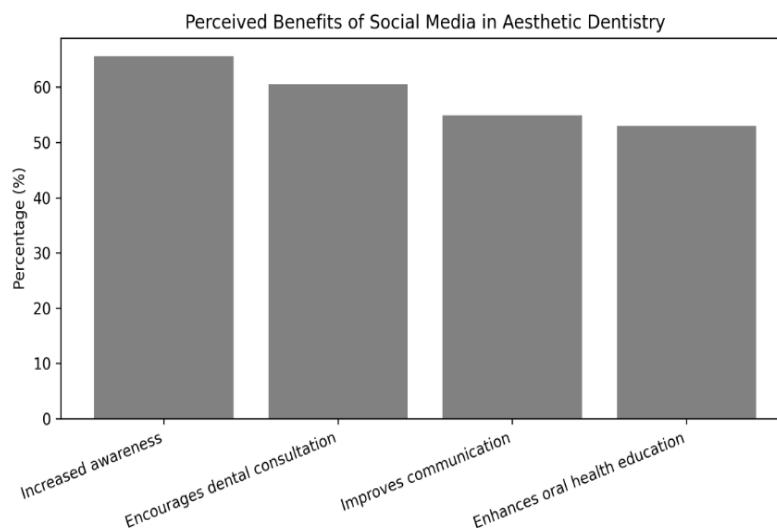


Figure 5. Perceived benefits of social media in aesthetic dentistry among participating dentists (N = 215). Increased awareness was the most frequently reported benefit (65.6%), followed by encouraging dental consultations (60.5%), improving communication (54.9%), and enhancing oral health education (53.0%).

Association Between Demographic Characteristics and Dentists' Perceptions

Chi-square analysis revealed a statistically significant association between years of clinical experience and dentists' perceptions regarding the influence of social media on patients' treatment decisions ($\chi^2 = 8.42$, df = 2, p = 0.015). Dentists with fewer years of clinical experience were more likely to perceive social media as having a strong influence on patient decision-making. A statistically significant association was also observed between practice setting and reports of unrealistic patient expectations related to social media exposure ($\chi^2 = 9.31$, df = 3, p = 0.025). Dentists practicing in private clinical settings reported encountering unrealistic patient expectations more frequently than those practicing in academic or public healthcare institutions.

In contrast, no statistically significant association was identified between gender and dentists' perceptions regarding the role of social media in improving patients' awareness of aesthetic dental treatments ($\chi^2 = 1.47$, df = 1, p = 0.225). Overall, the findings demonstrate that social media has become an important factor influencing patients' awareness, treatment preferences, and expectations regarding aesthetic dental treatments, while simultaneously presenting significant challenges related to misinformation and unrealistic expectations within contemporary dental practice (Table 6).

Table 6. Association between selected demographic characteristics and dentists' perceptions of social media.

Variable	Outcome	χ^2	df	p-value
Years of clinical experience	Social media influences treatment decisions	8.42	2	0.015*
Practice setting	Unrealistic patient expectations	9.31	3	0.025*
Gender	Social media improves patient awareness	1.47	1	0.225

*Statistical significance was defined as p < 0.05.

Discussion

The present cross-sectional study investigated dentists' perspectives regarding the influence of social media on patients' decisions to seek aesthetic dental treatments. The findings demonstrate that social media has become a substantial factor influencing patients' awareness, treatment preferences, expectations, and decision-making processes in aesthetic dentistry. The majority of participating dentists reported that patients frequently referenced social media content during consultations and that digital platforms significantly influenced patients' interest in cosmetic dental procedures. These findings highlight the increasingly important role of social media within contemporary dental practice and emphasize the need for evidence-based communication strategies to support informed patient decision-making [17,18].

A major finding of the present study was that more than four-fifths of respondents believed that social media has increased patients' demand for aesthetic dental treatments. This observation is consistent with previous literature demonstrating that social media platforms have become important sources of health information and significantly influence healthcare-seeking behaviors. The widespread dissemination of before-and-after clinical photographs, patient testimonials, influencer recommendations, and promotional content may contribute to increasing awareness of aesthetic dental procedures and encouraging patients to pursue cosmetic treatment options. While greater awareness may facilitate access to professional dental care, the quality and scientific accuracy of information available through social media remain highly variable [19,20]. The present study further demonstrated that approximately three-quarters of dentists reported that patients frequently discussed information obtained from social media during clinical consultations. This finding reflects the growing role of digital technologies in shared decision-making and suggests that patients increasingly seek to participate actively in treatment planning. Similar observations have been reported in previous healthcare research, indicating that patients often arrive with preconceived treatment preferences shaped by online information. Consequently, dental practitioners are increasingly required to provide evidence-based explanations regarding treatment indications, contraindications, expected outcomes, risks, and alternative treatment options [21,22].

Another important finding was that tooth whitening, porcelain veneers, and clear aligners were the aesthetic procedures most frequently requested following exposure to social media. These findings may be explained by the highly visual nature of these procedures and their extensive promotion across digital platforms. Social media content frequently portrays aesthetic treatments as simple, rapid, and highly successful procedures, potentially overlooking the complexity of treatment planning, patient selection, biological limitations, and long-term maintenance requirements. Consequently, patient expectations may not always align with clinical reality [23,24]. One of the most clinically relevant findings of the present study was the high prevalence of unrealistic patient expectations associated with social media exposure. Nearly four-fifths of respondents reported that social media contributes to unrealistic expectations regarding aesthetic treatment outcomes. This finding is consistent with previous studies suggesting that edited images, selective presentation of successful cases, influencer marketing, and commercial advertising can create distorted perceptions of achievable treatment outcomes. Such unrealistic expectations may complicate treatment planning, reduce patient satisfaction, and increase the likelihood of requests for unnecessary or inappropriate procedures [25,26].

Similarly, requests for unnecessary aesthetic treatments and misinformation obtained through social media were frequently identified by participating dentists. These findings emphasize the critical role of dentists in evaluating patients' online information sources and providing individualized, evidence-based recommendations. Effective communication strategies are therefore essential to address misconceptions, explain treatment limitations, and establish realistic expectations before initiating treatment. Such patient-centered communication approaches may contribute to improved treatment satisfaction and support ethical clinical decision-making [27,28].

Despite the challenges associated with social media, the findings of the present study also demonstrated several perceived benefits of digital platforms. Many respondents believed that social media increases public awareness of aesthetic dental treatments, encourages patients to seek professional consultation, improves communication between dentists and patients, and enhances oral health education. These findings suggest that social media should not be viewed exclusively as a source of misinformation but rather as a potentially valuable educational and communication tool when used responsibly and ethically. Professional organizations increasingly advocate for the dissemination of scientifically accurate and evidence-based information through digital platforms to improve oral health literacy and support informed patient decision-making [29,30].

Additionally, although the minimum calculated sample size was 384 participants, only 215 complete responses were obtained. This smaller sample size may have reduced the statistical power of the study, increasing the possibility of Type II error and limiting the ability to detect smaller but potentially meaningful associations. Therefore, the inferential findings should be interpreted with caution, and future studies with larger and more representative samples are recommended to confirm the present findings.

The present study also identified significant associations between years of clinical experience and dentists' perceptions of social media influence, as well as between practice setting and reports of unrealistic patient expectations. Dentists with fewer years of professional experience were more likely to perceive social media as having a strong influence on patients' treatment decisions. This observation may reflect greater familiarity with digital communication technologies among younger practitioners and increased exposure to social media-driven patient populations. Similarly, dentists working in private practice settings reported encountering unrealistic patient expectations more frequently than those practicing in

academic or public healthcare environments, possibly because aesthetic procedures constitute a larger proportion of services provided in private clinical practice. Additional multicenter studies are required to further explore these associations [31].

The findings of this study have important implications for dental education, clinical practice, and professional regulation. Undergraduate and postgraduate dental education programs should incorporate training in digital professionalism, health communication, social media literacy, and evidence-based patient counseling. Furthermore, professional organizations and regulatory bodies should develop practical guidelines to support ethical social media use among dental practitioners while promoting accurate and scientifically validated health information [32,33].

Several limitations should be acknowledged when interpreting the findings of this study. First, the cross-sectional design limits the ability to establish causal relationships between social media exposure and patient behavior. Second, the study relied on dentists' self-reported perceptions, which may be subject to recall and response bias. Third, although participants were recruited from various practice settings, the use of convenience sampling and the relatively small sample size may limit the generalizability of the findings. Future multicenter and longitudinal studies involving both dentists and patients are warranted to provide a more comprehensive understanding of the influence of social media on aesthetic dental treatment decision-making [34-36-37].

Future Work

Future research should expand upon the findings of the present study by including larger and more geographically diverse samples of dentists to improve the generalizability of the results. Longitudinal studies are recommended to evaluate how the influence of social media on patients' aesthetic treatment decisions evolves over time and whether emerging digital platforms further modify patient expectations and treatment-seeking behaviors. In addition, future investigations should incorporate patients' perspectives alongside those of dental professionals to provide a more comprehensive understanding of the relationship between social media exposure, patient knowledge, and clinical decision-making. Qualitative studies exploring dentists' experiences in managing misinformation and unrealistic expectations may also provide valuable insights into communication strategies. Furthermore, interventional studies evaluating the effectiveness of evidence-based social media campaigns and digital oral health education programs are warranted to determine whether professionally developed online content can improve health literacy, promote informed decision-making, and reduce misconceptions regarding aesthetic dental treatments. Finally, future research should examine the influence of different social media platforms, digital influencers, and artificial intelligence-generated content on patients' perceptions and acceptance of aesthetic dental procedures.

Conflict of interest. Nil

References

1. Khatri MP, Kishore S, Hemmanur S. Aesthetic smile designing. In: Human teeth-from function to esthetics. IntechOpen; 2023.
2. Xuebo L. The role of digital smile design in enhancing aesthetic dentistry outcomes. Peta Int J Public Health. 2025;2(2):1-13.
3. Lim TW, Ruslan AH, Ahmad NS, Mohamed Kassim ZH, Norman NH. The perspective of dental aesthetics in finding a job as a dentist: a cross-sectional study. Arch Orofac Sci. 2022;17(2).
4. Jeyaraman M, Ramasubramanian S, Kumar S, Jeyaraman N, Selvaraj P, Nallakumarasamy A, et al. Multifaceted role of social media in healthcare: opportunities, challenges, and the need for quality control. Cureus. 2023;15(5).
5. Farsi D, Martinez-Menchaca HR, Ahmed M, Farsi N. Social media and health care (part II): narrative review of social media use by patients. J Med Internet Res. 2022;24(1):e30379.
6. Hoe CYW, Ahmad B, Watterson J. The use of videos for diabetes patient education: a systematic review. Diabetes Metab Res Rev. 2024;40(2):e3722.
7. Schroeder S, Shelton C, Curcio R. Crafting the consumer teacher: education influencers and the figured world of K-12 teaching. Learn Media Technol. 2024;49(3):442-455.
8. Kjærulff EM, Andersen TH, Kingod N, Nexø MA. When people with chronic conditions turn to peers on social media to obtain and share information: systematic review of the implications for relationships with health care professionals. J Med Internet Res. 2023;25(1):e41156.
9. Holtorf AP, Danyliv A, Huang LY, Venable Y, Hanna A, Krause A, et al. Using social media research in health technology assessment: stakeholder perspectives and scoping review. Int J Technol Assess Health Care. 2023;39(1):e63.
10. Krishnan GA, Nair AK, Bhaskar BV. Comprehensive analysis of factors influencing patients' preferences and attitudes toward dental treatment choices. Ann Afr Med. 2024;24(2):237.
11. Acosta JM, Detsomboonrat P, Pisarnaturakit PP, Urwannachotima N. The use of social media on enhancing dental care and practice among dental professionals: cross-sectional survey study. JMIR Form Res. 2025;9(1):e66121.
12. Ahonen H, Pakpour A, Norderyd O, Broström A, Fransson EI, Lindmark U. Applying world dental federation theoretical framework for oral health in a general population. Int Dent J. 2022;72(4):536-544.
13. Zarei R. Oral health habits in adolescents: a comparison study of Lithuanian and Swedish adolescents [Master's thesis]. [Lithuania]: Lithuanian University of Health Sciences; 2023.
14. Holden ACL. Social media and professionalism in dentistry. Br Dent J. 2017;223(8):549-552. doi: 10.1038/sj.bdj.2017.868.
15. Abt E, Smiley CJ, Weyant RJ, Frantsve-Hawley J, Carrasco-Labra A. Clinical practice guidelines in dentistry. J Calif Dent Assoc. 2025;53(1):2588936.

16. Kamarudin Y, Mohd Nor NA, Libamin AC, Suriani ANH, Marhazlinda J, Bramantoro T, et al. Social media use, professional behaviors online, and perceptions toward e-professionalism among dental students. *J Dent Educ.* 2022;86(8):958-967.
17. Kurian N, Varghese IA, Cherian JM, Varghese VS, Sabu AM, Sharma P, et al. Influence of social media platforms in dental education and clinical practice: a cross-sectional survey among dental trainees and professionals. *J Dent Educ.* 2022;86(8):1036-1042.
18. Khan MI, Loh J. Benefits, challenges, and social impact of health care providers' adoption of social media. *Soc Sci Comput Rev.* 2022;40(6):1631-1647.
19. Afful-Dadzie E, Afful-Dadzie A, Egala SB. Social media in health communication: a literature review of information quality. *Health Inf Manag J.* 2023;52(1):3-17.
20. Patrick M, Venkatesh RD, Stukus DR. Social media and its impact on health care. *Ann Allergy Asthma Immunol.* 2022;128(2):139-145.
21. Değirmencioglu E, Kılıçoğlu H. Evaluating the impact of social media marketing from the perspective of orthodontists. *BMC Oral Health.* 2024;24(1):779.
22. Murugeshappa D, Dahlan R, Perez A, Gow G, Amin M. Social media use and adolescent oral health: a scoping review. *Digit Health.* 2025;11:20552076251334734.
23. Xuebo L. The role of digital smile design in enhancing aesthetic dentistry outcomes. *Peta Int J Public Health.* 2025;2(2):1-13.
24. Sharma H, Soetan T, Farinloye T, Mogaji E, Noite MDF. AI adoption in universities in emerging economies: prospects, challenges and recommendations. In: *Re-imagining educational futures in developing countries: lessons from global health crises.* Cham: Springer International Publishing; 2022. p. 159-174.
25. Neiva GF, Hasslen JA, Bompolaki D, Pugach-Gordon M, Wright W, Kumar SS. Social media in dental education: the need for institutional policies and content regulation. *J Dent Educ.* 2023;87(10):1476-1480.
26. Ahluwalia PS. Influencer culture and neoliberal identity: a sociological critique of self-branding on social media. *Siddhantas Int J Adv Res Arts Humanit.* 2025:78-91.
27. Glick M, Williams DM, Kleinman DV, et al. A new definition for oral health developed by the FDI World Dental Federation. *J Am Dent Assoc.* 2016;147(12):915-917. doi: 10.1016/j.adaj.2016.10.001.
28. Gaffar B, Schroth RJ, Foláyan MO, Ramos-Gomez F, Virtanen JI. A global survey of national oral health policies and its coverage for young children. *Front Oral Health.* 2024;5:1362647.
29. World Health Organization. A global health strategy for 2025-2028-advancing equity and resilience in a turbulent world: fourteenth general programme of work. Geneva: World Health Organization; 2025.
30. American Dental Association. CDT 2024: current dental terminology. Chicago: American Dental Association; 2023.
31. Stellefson M, Paige SR, Chaney BH, et al. Evolving role of social media in health promotion: updated responsibilities for health education specialists. *Health Promot Pract.* 2020;21(6):878-885. doi: 10.1177/1524839920948464.
32. World Health Organization. An overview of infodemic management during the COVID-19 pandemic, January 2020–July 2022. Geneva: World Health Organization; 2023.
33. Anawade Sr PA, Sharma D, Gahane S, Sharma DS. Connecting health and technology: a comprehensive review of social media and online communities in healthcare. *Cureus.* 2024;16(3).
34. World Health Organization. Ethics and governance of artificial intelligence for health: large multi-modal models. WHO guidance. Geneva: World Health Organization; 2024.
35. Ahmed, K.A., Ibrahim, R. and Gehani, G., 2025. Incidence, Management Practices, and Training Needs for Gingival Accidents Among Dental Professionals: A Survey-Based Study. *African Journal of Advanced Pure and Applied Sciences*, pp.265-271.
36. Ahmed KA, Alhendwi NY. Diagnostic challenges in dental pathology: case-based insights for practitioners (case study review). *Scholastic Dent Sci.* 2025;1(2):01-03.
37. Ahmed KA, Ali Ali AA. Navigating the pandemic storm: a survey of Libyan dentists' experiences and adaptations to COVID-19. *Clin Res Stud.* 2024;3(2):2835-2882.