



HEALTH + Leger

At the Point of Care: How Health Misinformation Impacts Clinical Decision-Making.

A ChangeMakers Health report

Introduction

From group chats to search bars, health advice is everywhere. Misinformation spreads faster than facts, influencing decisions long before patients talk to a healthcare professional (HCP).

These influences cause confusion, delay care, and erode trust. The impact of misinformation cannot be ignored.

Methodology

Objective

To deepen the understanding of the direct link between misinformation and negative health outcomes, focusing on actionable insights for pharma marketing and communications leaders.

How & who

An online survey of Canadian Healthcare Providers (n=75) via Leger’s LEO Medical panel

- n=25 general practitioners/family physicians
 - n=25 nurses/nurse practitioners
 - n=25 pharmacists
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When

Completed between May 16 and May 20, 2025.

Findings & analysis

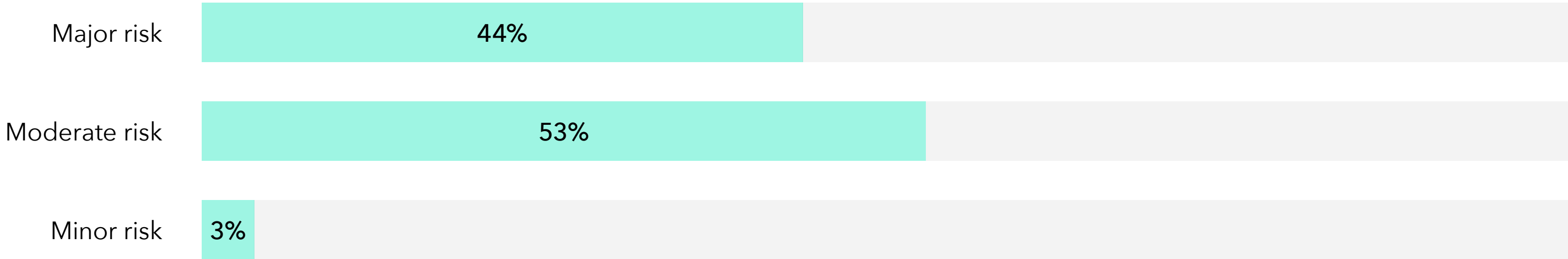
Misinformation is disrupting care, eroding trust, and delaying treatment. This report reveals where HCPs see it causing the most harm and where change is most urgently needed.

Nearly all HCPs see health misinformation as a risk.

Question

In your experience, how much of a risk does health misinformation – whether from social media, online forums, websites, or traditional media – pose to delivering optimal patient care?

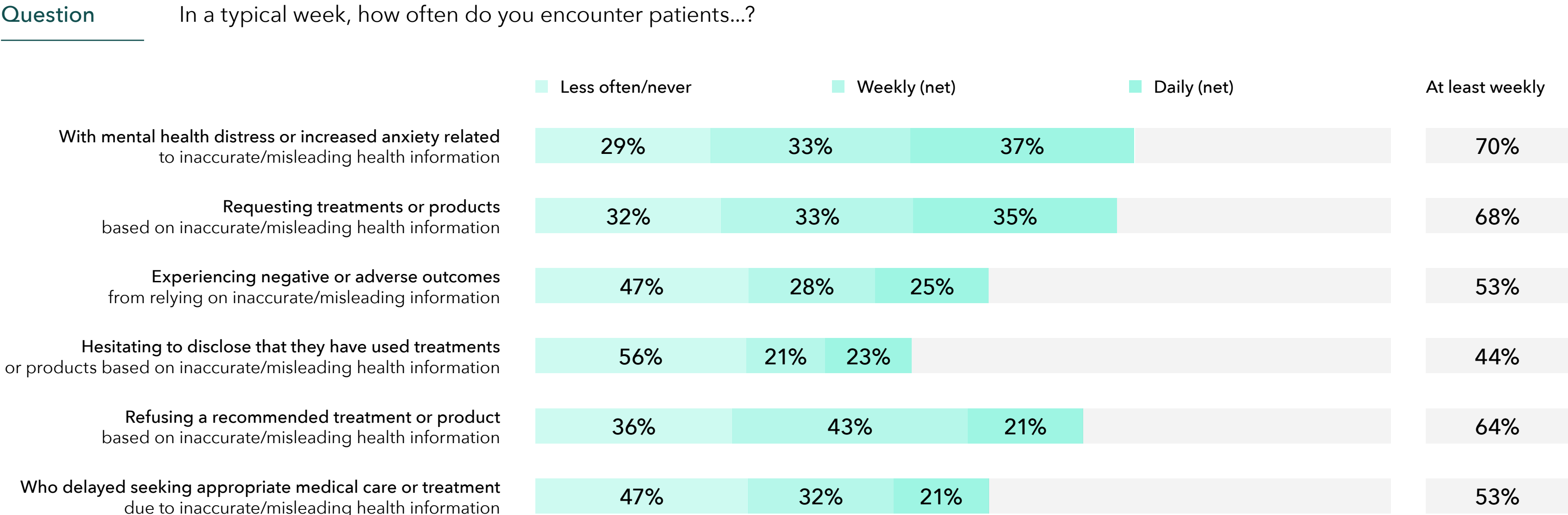
Risk of health misinformation on delivering optimal patient care



97%

say health misinformation poses a major or moderate risk

Healthcare providers frequently encounter patients impacted by health misinformation.



GPs are more likely to encounter patients with increased anxiety related to misinformation and patients who refuse treatment.

Misinformation is a daily threat to quality care.

False health narratives are no longer edge cases. As misinformation fuels a breakdown in trust, it creates growing tension between patients’ self-guided choices and professional clinical advice.



Opportunities for change.

Plan for the inevitable.

Prepare HCPs to expect misinformation and integrate it into clinical protocols, patient education pathways, and communication training.

Intercept early. Prevent harm.

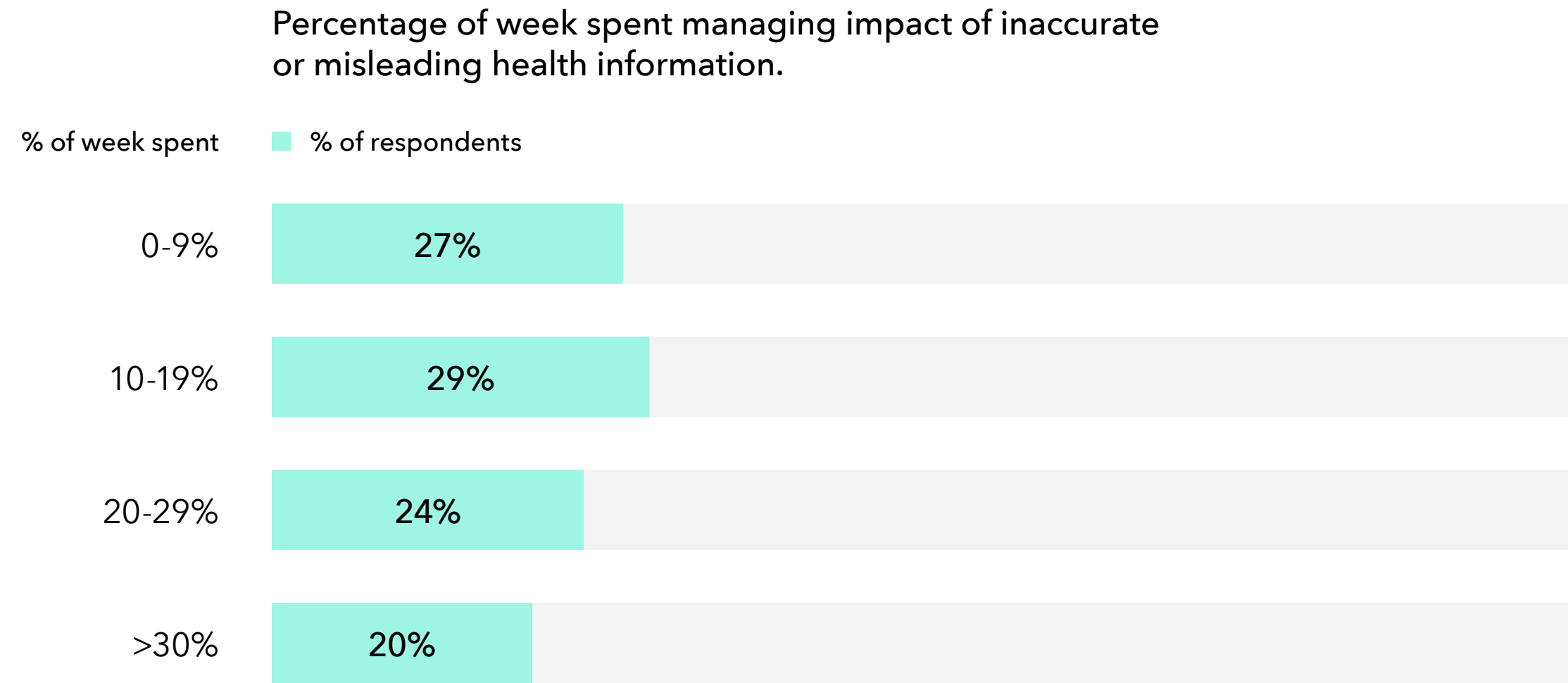
Each day spent following inaccurate advice instead of starting evidence-based treatment increases risk. Empower HCPs with strategies to intervene and redirect early.

Reinforce trust at the point of care.

Support HCPs with tools and training that enable open, judgment-free conversations so patients feel safe disclosing misinformation exposure and can get back on track.

On average, HCPs spend 17% of their week managing the impact of health misinformation.

Question What percentage of your week is spent managing the impact of inaccurate or misleading health information? Consider time spent counselling patients about the misinformation, follow-up appointments as a result of misinformation, time spent investigating the misinformation source, sharing resources from credible sources, or creating your own content such as handouts or social media posts.



Nurses spend the largest proportion of their time managing the impact of inaccurate health information.

Misinformation is stealing time from patient care.

Across roles and settings, HCPs report spending nearly one day of their week managing misinformation – time that could be spent on prevention, chronic disease management, or patient education. This misinformation burden is draining capacity from an already strained system and amplifying burnout on the front lines.



Opportunities for change.

Protect clinical time.

Support HCPs with practical, time-saving tools that reduce the time spent correcting misinformation to free up bandwidth for meaningful patient care.

Lighten the load for frontline teams.

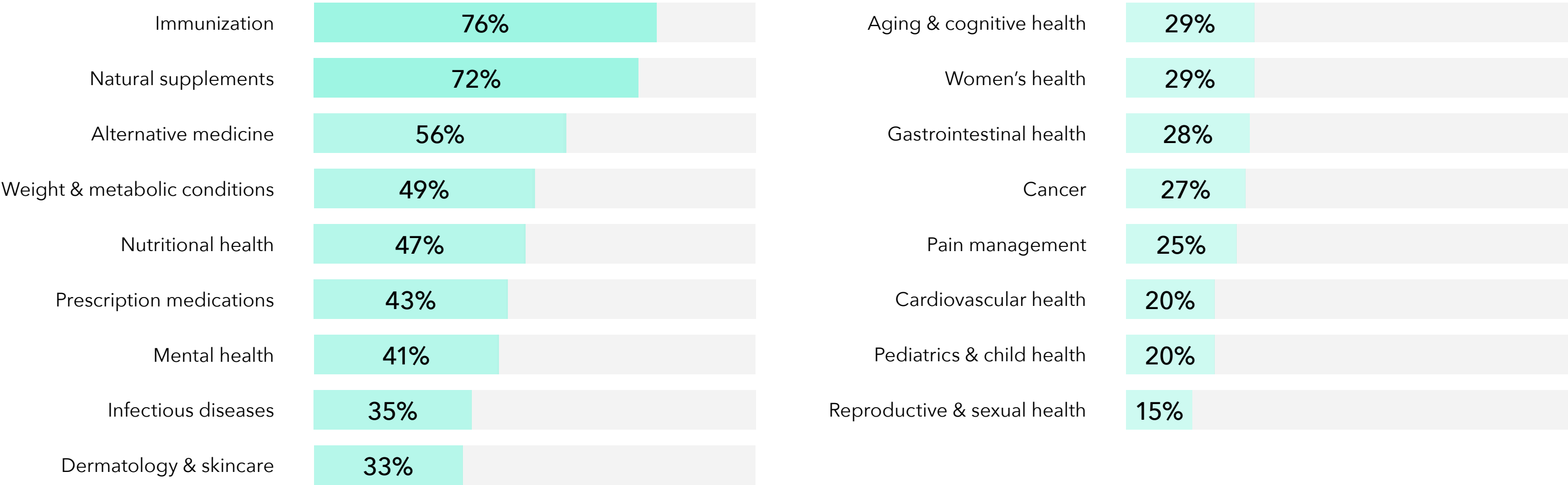
When designing supports, consider the disproportionate burden nurses and other point-of-care professionals carry in managing misinformation.

Elevate the issue.

Call on Health Canada, provincial governments, and professional associations to recognize, measure, and address the economic and operational burden misinformation places on healthcare delivery.

Immunization and natural supplements are the most frequently encountered topics of health misinformation.

Question In which of the following health conditions/topics, if any, do you most frequently encounter inaccurate or misleading health information?



It's easier to believe in a treatment that fixes a problem than in a vaccine that prevents one you may never face.

Misinformation thrives where curiosity, controversy, and unmet needs collide.

HCPs report encountering the most misinformation in areas where science evolves quickly, regulation lags, or public interest is high. These are not fringe issues; they are central to today's health discourse and consumer decision-making.



Opportunities for change.

Show up in the conversation.

From vaccine hesitancy to GLP-1 curiosity, Canadians are actively seeking answers. If credible experts and relatable voices aren't part of the public conversation, misinformation will be.

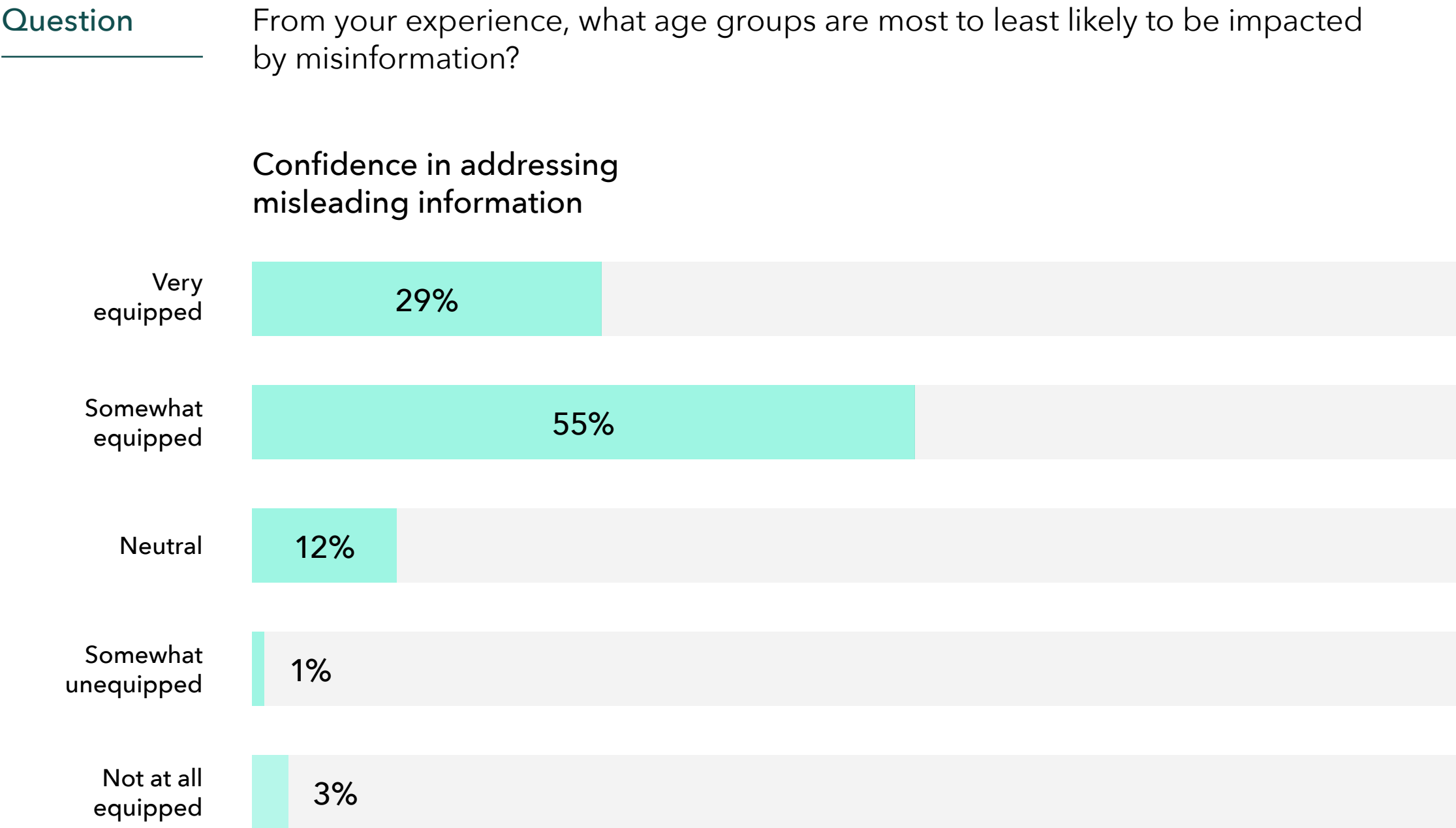
Bridge science and lived experience.

Menopause and mental health sit at the crossroads of stigma, vague symptoms, and evolving science – a perfect storm of misinformation. Combine clinical guidance with human stories to meaningfully connect.

Clarify the grey zones.

Supplements, nutrition, and alternative medicine reflect rising consumer demand and skepticism. Create HCP tools that clarify what's known and what's not, and how to guide meaningful patient dialogue.

Only one-third of HCPs feel very equipped to address misinformation.



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GPs are least likely to feel equipped – only about two-thirds say they are at least somewhat equipped.

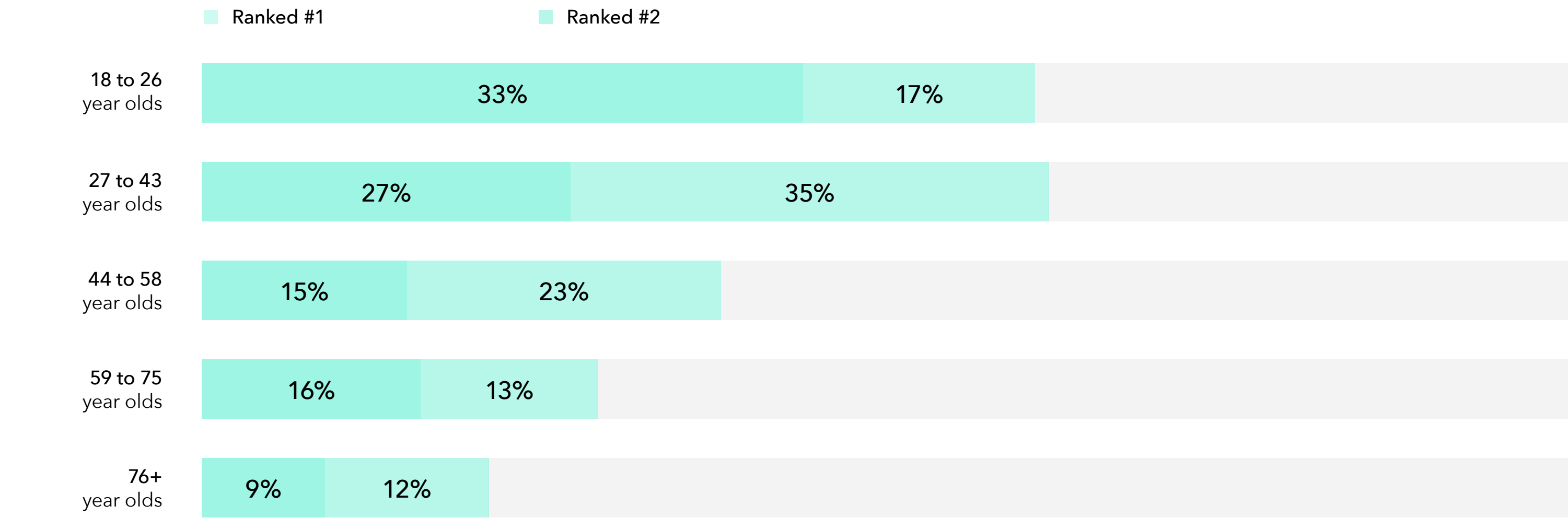
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71%

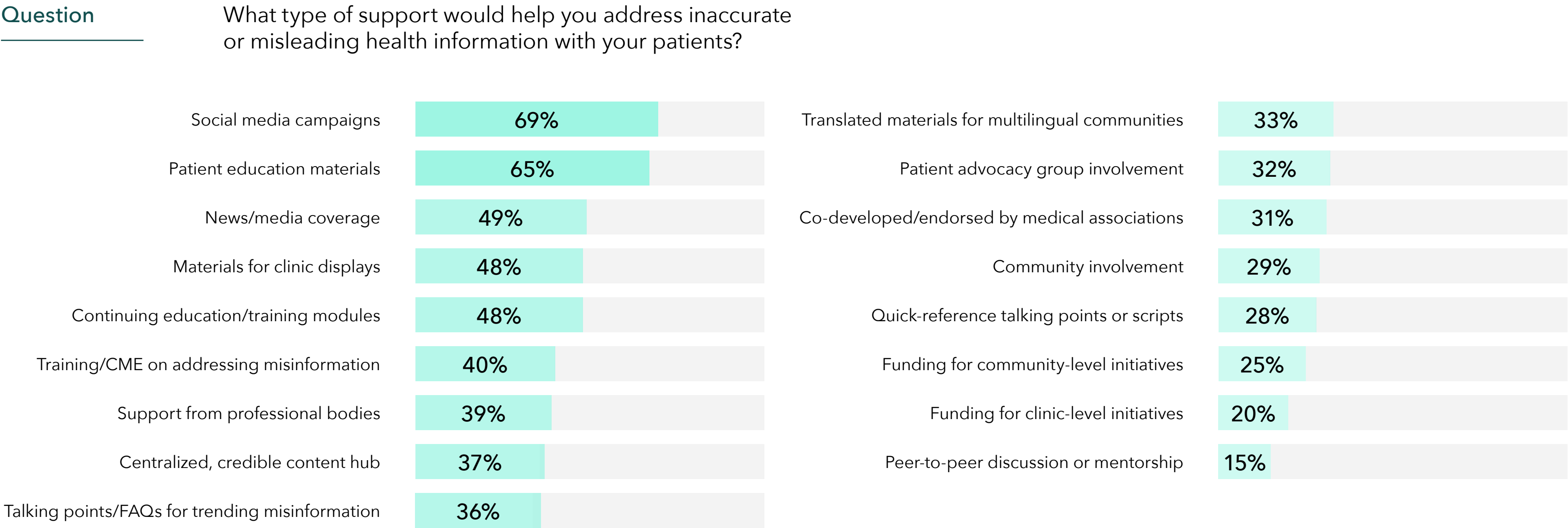
do not feel very equipped to address health misinformation.

Young adults are most impacted by misinformation, according to HCPs.

Question From your experience, what age groups are most to least likely to be impacted by misinformation? Please rank age groups from most to least impacted.



HCPs consider social media campaigns and education tools most helpful in addressing patient misinformation.



***GPs** seek help to identify reputable influencers to direct patients to.*

***Pharmacists** would like patient education materials.*

***Nurses** would also like materials for clinic displays.*

Misinformation is outpacing HCP readiness.

Young adults are the most affected by misinformation, especially on topics like immunization, weight loss drugs, mental health, and reproductive care. Most HCPs feel only moderately prepared to respond – and they’re calling for practical, trusted support.



Opportunities for change.

Back HCPs with relevant support.

From social campaigns to multilingual in-clinic materials and training, HCPs want support that’s credible, accessible, and designed for real-world interactions.

Build confidence, not just content.

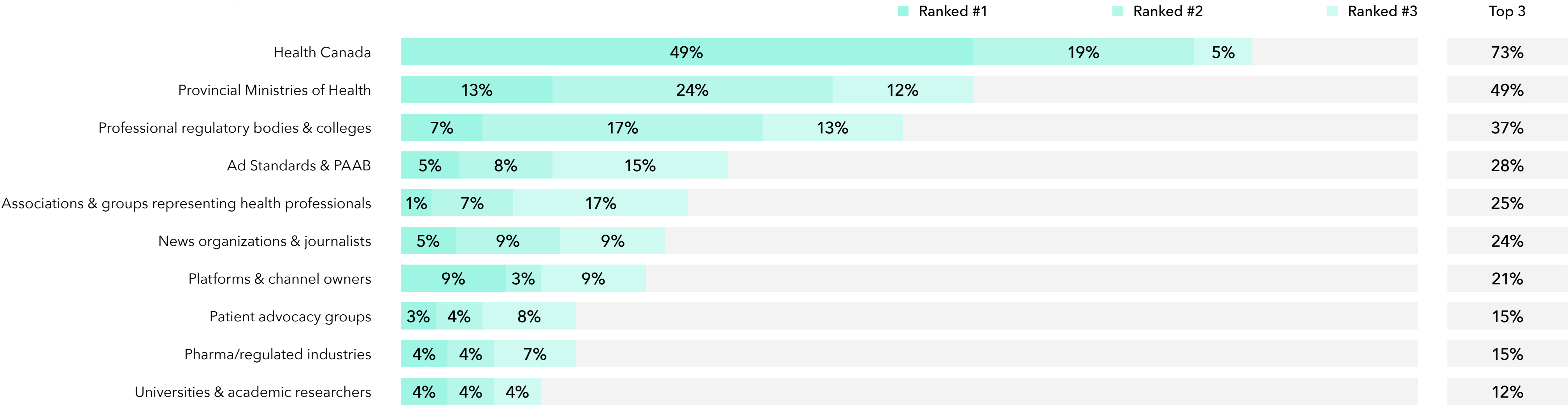
Co-create with trusted medical bodies to help HCPs navigate complex conversations by blending clinical authority with empathy and clarity.

Target the patients most at risk.

Misinformation hits hardest among younger adults; Meet them with content that’s relatable and tailored for digitally native patients.

Health Canada is regarded as most responsible for managing misinformation, far ahead of other organizations.

Question Who do you feel is most responsible to safeguard Canadians against health misinformation?
Rank the top 3 you feel are MOST responsible.



Misinformation response is only as strong as the messenger.

HCPs see Health Canada as having the primary responsibility to protect Canadians against health misinformation. Brands may not be expected to lead, but they can play a meaningful role when aligned with regulators, professional bodies, and academic voices.



Opportunities for change.

Align with those who hold the trust.

Health Canada, provincial ministries, and professional associations are seen as the most credible stewards of truth. Collaborate with them to increase reach, resonance, and legitimacy.

Let credibility lead the message.

When addressing misinformation, the messenger matters. Use co-branded tools, physician-led content, and third-party verification to increase acceptance and reduce skepticism.

Lead through action, not attribution.

Even if pharma isn't expected to lead, it can still make an impact – by funding initiatives, elevating credible voices, and providing training and tools to help HCPs do what they're already trusted to do.

SUPPORT HCPs.

STRENGTHEN TRUST.

IMPROVE OUTCOMES.

What topic or question would you like to explore next?

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