

Information Quality of Implant-Related Videos on Chinese Social Media Platforms: A Cross-Sectional Analysis of Bilibili, Douyin, and Xiaohongshu

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Abstract

Background

As dental implant therapy becomes increasingly common, patients frequently seek implant-related information through social media platforms. However, the quality and completeness of such information remain uncertain, particularly on Chinese social media platforms. This study aimed to evaluate the content completeness and educational quality of implant-related videos on Bilibili, Douyin, and Xiaohongshu.

Methods

A cross-sectional content analysis was conducted on implant-related videos retrieved from Bilibili, Douyin, and Xiaohongshu on June 10, 2026, using the Chinese keyword “种植牙” (“dental implant”). The first 100 videos returned by each platform's default search function were screened. After applying predefined inclusion and exclusion criteria, 250 videos were included for analysis. Video characteristics were recorded, and content quality was evaluated using the Global Quality Scale (GQS) and a newly developed Implant Content Score (ICS), which assessed ten domains of implant-related information. Differences among platforms were analyzed using the chi-square test and Kruskal–Wallis test, and associations between video characteristics and information quality were assessed using Spearman correlation analysis.

Results

Of the 250 included videos, 83 originated from Bilibili, 79 from Douyin, and 88 from Xiaohongshu. Significant differences in information quality were observed among platforms. Bilibili achieved the highest median ICS score (4.0), followed by Xiaohongshu (3.0) and Douyin (2.0) ($P < 0.001$). Similarly, Bilibili demonstrated the highest GQS scores ($P < 0.001$). Scientific accuracy was the most frequently reported content domain (97.2%), whereas comprehensive treatment planning was the least frequently reported (8.8%). Video duration was positively associated with ICS score ($r = 0.490$, $P < 0.001$), while likes, comments, and favorites showed no significant association with information quality.

Conclusions

The quality of implant-related information on Chinese social media platforms varies substantially. Bilibili provided the most comprehensive and educationally valuable content, whereas clinically important topics such as comprehensive treatment planning were frequently overlooked across all platforms. Longer videos tended to contain more complete information, while user engagement metrics were not reliable indicators of information quality. These findings highlight the need for improved patient

education regarding implant therapy on social media and support the use of complementary measures assessing both content completeness and educational quality.

1 Introduction

Dental implant therapy has become a widely accepted treatment modality for the rehabilitation of partially and completely edentulous patients. Owing to its favorable long-term survival, functional performance, and esthetic outcomes[1], implant therapy is now considered a predictable and reliable option for replacing missing teeth in a broad range of clinical situations. Recent epidemiological data have demonstrated a substantial increase in implant utilization worldwide[2]. In the United States, the prevalence of dental implants among adults with missing teeth increased markedly between 1999 and 2016, reflecting the growing adoption of implant-based rehabilitation. As the demand for implant treatment continues to expand, patients are increasingly seeking information regarding implant therapy before making treatment decisions.

As the utilization of dental implants continues to increase, patients are becoming more actively involved in treatment decision-making and are increasingly seeking health-related information online. Social media platforms have emerged as important sources of medical and dental information, providing users with convenient access to educational content, professional opinions, and personal experiences[3]. Previous studies have shown that a substantial proportion of patients search the internet before seeking professional consultation and often rely on online information to understand treatment options, expected outcomes, risks, and costs[4, 5]. Consequently, the quality and accuracy of health information disseminated through social media have become important concerns for healthcare professionals and researchers[3].

Several studies have evaluated the quality and reliability of oral health information available on social media platforms[6, 7]. In the field of implant dentistry, previous investigations of YouTube videos have consistently reported deficiencies in content completeness, reliability, and educational value[8, 9]. Similar findings have been reported for TikTok, where implant-related videos were found to provide low to moderate quality information and frequently lacked comprehensive clinical content[10]. However, existing evidence has been derived predominantly from English-language platforms such as YouTube and TikTok. Little is known about the quality of implant-related information disseminated through major Chinese social media platforms, despite their extensive use by Chinese patients seeking health information. Furthermore, few studies have compared multiple social media platforms using complementary measures of content completeness and educational quality.

Against this background, the present study aimed to evaluate the quality and content characteristics of implant-related videos available on three major Chinese social media platforms: Bilibili, Douyin, and Xiaohongshu. Specifically, the study assessed both the completeness of implant-related information using a novel Implant Content Score (ICS) and the overall educational quality using the Global Quality Scale (GQS). In addition, differences in information quality among platforms and the associations

between video characteristics and information quality metrics were investigated. The findings of this study may provide insights into the current landscape of implant-related information on Chinese social media and help identify areas for improvement in online patient education.

2 Methods

2.1 Study Design

This cross-sectional content analysis evaluated the quality and characteristics of implant-related videos available on three major Chinese social media platforms: Bilibili, Xiaohongshu, and Douyin (the Chinese counterpart of TikTok). The study aimed to assess the completeness and educational quality of implant-related information and to compare content quality across different platforms.

This study involved a retrospective analysis of publicly available videos from social media platforms. No direct interaction with human participants was undertaken, and no identifiable personal information was collected or analyzed. Because the study used only publicly available, non-identifiable data and did not involve human participants, ethics approval and informed consent to participate were not required. All procedures were conducted in accordance with relevant institutional guidelines and regulations.

2.2 Video Search Strategy

Video searches were conducted on June 10, 2026, on three major Chinese social media platforms: Bilibili, Xiaohongshu, and Douyin (the Chinese counterpart of TikTok). The Chinese keyword “种植牙” (“dental implant”) was used as the search term on all platforms.

To minimize the potential influence of personalized recommendation algorithms, searches were performed using newly registered accounts with no prior viewing history or user interactions. For each platform, the first 100 videos returned by the default search function were screened for eligibility. Video titles, links, and relevant metadata were recorded at the time of data collection.

All searches were completed on the same day to reduce temporal variations in search results and platform content.

2.3 Eligibility Criteria

Videos were included if they primarily focused on dental implant treatment and were available for public viewing at the time of data collection. Both educational and experience-sharing videos were eligible for inclusion, regardless of the uploader type.

Videos were excluded if they met any of the following criteria: (1) unrelated to dental implant treatment (N1); (2) duplicate videos appearing within the search results (N2); (3) purely promotional or advertising content without substantive educational information (N3); or (4) unavailable for viewing or inaccessible at the time of assessment (N4).

All retrieved videos were screened according to these predefined eligibility criteria before inclusion in the final analysis.

2.4 Data Extraction

For each included video, the following information was extracted and recorded: platform, ranking position within the search results, video duration, number of likes, favorites, and comments. Additional characteristics included uploader type, video type, presence of individuals in the video, and whether treatment costs or implant brands were mentioned.

Uploader types were categorized as dentist, healthcare institution, science communicator, commercial account, or general user. The presence of individuals was classified as dentist appearing on screen, non-dentist appearing on screen, or no individual appearing on screen.

All data were extracted manually using a standardized data collection form developed for this study.

2.5 Content Evaluation

2.5.1 Implant Content Score (ICS)

To evaluate the completeness of implant-related information, an Implant Content Score (ICS) was developed for this study. The scoring system consisted of 10 content domains: indications (ICS1), risk factors and contraindications (ICS2), diagnostic assessment (ICS3), treatment procedures (ICS4), complications (ICS5), scientific accuracy (ICS6), maintenance and follow-up (ICS7), prognosis (ICS8), professional assessment (ICS9), and comprehensive treatment planning (ICS10).

Each domain was scored as either present (1 point) or absent (0 points), resulting in a total score ranging from 0 to 10. Higher scores indicated more comprehensive coverage of implant-related information. The detailed definitions and scoring criteria of the Implant Content Score (ICS), together with the study dataset and variable codebook, are provided in Supplementary Dataset S1.

2.5.2 Global Quality Scale (GQS)

Overall educational quality was assessed using the Global Quality Scale (GQS), a validated five-point instrument widely used in studies evaluating online health information. Videos were scored from 1 to 5, with higher scores indicating better educational quality, greater usefulness for viewers, and more comprehensive information delivery.

All content evaluations were performed independently by a single investigator (K.Y.), an oral and maxillofacial surgeon with clinical experience in implant dentistry, using predefined assessment criteria. The investigator developed the Implant Content Score (ICS) prior to data collection and evaluated all videos using predefined assessment criteria to ensure consistent assessment across all platforms.

2.6 Statistical Analysis

Statistical analyses were performed using IBM SPSS Statistics version 29.0 (IBM Corp., Armonk, NY, USA).

Categorical variables were summarized as frequencies and percentages, whereas continuous variables were presented as median and interquartile range (IQR) because the data were not normally distributed.

Differences in the reporting frequencies of individual ICS domains among platforms were evaluated using the chi-square test. Comparisons of video duration, ICS total scores, and GQS scores across platforms were performed using the Kruskal–Wallis test. Associations between video characteristics and information quality were assessed using Spearman rank correlation analysis.

All statistical tests were two-tailed, and a $P < 0.05$ was considered statistically significant.

3 Results

3.1 Video Selection

A total of 300 videos were retrieved from the three social media platforms, including Bilibili, Douyin, and Xiaohongshu, with the first 100 search results screened from each platform. After applying the predefined inclusion and exclusion criteria, 250 videos were included in the final analysis.

Among the 50 excluded videos, 26 were unrelated to dental implant treatment, 22 were duplicate videos, 1 was classified as purely promotional content without educational value, and 1 video was unavailable for viewing. Ultimately, 83 videos from Bilibili, 79 videos from Douyin, and 88 videos from Xiaohongshu were included in the study. The video selection process is illustrated in Figure 1.

3.2 Characteristics of Included Videos

The characteristics of the included videos are presented in Table 1. A total of 250 implant-related videos were analyzed, including 83 videos from Bilibili, 79 from Douyin, and 88 from Xiaohongshu.

Table 1. Characteristics of Included Videos by Platform				
Variable	Bilibili (n=83)	Douyin (n=79)	Xiaohongshu (n=88)	P value
Video duration, sec	217 (122–373)	59 (44–88)	74 (34–136)	<0.001
Likes	138 (42–491)	234 (38–909)	66 (18–391)	—
Comments	50 (8–258)	28 (3–167)	12 (3–63)	—
Favorites	112 (29–393)	118 (16–579)	28 (10–247)	—

Data are presented as median (IQR). P values were calculated using the Kruskal–Wallis test.

Significant differences in video duration were observed among the three platforms ($P < 0.001$). Bilibili videos were substantially longer than those on Douyin and Xiaohongshu, with a median duration of 217 seconds compared with 59 and 74 seconds, respectively. In contrast, Douyin videos were generally shorter and more concise.

User engagement metrics also varied across platforms. Douyin videos tended to receive higher numbers of likes, whereas Bilibili videos attracted more comments and favorites. Xiaohongshu videos generally showed lower engagement metrics than those on the other two platforms. These findings suggest distinct content presentation styles and audience interaction patterns across the three social media platforms.

3.3 Content Characteristics of Implant-Related Videos

The content characteristics of the included videos are summarized in Table 2. Among the evaluated content domains, scientific accuracy (ICS6) was the most frequently observed component, being present in 97.2% of videos. Treatment procedures (ICS4) were also commonly discussed, appearing in 55.6% of videos.

Table 2. Content Characteristics of Implant-Related Videos

ICS Item	Overall n (%)
ICS1 Indications	79 (31.6%)
ICS2 Risk factors/Contraindications	59 (23.6%)
ICS3 Diagnostic assessment	67 (26.8%)
ICS4 Treatment procedure	139 (55.6%)
ICS5 Complications	62 (24.8%)
ICS6 Scientific accuracy	243 (97.2%)
ICS7 Maintenance and follow-up	48 (19.2%)
ICS8 Prognosis	47 (18.8%)
ICS9 Professional assessment	31 (12.4%)
ICS10 Comprehensive treatment planning	22 (8.8%)

In contrast, several clinically important topics were infrequently addressed. Information regarding indications (ICS1), diagnostic assessment (ICS3), risk factors and contraindications (ICS2), and complications (ICS5) was present in fewer than one-third of the videos. Furthermore, maintenance and follow-up (ICS7), prognosis (ICS8), and professional assessment (ICS9) were discussed in less than 20% of the videos.

Notably, comprehensive treatment planning (ICS10) was the least frequently reported content domain, appearing in only 8.8% of videos. This finding indicates that although procedural aspects of implant therapy were commonly presented, broader treatment planning considerations were rarely addressed across the included social media platforms.

3.4 Comparison of Content Quality Across Platforms

Significant differences in content quality were observed among the three social media platforms (Table 3). The median ICS total score was highest for Bilibili (4.0), followed by Xiaohongshu (3.0) and Douyin (2.0). Kruskal–Wallis analysis demonstrated a significant difference in ICS total scores across platforms ($P < 0.001$). Similarly, significant differences were observed in GQS scores ($P < 0.001$), with Bilibili demonstrating the highest overall educational quality.

Table 3. Comparison of Overall Video Quality Across Platforms

Variable	Bilibili (n=83)	Douyin (n=79)	Xiaohongshu (n=88)	P value
ICS total score	4.0	2.0	3.0	<0.001
GQS	3.0	3.0	2.0	<0.001

Data are presented as median scores.

Kruskal–Wallis test		
Outcome	H statistic	P value
ICS total score	30.92	<0.001
GQS	37.54	<0.001

The distribution of individual ICS components also differed among platforms (Table 4). Significant differences were identified for indications (ICS1, $P < 0.001$), treatment procedures (ICS4, $P < 0.001$), complications (ICS5, $P < 0.001$), prognosis (ICS8, $P = 0.034$), and professional assessment (ICS9, $P = 0.016$). For these domains, Bilibili generally demonstrated higher reporting frequencies than Douyin and Xiaohongshu. The distribution of ICS scores across platforms is presented in Figure 2.

Table 4. Comparison of ICS Components Across Platforms

ICS Item	Bilibili (n=83)	Xiaohongshu (n=88)	Douyin (n=79)	P value
ICS1 Indications	37 (44.6%)	35 (39.8%)	7 (8.9%)	<0.001
ICS2 Risk factors/Contraindications	19 (22.9%)	17 (19.3%)	23 (29.1%)	0.325
ICS3 Diagnostic assessment	29 (34.9%)	21 (23.9%)	17 (21.5%)	0.116
ICS4 Treatment procedure	64 (77.1%)	54 (61.4%)	21 (26.6%)	<0.001
ICS5 Complications	30 (36.1%)	26 (29.5%)	6 (7.6%)	<0.001
ICS6 Scientific accuracy	81 (97.6%)	84 (95.5%)	78 (98.7%)	0.424
ICS7 Maintenance and follow-up	19 (22.9%)	12 (13.6%)	17 (21.5%)	0.252
ICS8 Prognosis	23 (27.7%)	14 (15.9%)	10 (12.7%)	0.034
ICS9 Professional assessment	15 (18.1%)	13 (14.8%)	3 (3.8%)	0.016
ICS10 Comprehensive treatment planning	9 (10.8%)	7 (8.0%)	6 (7.6%)	0.721

Data are presented as n (%). P values were calculated using the χ^2 test.

In contrast, no significant differences were observed for risk factors and contraindications (ICS2), diagnostic assessment (ICS3), scientific accuracy (ICS6), maintenance and follow-up (ICS7), or comprehensive treatment planning (ICS10) (all $P > 0.05$). Notably, comprehensive treatment planning was infrequently addressed across all three platforms, with reporting rates below 11%.

3.5 Factors Associated With Information Quality

The associations between video characteristics and information quality are presented in Table 5. Spearman correlation analysis revealed a moderate positive correlation between video duration and ICS total score ($r = 0.490$, $P < 0.001$), indicating that longer videos tended to provide more comprehensive implant-related information.

Table 5. Association Between Video Characteristics and Information Quality

Variable	Spearman r	P value
Video duration (seconds)	0.490	<0.001
Likes	0.055	0.389
Favorites	0.096	0.131
Comments	0.053	0.405

Spearman rank correlation analysis between video characteristics and ICS total score.

In contrast, no significant correlations were observed between ICS total score and the numbers of likes ($r = 0.055$, $P = 0.389$), favorites ($r = 0.096$, $P = 0.131$), or comments ($r = 0.053$, $P = 0.405$). These findings suggest that user engagement metrics were not reliable indicators of the informational completeness of implant-related videos.

4 Discussion

The present study evaluated the quality and characteristics of implant-related videos on three major Chinese social media platforms using both a newly developed Implant Content Score (ICS) and the Global Quality Scale (GQS). Overall, substantial variation in information quality was observed across platforms. Bilibili demonstrated the highest content completeness and educational quality, whereas Douyin and Xiaohongshu generally provided less comprehensive information. Although scientific accuracy was frequently observed, several clinically important topics, including complications, maintenance, prognosis, and comprehensive treatment planning, were inadequately addressed. These findings are consistent with previous studies evaluating implant-related content on YouTube and TikTok, which similarly reported deficiencies in content completeness, reliability, and educational value[8–10]. Collectively, these findings suggest that while social media platforms may serve as accessible sources of implant-related information, the educational quality and comprehensiveness of such content remain inconsistent. In addition, longer videos were associated with higher information quality, whereas user engagement metrics such as likes, comments, and favorites showed no significant relationship with content completeness.

Significant differences in information quality were observed among the three social media platforms. Bilibili achieved the highest scores in both ICS and GQS assessments, suggesting that its implant-related videos generally provided more comprehensive and educationally valuable information. One possible explanation is the platform's emphasis on longer-form content, which allows creators to discuss diagnostic considerations, treatment procedures, risks, and follow-up care in greater detail. Indeed, the median video duration on Bilibili was substantially longer than that observed on Douyin and Xiaohongshu, and video duration was positively associated with ICS scores in the present study. Previous studies evaluating implant-related and health-related videos on social media have similarly reported that longer and more structured content tends to provide higher-quality educational information[7–9, 11].

In addition to video duration, platform-specific content ecosystems may also contribute to the observed differences. Bilibili is widely recognized for supporting longer educational videos and in-depth knowledge sharing, whereas Douyin primarily emphasizes short-form, rapidly consumable content. Previous research has suggested that social media platforms influence not only how health information is disseminated but also how users engage with and interpret such information[12, 13]. These platform characteristics may partly explain why Bilibili videos demonstrated superior performance in both content completeness and overall educational quality.

An interesting finding was the discrepancy between ICS and GQS rankings for Xiaohongshu and Douyin. Although Xiaohongshu videos achieved higher ICS scores than Douyin videos, their GQS scores were lower. This suggests that content completeness and overall educational quality may represent distinct dimensions of information quality. Previous studies evaluating online health information have similarly emphasized that information quality is a multidimensional construct that cannot be fully captured by a single assessment tool[14, 15].

A possible explanation is that many Xiaohongshu videos consist of patient-generated experience-sharing content, which often mentions multiple aspects of implant treatment but may lack systematic organization, evidence-based explanations, or comprehensive educational value. Social media platforms are increasingly used to share personal health experiences, and such content may enhance relatability and user engagement while varying substantially in reliability and educational quality[12, 13]. In contrast, Douyin videos may present information in a more accessible and engaging manner despite covering fewer implant-related content domains. Consequently, videos may achieve favorable educational quality ratings despite providing less comprehensive implant-related information.

These findings highlight the importance of evaluating both content completeness and educational quality when assessing health information on social media platforms. The discrepancy observed in the present study suggests that reliance on a single assessment instrument may not fully capture the multidimensional nature of information quality, supporting the complementary use of both ICS and GQS in future evaluations.

One of the most notable findings of the present study was the extremely low reporting frequency of comprehensive treatment planning, which was observed in only 8.8% of the included videos. While many videos focused on procedural aspects of implant therapy, few discussed implant treatment within the broader context of overall oral health, functional rehabilitation, or alternative treatment options.

This finding may reflect the content preferences of social media platforms, where concise and procedure-oriented presentations are often favored over more comprehensive clinical discussions. However, from a clinical perspective, implant therapy should not be viewed as an isolated intervention. Contemporary implant treatment planning requires consideration of multiple factors, including periodontal status, remaining dentition, occlusal conditions, systemic health, patient expectations, and long-term maintenance requirements[16, 17]. Furthermore, successful implant therapy depends not only on surgical placement but also on appropriate case selection, risk assessment, and long-term supportive care[18, 19].

Failure to address these considerations may result in an oversimplified understanding of implant therapy among viewers. The low frequency of comprehensive treatment planning identified in this study therefore highlights a substantial gap between the information commonly presented on social media and the principles of patient-centered treatment planning advocated in contemporary implant dentistry. Future educational content should place greater emphasis on clinical decision-making and individualized treatment planning rather than focusing exclusively on surgical procedures.

The present study also identified a moderate positive association between video duration and information quality. Longer videos tended to achieve higher ICS scores, suggesting that increased video length may provide content creators with greater opportunities to discuss diagnostic considerations, treatment procedures, complications, maintenance, and prognosis in a more comprehensive manner. This finding is consistent with previous studies evaluating implant-related and health-related videos on social media, which reported that longer videos generally contained more complete and educationally valuable information[8, 9, 11].

In contrast, user engagement metrics, including likes, comments, and favorites, were not significantly associated with information quality. Similar observations have been reported in studies of YouTube-based dental education and online health information, where video popularity was found to be a poor predictor of content reliability and educational value[9, 12]. This discrepancy may reflect the influence of factors unrelated to information quality, such as entertainment value, visual presentation, emotional appeal, or platform-specific recommendation algorithms. Therefore, highly popular videos should not necessarily be assumed to provide accurate or comprehensive health information.

This study has several strengths. To our knowledge, it is among the first to comprehensively evaluate implant-related videos across three major Chinese social media platforms. In addition to assessing overall educational quality using the GQS, we developed the Implant Content Score (ICS) to evaluate the completeness of implant-specific information. The combined use of these instruments provided complementary perspectives on information quality and enabled a more detailed comparison of content characteristics across platforms. Notably, the discrepancy observed between ICS and GQS scores suggests that content completeness and educational quality may represent distinct dimensions of health information quality, highlighting the value of a multidimensional assessment approach.

Several limitations should also be acknowledged. First, social media content is highly dynamic, and the quality and availability of videos may change over time. Second, only the first 100 search results from each platform were evaluated, which may not fully represent all implant-related content available online. Third, the study focused exclusively on Chinese-language videos and therefore may not be generalizable to other linguistic or cultural contexts. Finally, content evaluation was performed by a single investigator, which may have introduced evaluator-related bias despite the use of predefined scoring criteria.

Future studies should evaluate implant-related content across additional social media platforms and explore the applicability of the ICS in different languages and healthcare settings. Further validation and refinement of the ICS, including assessments of inter-rater reliability and cross-platform applicability, may help establish a standardized framework for evaluating implant-related information quality on social media. Such efforts may ultimately contribute to improving the quality of online patient education in implant dentistry.

5 Conclusions

The quality of implant-related information on Chinese social media platforms varies substantially. Bilibili provided the most comprehensive and educationally valuable content, whereas clinically important topics such as comprehensive treatment planning were frequently overlooked across all platforms. The findings further suggest that content completeness and educational quality represent distinct dimensions of information quality and should be evaluated using complementary assessment tools. Efforts to improve the quality and comprehensiveness of implant-related educational content on social media may enhance patient understanding and support informed treatment decision-making.

Abbreviations

GQS: Global Quality Scale

ICS: Implant Content Score

IQR: Interquartile Range

Declarations

Ethics approval and consent to participate

This study involved a retrospective analysis of publicly available videos from social media platforms. No direct interaction with human participants was undertaken, and no identifiable personal information was collected or analyzed. In accordance with institutional policy governing research involving exclusively publicly available, non-identifiable data, ethics approval and informed consent to participate were not required. The study was conducted in accordance with relevant institutional guidelines and regulations.

Consent for publication

Not applicable.

Availability of data and materials

All data generated or analysed during this study are included in this published article and its supplementary information files.

Competing interests

The authors declare that they have no competing interests.

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Authors' contributions

KY conceived and designed the study, developed the Implant Content Score (ICS), supervised the research process, and critically revised the manuscript. SG drafted the manuscript and contributed to data collection and interpretation. ZX performed the statistical analyses and contributed to data interpretation. QH prepared the figures and tables. YG provided scientific supervision and methodological guidance throughout the study. All authors read and approved the final manuscript.

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Figures

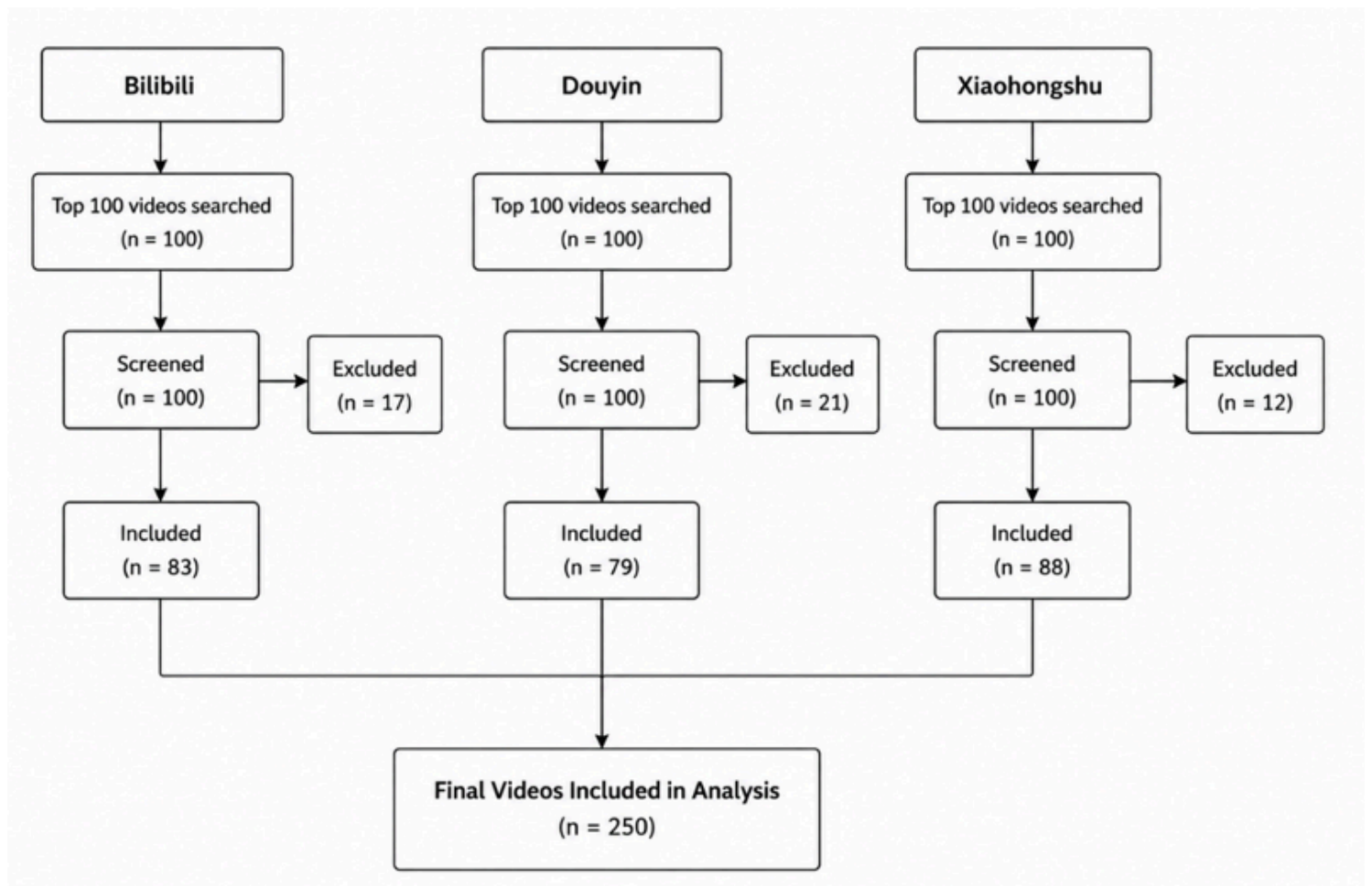


Figure 1

Flow Diagram of Video Selection

Flowchart illustrating the identification, screening, eligibility assessment, and inclusion of implant-related videos from Bilibili, Douyin, and Xiaohongshu. A total of 300 videos (100 from each platform) were identified using the search term “种植牙” (“dental implant”). After applying predefined inclusion and exclusion criteria, 250 videos were included in the final analysis.

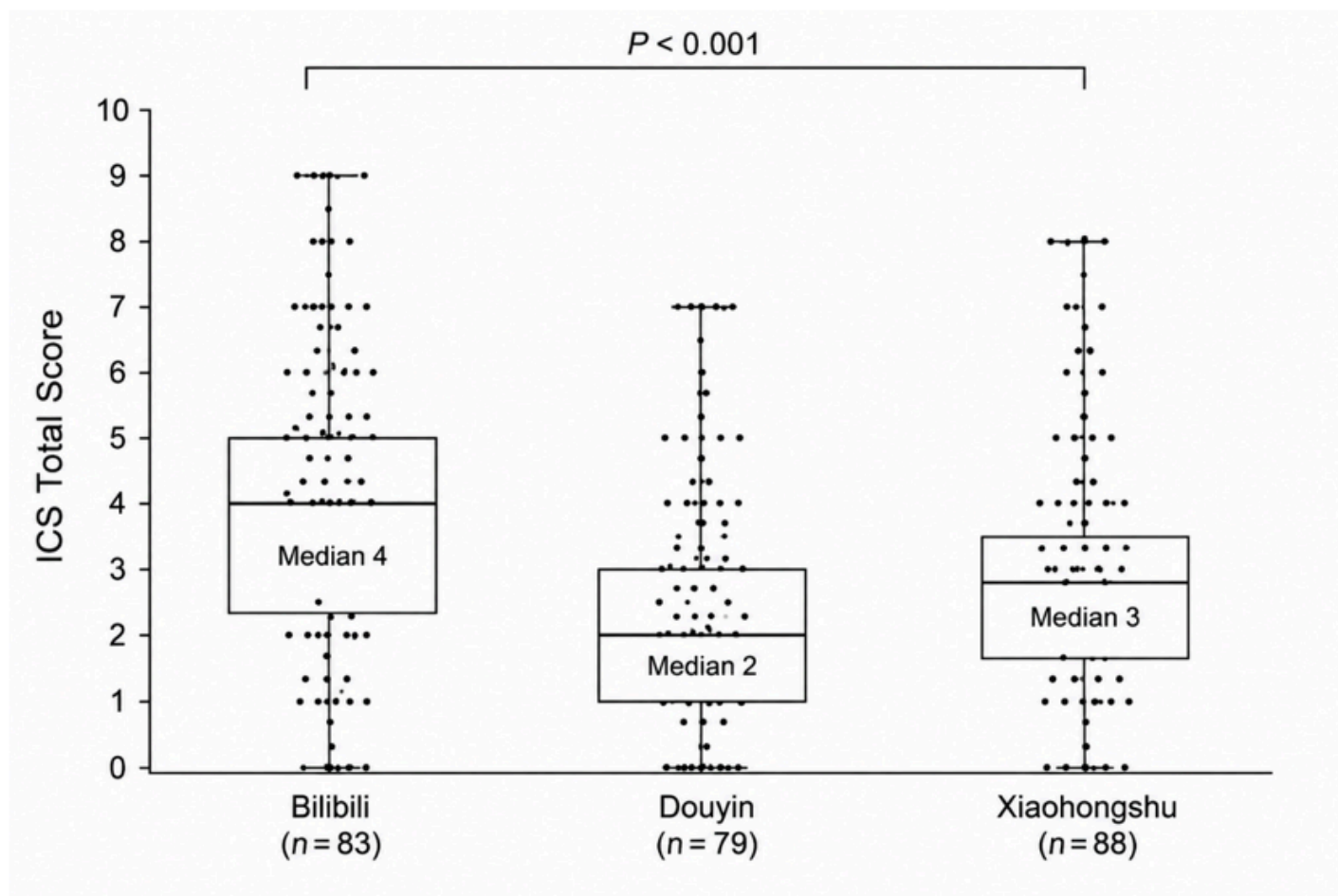


Figure 2

Distribution of Implant Content Score Across Social Media Platforms

Boxplots with jittered data points illustrate the distribution of Implant Content Score (ICS) total scores for implant-related videos from Bilibili ($n = 83$), Douyin ($n = 79$), and Xiaohongshu ($n = 88$). The horizontal line within each box represents the median, the box boundaries represent the interquartile range (IQR), and the whiskers extend to $1.5 \times$ IQR. Individual data points represent included videos. Overall differences among platforms were assessed using the Kruskal–Wallis test ($P < 0.001$).

Abbreviation: ICS, Implant Content Score.

Supplementary Files

This is a list of supplementary files associated with this preprint. Click to download.

- [SupplementaryDatasetS1Final.xlsx](#)