



DR. MIKE WILL SEE YOU NOW

The doctor-turned-YouTube-sensation offers his own brand of “edutainment” to counter medical misinformation. But is it really a good idea to get health advice from a hot stranger on the Internet? **BY ANNA PEELE**

THE CORONAVIRUS pandemic has left us waiting for divine intervention: an antiviral treatment, herd immunity, a vaccine, a cure.

But what counts as a miracle in the age of COVID-19 is delivered on YouTube by a 30-year-old man who looks like a cast member from *Grey’s Anatomy* but is, in fact, a real-life physician—albeit one who, until recently, was mostly posting YouTube videos with titles like “Real Doctor Reacts to *Grey’s Anatomy*.”

“Oh my God,” Doctor Mike says from a couch in his Manhattan home office in a March 8 YouTube video. “There is so much misinformation going on with this novel coronavirus, it boggles my mind.” Then, as

the self-appointed ombudsman of public health, he dismantles each of those pieces of misinformation.

He’s aghast that CNBC commentator Rick Santelli suggested it might be better for everybody to get COVID-19 at once because “then in a month it would be over.” That’s not how to flatten the curve and keep hospitals from being overwhelmed, Doctor Mike points out. Another dispatch, titled “Doctor VS Coronavirus Conspiracy Theories,” features a thumbnail of Homer Simpson and dispels the myth that you can sanitize your hands with Tito’s vodka. In one of the (many) others, Doctor Mike uses the evocative term “germ hangtime,” which brings to mind Michael

Jordan’s iconic 1997 flu game.

“I like to call it edutainment,” Doctor Mike tells me over the phone in March. (We couldn’t meet in person because, well, because.) “Where it’s like education-slash-entertainment.”

Doctor Mike films some of these videos in monogrammed scrubs—the cursive *D* and *M* combine to resemble a floridly coiled stethoscope—and presents his gospel of truth with eyes wide enough to express his concern and show how blue they are and a mouth open enough to clearly enunciate each medical term and expose his perfect teeth. His energy is carefully calibrated to keep viewers, as he says in many videos, “alert, not anxious.”

Courtesy Doctor Mike

Michael George/The New York Times/Redux

But is it really a good idea to take advice from strangers on the Internet? Though Doctor Mike is careful to direct his audience to the Centers for Disease Control and Prevention—there is a link underneath all of his coronavirus videos—he’s competing for eyeballs and attention in a digital environment where hacks and hucksters run wild and where solid, unsexy health advice rarely performs as well as videos promising magical heal-alls.

Other, more conventional doctors have seen viewership spike during the pandemic: MedCram’s YouTube channel increased its subscribers by about 50 percent, and Dr. Franz Wiesbauer earned hundreds of thousands of new views after switching to COVID-19 explainers. But Doctor Mike is proving that we want our facts with flair, something plenty of board-certified health-fluencers are trying to adopt.

His channel has more than 5 million subscribers and over 500 million views, impressing even skeptical *New York Times* media columnist Ben Smith, who described the osteopathic physician as a “solid” source of health facts for young people. (Osteopaths approach wellness holistically, and osteopathic physicians are fully licensed with the same privileges as traditional M.D.s.) Like tricking a dog into swallowing medicine by smothering it in peanut butter, Doctor Mike knows that the way to convey crucial medical data is in short, colloquial videos, delivered by someone quite knowledgeable and quite hot.

BEFORE HE became Doctor Mike, Mikhail Varshavski was born in the Soviet Union in 1989. When he was a child, his family moved to Bay Ridge, Brooklyn, because, he says, his father “worked in the local [Russian] police force as a doctor but knew that he could never go past that rank, simply because he was Jewish.” When Oskar Varshavski got to the U.S., he had to repeat his education.

Around this time, a young Mikhail figured he’d received enough secondhand information from his father’s studies to treat his classmates’ sports injuries when they asked him for advice. Watching his

father redo medical school gave him the awareness to see “how much BS there was out in the world of folks making claims for snake oil,” Doctor Mike says. “I’ve always grown up with the theory that you can make money but also be authentic and achieve great things.”

This is the dilemma of someone succeeding in a crisis. Though Doctor Mike still practices family medicine in suburban New Jersey, he estimates that 99 percent of his income comes from media appearances and his YouTube channel, where subscribers have jumped about 20 percent since he started posting coronavirus videos. But is it profiteering if the thing making you money is the dissemination of vital public-health information?

Doctor Mike’s initial career goals were, if not impure, at least perhaps less noble than curbing a global pandemic. While he was studying for his osteopathic medical boards at the New York Institute of Technology in 2012, he says, a nursing student introduced him to Instagram. He remembers colleagues telling him, “Mike, you do really well in medical school, but you also have a really healthy balance of exercise and social life. Why don’t you tell people about it?”

By 2015, Doctor Mike had gained enough of an Instagram following that BuzzFeed published a deeply horny article called “Um, You Really Need to See This Hot Doctor and His Dog,” featuring Doctor Mike cavorting with his similarly cobalt-eyed husky, Roxy. He says he was approached by producers from *The Bachelor*, *Steve Harvey*, and *Ellen*, where he elected to make his television debut in September 2015. But his *Ellen* appearance was bumped by Hillary Clinton coming on the show to talk about her run for president.

Then Doctor Mike had an epiphany: He could Trojan-horse discussions of preventive care through his hot-doctoriness. “I said, Wait, what if I make this my own, and we do the hot-doctor thing to get people to watch, but then we don’t have to corrupt the medical information?”

Doctor Mike began turning up on *Good Morning America*, *Today*, *Rachael Ray*, and Maria Bartiromo’s Fox Business show. In 2015, he was named *People*’s Sexiest Doctor Alive. Three years and well over a couple hundred videos ago, Doctor Mike launched his YouTube channel. The first entry is a flex: Doctor Mike modestly introduces himself, cuing b-roll of him getting



▲ Doctor Mike films his YouTube videos at home, a process that he can easily continue in times of turmoil.

out of bed, pulling his dripping muscles out of a pool, and heading to the hospital to save lives, all over sound bites from Chris Harrison and Dr. Oz extolling his vast attractiveness and vast number of followers.

Yes, with his videographer and lone creative partner, Daniel Owens, Doctor Mike has made videos about nose picking and the inaccuracies of the TV series *House*. But he also uses his platform to debunk the kind of miracle cures espoused by his fan Dr. Oz by employing his own panacea: honesty and sourcing.

And that is why on January 29, eight days after the first U.S. case was confirmed by the CDC and four days before President Trump erroneously claimed any outbreak had been “pretty much shut down,” Doctor Mike began creating videos about a disease called COVID-19. He explains what a novel coronavirus is (an animal virus that can mutate to infect humans), what the symptoms are (fever, cough, shortness of breath), how it spreads (airborne and surface particles), and what to do if you think you have it (call your doctor if symptoms persist in case you need supportive care).

Because the pandemic is evolving so rapidly, these videos have a shorter shelf life than, say, “How Much Coffee Is Too Much?” And though much of the coronavirus material has gotten millions of views, it doesn’t have the views of Doctor Mike’s medical-meme reaction videos. But it has turned a family physician into one of the faces of authority during a pandemic, without his needing to leave home.

“I think this coronavirus has been the best proof of concept ever for what I wanted to achieve,” he says. “Folks are panicking. They don’t trust the media. And they’re coming to my channel for reassurance.”

AS DOCTOR MIKE becomes more popular, he will test his theory that you can make money and achieve great things with the scientific rigor we expect of him. He’s talking with production companies about creating his own show on which, he hopes, “we’ll replace the doctors of yesterday.”

But it’s a lot easier to maintain your

“**Folks are panicking. They don’t trust the media. And they’re coming to my channel for reassurance.**”

—MIKHAIL “DOCTOR MIKE” VARSHAVSKI

purity when you’re filming ten-minute videos in your room than when you have to produce five hour-long shows a week. (Don’t forget that before Dr. Oz was being called out by the establishment for peddling silver bullets on daytime TV, he basically *was* the establishment.)

One solution for Doctor Mike is to sign endorsement deals only when he won’t have to guarantee positive coverage. He has taken money to showcase products from Audible, Thrive Market, and the health app Lifesum on YouTube and with his 3.6 million Instagram followers. His biggest partnership is with Nike; he was supposed to document his experience training for an April half marathon before it was canceled due to COVID-19.

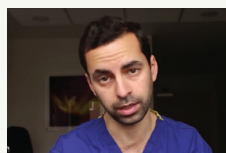
That’s more exacting than the generally laissez-faire community standards of YouTube, where there’s very little governance

over what influencers can and can’t say, even when they’re conveying information that can affect lives. “It’s difficult to know exactly what someone’s personal views are or what you might find on social media,” says Amir Barzin, D.O., of the University of North Carolina’s Department of Family Medicine.

So far, when Doctor Mike has realized that he’s caused controversy or confusion (or heard from commenters that he has), he has responded with updates. For now, we can keep our earnest faith in him—or, at the very least, in his ambition to be famous for telling the truth.

At the end of our conversation, Doctor Mike apologizes; he has to go. He tells me he plans to buy \$50,000 worth of N95 masks for the hospital where he works, which is experiencing a shortage. He needs to go deliver them. And, oh yes, he made a video about it. ■

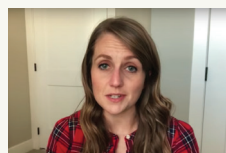
DOCTOR MIKE RECOMMENDED: HOW FIVE POPULAR YOUTUBE DOCS STACK UP



Medlife Crisis

55 vids, 193,000 subs

Rohin Francis, M.D., is a cardiologist who fact-checks pop culture and explains both the idiotic and idiomatic, like why (romantic) heartbreak actually hurts.



Mama Doctor Jones

79 vids, 344,000 subs

As a physician and mom, Danielle Jones, M.D., reacts to other YouTube videos and answers surprising questions about birth, pregnancy, and women’s health.



Chubbyemu

278 vids, 1.3 million subs

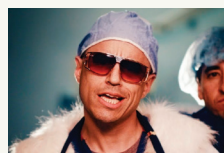
This video-game blog turned into real anecdotes from Bernard Hsu, PharmD, and his colleagues. Ever hear about the boy who ate 25 laxative brownies?



Strong Medicine

288 vids, 325,000 subs

Stanford’s Eric Strong, M.D., conducts an essential course for doctors in training and premed students wondering what the hell they’ve gotten into.



ZDoggMD

894 vids, 211,000 subs

Zubin Damania, M.D., is nothing short of the “Weird Al” Yankovic of health care, and his videos are your best prescription for 🔥🔥🔥

MAKE THE MOST OF A VIRTUAL DOCTOR VISIT

Telehealth promises to save time, money, and even lives. But not all services are equal. BY MARTY MUNSON

WITH MEDICAL care going the way of everything else—becoming faster, easier, accessible from your phone—the natural next question is “Is that a good thing?” Telehealth (getting medical care via video chat, phone, email, or even text message) grew exponentially in March. One of the best-known services,

Teladoc, had about 100,000 visits in the second week of that month alone, up 50 percent from the previous week. Other online health-care companies saw similar spikes, users saw delays, and companies sought more docs. Should you get your health care this way all the time, even when it’s not the middle of a pandemic? Here’s what to know.

THERE ARE THE **UBERS**, AND THERE ARE THE **CHAUFFEURS**

TO DELIVER care, numerous providers are at the ready—even at 2:30 A.M.—for when your coughing fit won’t stop or your pee is burning. You talk on their secure video chat or on the phone with whoever is on call. They listen, ask, diagnose, and maybe prescribe, and you can each go your own way. That’s what you can get with providers like Teladoc, Doctor on Demand, and Amwell.

But if you prefer more of a steady relationship, **companies like PlushCare let you put a virtual primary-care provider—whom you see all the time—in charge.** You’ll pay a monthly membership fee (\$15), plus either your insurance copay or \$99 (\$59 for subsequent visits). Some employers partner with the “Ubers” to offer this virtual PCP service. For people with a chronic disease like hypertension or diabetes who need frequent check-ins, having a PCP to partner with is a smart way to go.

IF YOU LIKE WHAT THEY OFFER, CHECK THEIR CRED

THE IDEAL way to virtually see a doc is to see *your* doc, so find out if yours offer telehealth. If not, the gig economy hasn’t escaped medicine—some physicians sign with companies for a certain number of hours. (Others work full-time for one place.) Either way, **before choosing a service, check who the docs are.** Don’t sign on if they’re not listed. Or “go through a trusted brand, like Walgreens or CVS,” says Joseph Kvedar, M.D., president-elect of the American Telemedicine Association. “They have more at stake if they do something wrong than an unknown brand does.”

IF IT’S URGENT, GO TO **URGENT CARE**

STICK WITH WHAT telehealth is best at. **Obviously, if you have chest pain, you need 911, not telehealth.** “Think about the office visits you’ve had in your life where the doctor didn’t really need to examine you and didn’t need to do a test,” says Dr. Kvedar. “Those are good instances for telehealth.” If you have something that needs hands-on care, like earwax removal or a throat culture, then save yourself the virtual-visit copay and go directly to urgent care. If you don’t have insurance, virtual doctor visits can cost roughly \$55 to \$100. Dermatology and mental-health visits often cost more.



TELEHEALTH FOR YOUR MIND

ANXIETY, stress, isolation, depression, major life changes, relationship issues: Anytime you’d like some perspective, online therapists help with all of that. The big players in the telehealth space—Teladoc, Doctor on Demand, Amwell—all offer this type of service, and you can see the same therapist all the time. Or find someone to talk to at a therapy-specific online provider, such as:

BetterHelp

Talk to a therapist by video, voice, or secure messaging. About \$40 to \$70 per week. [BetterHelp.com](#)

Talkspace

Made famous by Michael Phelps, this app uses an algorithm to help match you to a therapist, taking some of the hassle out of finding someone you click with. About \$65 to \$100 per week. [Talkspace.com](#)

Crisis Text Line

This is kind of like 911 for your mind. Text HOME to 741741 for crisis intervention. For crisis intervention via talk, use the National Suicide Prevention Lifeline: 800-273-8255.