everybody

What's Behind an AI *Healthcare* Answer?

Decoding the sources LLMs surface for patients and HCPs



As patients and HCPs increasingly turn to AI with health questions, understanding which sources shape those answers is becoming *critical* for healthcare brands.

To find out what sources AI uses, we tested 3,000 prompts across two markets, five therapy areas, and the patient and HCP journeys.



What shapes AI's healthcare answers?

To be successful in building share of answer we need to understand where LLMs are sourcing information. This data didn't exist, which is why our team at Everybody built this report.

The aim is to go beyond who gets cited to understand what those patterns tell us about how AI finds and uses healthcare information, and where brands can focus to build stronger AI visibility.

Ben Myall,
Everybody CEO



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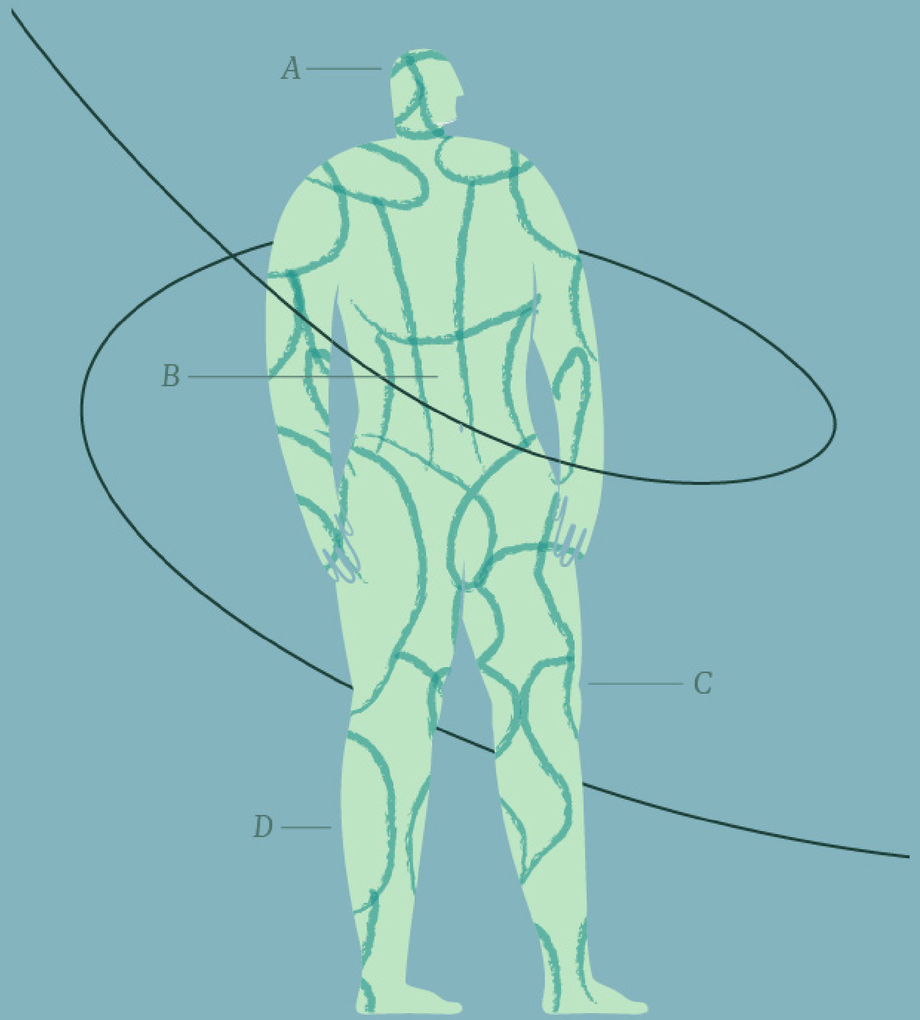


Fig 37.

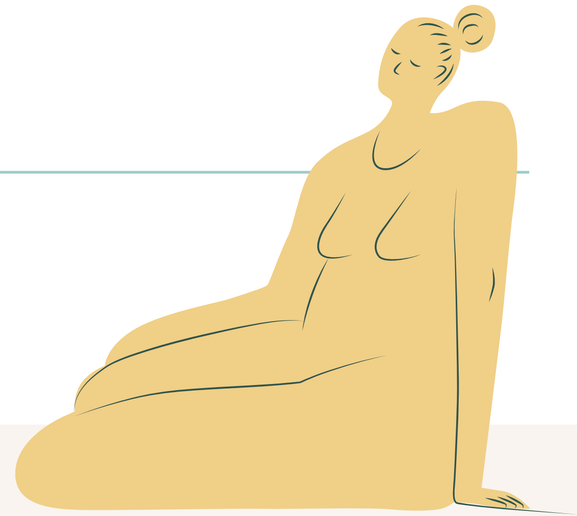
Methodology

How we tracked AI’s sources

Five therapy areas were selected to capture a broad cross-section of healthcare, spanning large patient populations in pharma and medtech.

While each has its own patterns, the broader insights can help shape AI visibility strategies across healthcare.

- Type 2 Diabetes
- Atrial Fibrillation
- Anxiety & Depression
- Obesity
- Chronic Pain



How we tracked AI's sources

Prompt design

For each therapy area, we created 600 market-specific prompts spanning patient and HCP needs across the journey.

Data collection

We tracked how ChatGPT, Perplexity, Google AI Overviews and AI Mode answered those prompts, capturing which domains they surfaced.

Analysis

We compared citation behaviour by market, audience, journey stage and therapy area to understand where AI goes for healthcare information.

What we measured

Citation frequency is how often a website is linked in AI answers. For example, 50% means at least one LLM linked to that website in its answer to half of the prompts we tracked.

Full methodology, collection periods, limitations and prompt breakdown are included in the **appendix**.



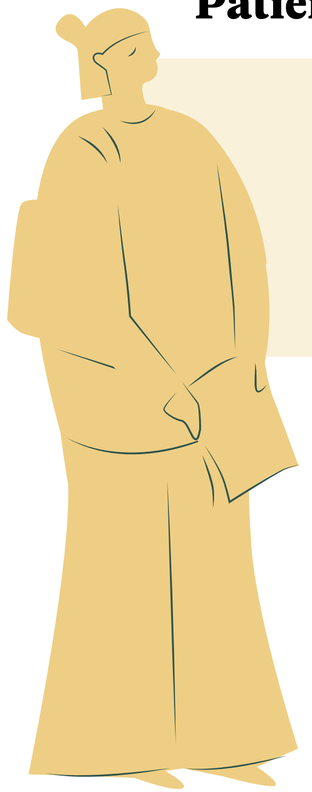
Want to know how often AI is citing your brand?

We use the same approach to determine how often your brand appears in AI answers and how often your website is cited as a source.

Get in touch to benchmark your brand's AI visibility

Audience journey stages

Different sources appear across different stages of the Patient and HCP journey.



Patient Journey

1. Symptoms

The patient becomes ***aware*** of their symptoms

2. Diagnosis

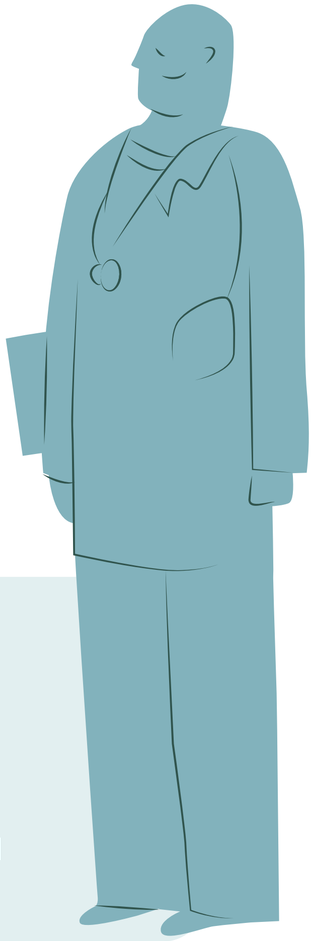
The patient ***considers*** what condition they might have and seeks diagnosis

3. Treatment

The patient works with their provider to ***decide*** on treatment

4. Management

The patient looks for ongoing ***support*** for their condition



HCP Journey

1. Awareness

The HCP becomes ***aware*** of a disease burden or unmet need

2. Understanding

Knowledge-building begins on disease pathology and available treatments

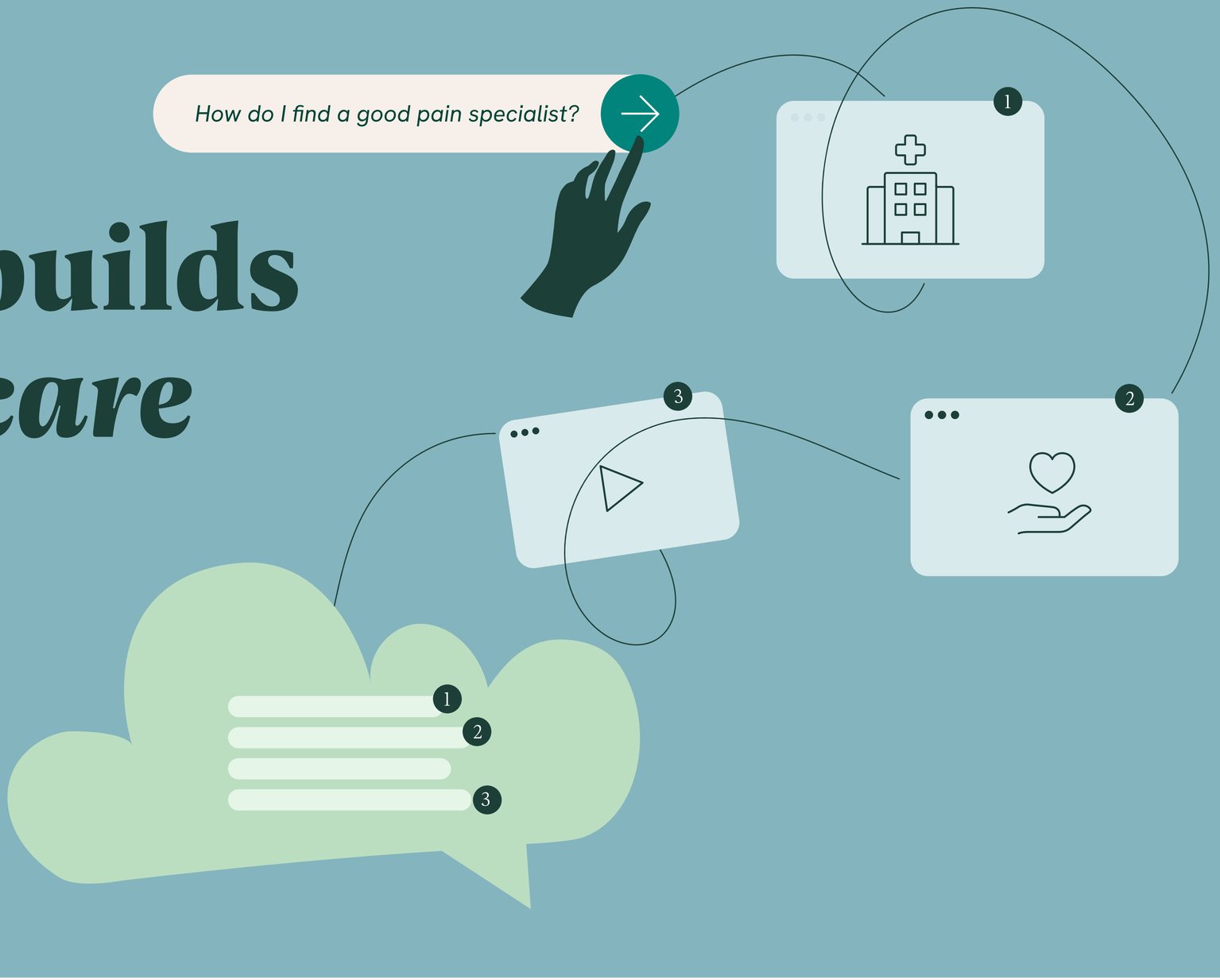
3. Confidence

HCPs look to ***resolve*** any barriers, concerns or uncertainty around a particular treatment approach

4. Adoption & Reinforcement

Following adoption, the HCP looks for ***long-term*** management and sustained practice support

How AI builds a *healthcare* answer



The five insights



01 **YouTube cuts across audiences and therapy areas**

Video is part of the source environment, not just a distribution channel.

02 **Source choices cross market boundaries**

AI doesn’t always stay local when it looks for relevant information.

03 **Audience changes the source picture**

AI stays closer to established sources for HCP questions, while drawing more widely for patient questions.

04 **Condition-specific organisations can carry real weight**

In some therapy areas, specialist patient organisations become major sources.

05 **AI visibility extends beyond the brand website**

Most of the sources shaping healthcare answers sit outside brand-owned channels.

KEY INSIGHT

YouTube is a major source in AI healthcare answers

YouTube consistently surfaces across therapy areas, markets and audiences, often alongside established medical and academic sources.



YouTube dominates as a source across audiences and therapy areas

Citation Frequency (%) for YouTube (regardless of audience)



While it appears more frequently for patient questions, its presence in HCP answers shows that video has a role beyond patient education.

THERAPY AREA HIGHLIGHT

AFib stands out, with the highest YouTube citation frequency in both markets.

The takeaway: Treat *YouTube* as a source, not just a channel



For brands, the opportunity isn't simply to make more videos. It's to create useful, clearly structured video content that can be understood, retrieved and surfaced by AI, for both patient and HCP questions.

AI Mode may be boosting YouTube's visibility

YouTube citations came largely from AI Mode, suggesting the way Google brings video into AI-generated answers may be helping YouTube surface more often.

HCP video may be an untapped opportunity

YouTube appears more often for patient questions, but its presence in HCP answers suggests an opportunity for brands to do more with HCP-focused video.

Make video easier for AI to find and use

- **Focus each video on one clear question.** Reinforce it in the title, description and chapters.
- **Make the answer easy to extract.** Use accurate transcripts and state key information clearly in the video.

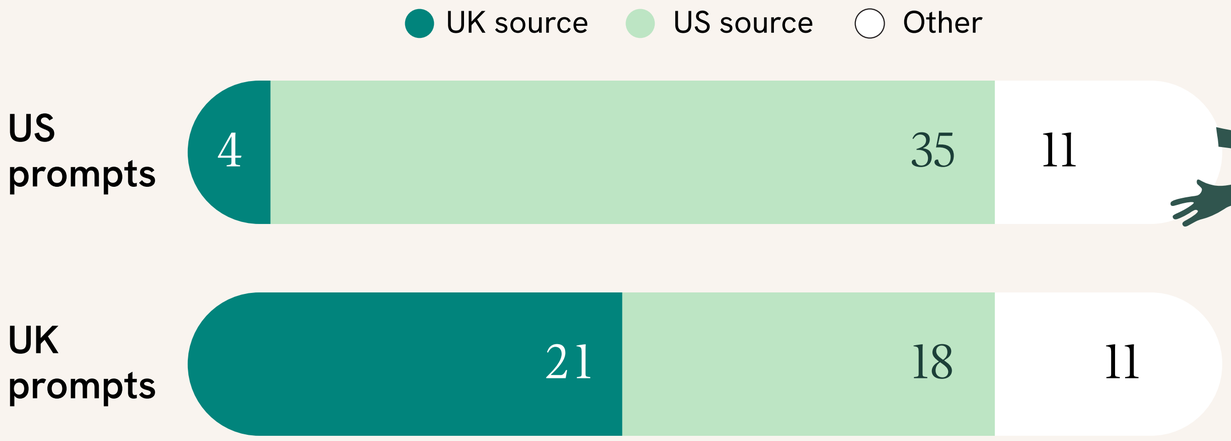
AI’s source choices don’t stop at market boundaries

Global health sites reach beyond their home market

For UK questions, AI frequently surfaces US sources, from **NIH.gov** for HCPs to **Healthline**, **WebMD** and **Mayo Clinic** for patients, accounting for more than a third of UK top-10 domains.

UK sources also appear in US answers, but much less often, accounting for just 8% of US top-10 domains.

UK vs. US sources for every TA top 10 citation list (50 total)

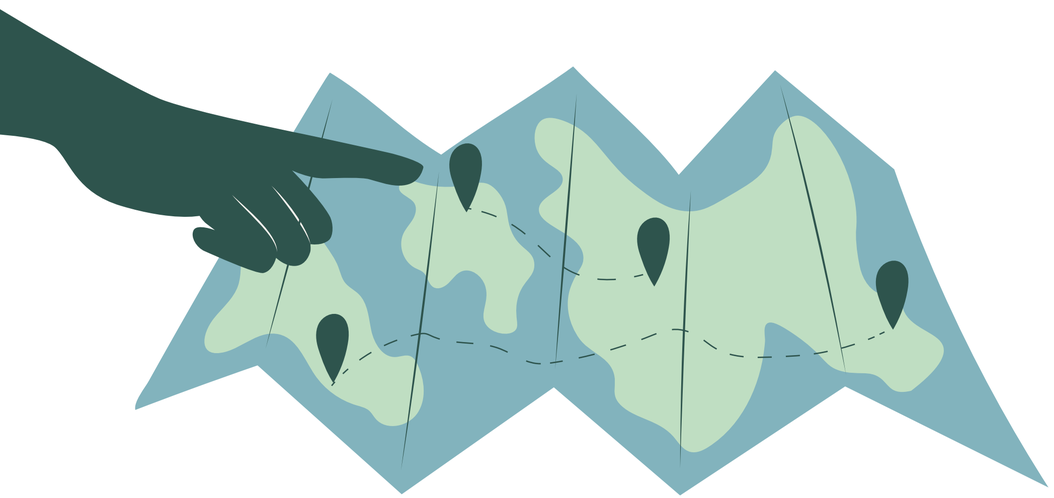


Every UK therapy area had at least one US-based source in the top 10 for both patient and HCP questions.





The takeaway: Seek accuracy, not just mentions.



AI doesn't always stay local. A question asked in one market can still lead to sources from another, which means a US source may be answering questions to a UK audience and vice versa.

Shared language makes it easier for sources to cross borders. External research suggests that for prompts not in English, most AI citations match the language of the question, though the user's location still plays a part.[1,2]

This means that it's important not only to check if your brand is mentioned but also to study the accuracy of the response.

This may highlight strategically important areas for you to strengthen the content on your owned platforms, giving a reliable, local source from which information to be retrieved.

Local sources still matter

In both markets, local sources remain prominent, consistently appearing among the top 10. This shows that by providing local, accurate information you can win share of answer and be the cited source of information.

See what AI is finding beyond your market

- **Test the same questions across markets.** Compare the local and international sources AI surfaces.
- **Look for the crossover.** Identify what frequently surfaced international sources provide that may be missing locally.

1. McCain, D. (2026) How query language reshapes AI citations. Profound, 21 April. Available at: https://www.tryprofound.com/blog/how-query-language-reshapes-ai-citations.
2. Gregorian, D. (2026) Lost in Translation: How AI Models Handle Local-Language Sources. Temso AI, 20 April. Available at: https://www.temso.ai/data/-Lost-in-Translation-How-AI-Models-Handle-Local-Language-Sources.

Consumer health sites matter most earlier in the patient journey

Across markets and therapy areas, **WebMD**, **Healthline**, **Cleveland Clinic** and **Mayo Clinic** are generally cited more often before treatment, with visibility tending to fall as the journey progresses.

In the US, this pattern was seen across most of the 20 therapy area and site combinations we tracked:

- 17 of 20 were cited less at the Management stage than at Symptoms
- 16 of 20 were cited most often before the Treatment stage

	Symptoms	*Diagnosis*	*Treatment*	*Management*
Mayo Clinic	61.7	51.3	47.6	39.5
Cleveland Clinic	53.6	43.2	36.8	31.7
WebMD	47.6	31.3	35.2	32.2
Healthline	45.0	27.8	33.7	31.6

Average citation frequency % by patient journey (markets and TAs combined)



The takeaway: Fill important content gaps along the patient journey

The sources AI draws on are not static. Consumer health sites appear to carry more weight earlier in the journey, so to be cited at these journey stages you need to provide highly credible, in-depth content, structured for AI retrieval on your owned platforms.

You should also review your offsite strategy and the content showing up on high authority consumer sites, to see what you can compliantly influence. If you can have important information included in multiple high authority sources, you stand more chance of success.



Start with the questions, then map the sources

- **Identify the sources** AI repeatedly surfaces for the questions that matter most to your audience.
- **Follow the citation trail.** Look at what those sources publish, reference and link to for clues on where you can build content and authority.

AI finds different sources for patients and HCPs

For HCP questions, AI keeps coming back to the same sources

Across every therapy area we studied, AI consistently finds HCP information through established medical and academic sources.

NIH.gov is the most consistently cited, with publishers such as **ScienceDirect** also featuring prominently.



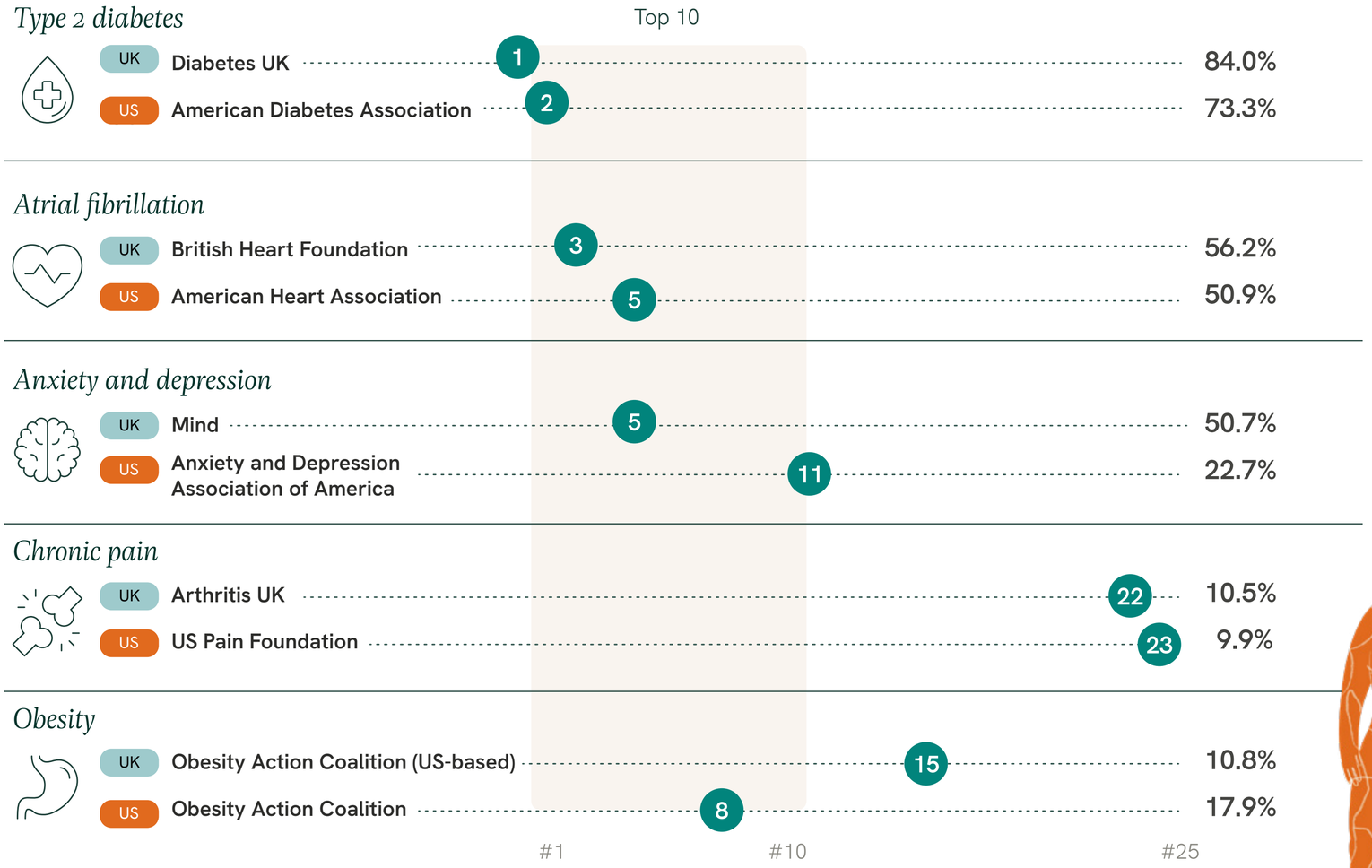
NIH.gov was cited in 97%–100% of HCP prompts for every TA across both markets.

For patient questions, AI looks beyond the usual health sources

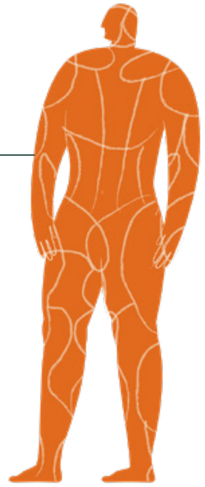
Condition-specific organisations can sit alongside much bigger consumer health sites in AI answers. But which ones appear depends heavily on the condition and market.

Diabetes UK and the **British Heart Foundation** are particularly prominent in the UK, while their US counterparts also feature strongly. But the pattern isn't consistent across therapy areas. **Mind** stands out for UK anxiety and depression, while in obesity, US-specific organisations feature more prominently across both markets than UK equivalents.

Where do condition-specific organisations rank among the sources AI cites?



Rank among all sources AI cites for each condition, patient answers. % = share of answers citing the organisation.



The takeaway: Follow where AI finds the answer

There’s no single set of sources that matters for every healthcare question. For HCP visibility, understand the established medical and academic sources AI repeatedly finds, what they publish and what they reference.

For patients, widen the lens. Look at the condition-specific organisations AI surfaces in your therapy area and market, then identify realistic opportunities to contribute, partner or build relevant visibility.



“Where AI looks depends on who’s asking, what they’re saying, and where they are in the journey. The mix of sources keep shifting. One offsite plan built for everyone will miss some of the places shaping the answer.”

Ajay Rajapakse,
Research Analyst @ Everybody



AI visibility is bigger than brand websites but they still matter

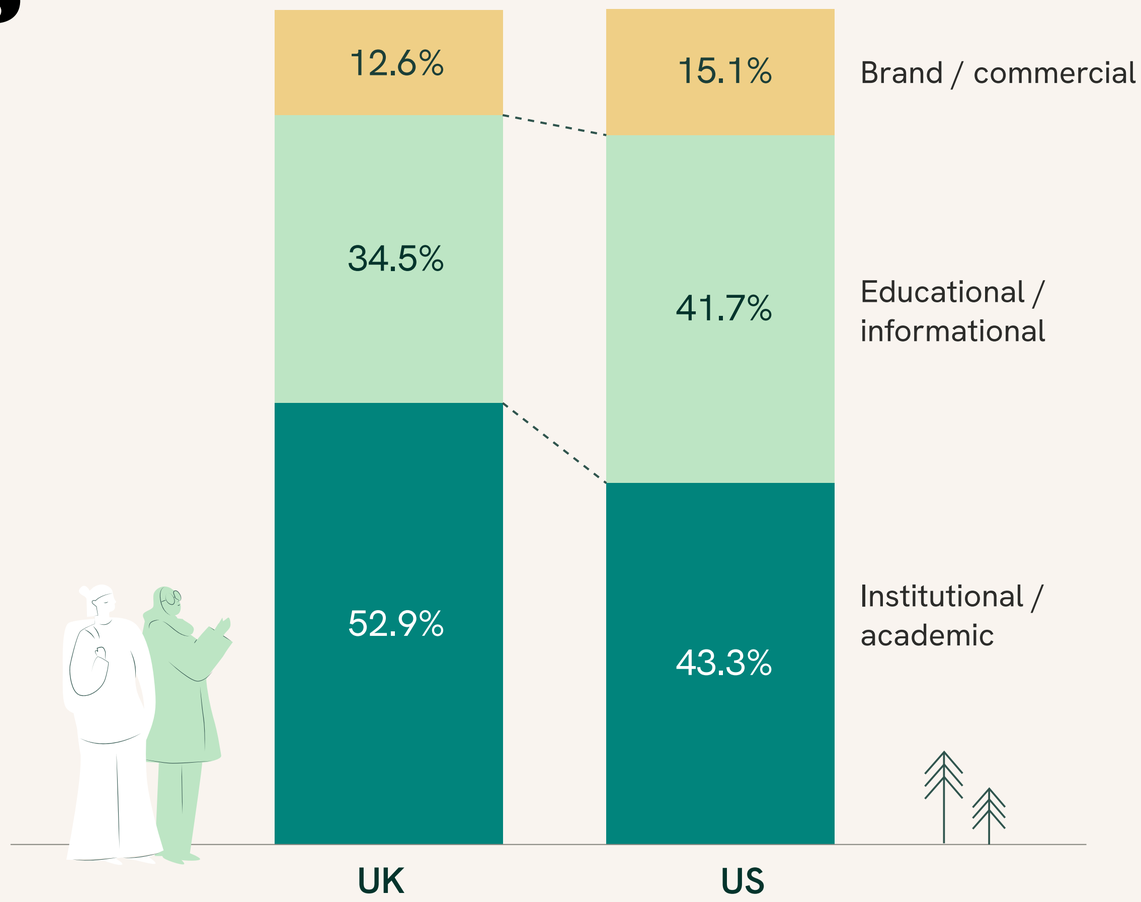
Most healthcare sources AI surfaces sit beyond brand-owned sites

Across both markets, institutional, academic and educational sources account for the majority of aggregated citation frequency. However, brand/commercial sites, still feature quite heavily in both markets.

The balance changes by market

In the UK, institutional and academic sources have a clear lead. In the US, educational and informational sources sit almost level with them.

How often is each type of source cited?*



*Shares are based on the proportion of total citation frequencies per domain group, not number of prompts or citations. Domains cited less than 1% of the time are excluded, which may slightly understate the share of brand and commercial sources.

The takeaway: Your brand website can feature in LLMs

Your own site still matters. Brand sites already account for a meaningful share of citation frequency (12.6% in the UK and 15.1% in the US), despite many not yet being optimised for AI retrieval. That suggests brand sites can play an even greater role with better optimisation. Strengthening domain authority, building out useful content and optimising for GEO can increase the chances of your site being found and cited by AI.

But offsite authority matters too. Where there are realistic opportunities to build authority through the external sources AI surfaces, brands should pursue them.



> “Owned content is AI’s starting point. Offsite authority extends your brand’s reach.”
>
> *Steff Preyer,* Head of Growth Marketing @ Everybody





How the picture changes by therapy area

AI favours *specificity*

Across the study, **NIH.gov** is one of AI's most consistent go-to sources. But for UK patient questions about diabetes, AI increasingly turns to **Diabetes UK** as the journey progresses, surfacing it more often than NIH.gov in the later stages.

That shift doesn't carry into HCP questions, where AI returns to its more familiar pattern of drawing heavily on **NIH.gov** and academic sources.

	Top 10 Patient Domains	*Citation Freq.*	*Top 10 HCP Domains*	*Citation Freq.*
1	diabetes.org.uk	84.0%	nih.gov	97.3%
2	nih.gov	71.3%	sciencedirect.com	64.7%
3	nhs.uk	65.3%	nice.org.uk	62.0%
4	youtube.com	64.7%	youtube.com	60.7%
5	mayoclinic.org	48.0%	diabetesjournals.org	54.7%
6	diabetes.org	44.7%	diabetesonthenet.com	50.0%
7	healthline.com	44.7%	diabetes.org.uk	40.7%
8	webmd.com	34.7%	wiley.com	38.7%
9	boltpharmacy.co.uk	32.7%	bmj.com	32.0%
10	cdc.gov	32.0%	springer.com	30.0%

For AI, relevance can outweigh geography

When answering US patient diabetes questions, AI doesn't keep neatly within US sources. It draws heavily on **Diabetes.org**, but also surfaces **Diabetes UK** despite the market context.

For HCP questions, the use of diabetes-specific information continues, with **Diabetes Journals** and **Diabetes.org** appearing alongside general academic sources such as **ScienceDirect**.

	Top 10 Patient Domains	*Citation Freq.*	*Top 10 HCP Domains*	*Citation Freq.*
1	nih.gov	81.3%	nih.gov	99.3%
2	diabetes.org	73.3%	diabetesjournals.org	83.3%
3	youtube.com	71.3%	sciencedirect.com	62.7%
4	cdc.gov	53.3%	youtube.com	62.0%
5	healthline.com	49.3%	diabetes.org	51.3%
6	mayoclinic.org	48.0%	wiley.com	31.3%
7	clevelandclinic.org	37.3%	bmj.com	28.7%
8	diabetes.org.uk	36.0%	oup.com	28.7%
9	diabetesjournals.org	35.3%	springer.com	26.0%
10	webmd.com	33.3%	frontiersin.org	22.7%

What this means for T2D

WHAT WE FOUND

Follow AI across the journey

For patient content, think about when different sources become useful, not just which ones appear. The sources AI draws on change as questions move through the journey.

AI looks beyond borders for the right source

Ask about diabetes in the UK and AI may turn to US sources like **Diabetes Journals**. Ask from a US patient perspective and **Diabetes UK** still shows up. For AI, relevance can matter more than geography.

WHAT TO DO

Build authority beyond your own channels

Look at the sources AI already surfaces, what they publish and what they link to, then identify realistic opportunities to build relevant onsite and offsite authority.



Try it yourself

Does AI stay within your market when choosing sources?

PATIENT *What should my blood sugar levels be if I have type 2 diabetes?*

HCP *What does RWE show about SGLT2 inhibitor safety and outcomes specifically in elderly type 2 diabetes patients?*

AI looks to a range of sources

For patient-related queries in the UK, **British Heart Foundation** appears across the journey, surfacing in 53–60% of prompts at every stage. AI also turns frequently to **YouTube**, leading in all but the treatment stage and more often here than for patient-related queries in any other therapy area studied.

For HCPs, AI shifts toward **NIH.gov** and academic publishers, with **ScienceDirect**, **Oxford Academic**, **AHA Journals** and **BMJ** all reaching the top 10 most-cited sources. YouTube is also present – lowest at the early awareness stage.

No single source type leads

For UK AFib-related questions, AI moves between medical authorities, specialist publishers, charities and consumer health sites, rather than relying on any one type.

	Top 10 Patient Domains	*Citation Freq.*	*Top 10 HCP Domains*	*Citation Freq.*
1	youtube.com	80.2%	nih.gov	98.5%
2	nih.gov	77.1%	sciencedirect.com	76.0%
3	bhf.org.uk	56.2%	oup.com	71.5%
4	mayoclinic.org	55.2%	ahajournals.org	66.1%
5	webmd.com	54.3%	youtube.com	65.2%
6	lvhhospital.com	46.8%	nice.org.uk	47.7%
7	nhs.uk	44.2%	bmj.com	42.3%
8	clevelandclinic.org	44.0%	jacc.org	40.9%
9	healthline.com	38.5%	england.nhs.uk	37.5%
10	heart.org	37.8%	acc.org	33.4%

AI doesn't consistently separate patient and HCP queries

For US patients asking about AFib, **YouTube** and **NIH.gov** are the most prominent sources, while **Heart.org** remains present across every stage of the journey. **StopAfib** also surfaces, showing that AI looks beyond major medical authorities to condition-focused organisations.

For HCPs, AI relies much more heavily on clinical publishing. **AHA Journals**, **JACC** and the A**merican College of Cardiology** feature prominently alongside **NIH.gov** and **ScienceDirect**. But those boundaries aren't absolute: **YouTube**, **StopAfib** and **Heart.org** also surface in HCP answers.

	Top 10 Patient Domains	*Citation Freq.*	*Top 10 HCP Domains*	*Citation Freq.*
1	youtube.com	79.3%	nih.gov	98.9%
2	nih.gov	79.3%	ahajournals.org	79.7%
3	mayoclinic.org	56.8%	sciencedirect.com	77.4%
4	webmd.com	55.4%	youtube.com	67.5%
5	heart.org	50.9%	oup.com	61.5%
6	clevelandclinic.org	50.3%	jacc.org	55.0%
7	lvhhospital.com	43.9%	acc.org	54.9%
8	stopafib.org	39.3%	stopafib.org	32.1%
9	healthline.com	38.8%	heart.org	28.5%
10	ahajournals.org	31.9%	wiley.com	26.7%

What this means for AFib

WHAT WE FOUND

YouTube ranks alongside the biggest medical sources

For UK patients asking about AFib, YouTube shows up as a source more than in any other therapy area studied. And for US patients, YouTube was just as present as NIH.gov.

WHAT TO DO

AI responses aren't confined to one kind of source

Across AFib-related answers, AI surfaces medical authorities, heart-health organisations, consumer sites and specialist publishers.

Bring video into the HCP journey earlier

AI already turns to **YouTube** for content in the later stages of the UK HCP journey. Strengthening awareness-stage video content, such as recognition, diagnosis and early clinical decision-making, could help brands build visibility earlier.

Think beyond the usual offsite sources

AI isn't relying on medical authorities alone. Heart-health organisations, specialist publishers and consumer health sites all find their way into answers, signalling a wider range of opportunities to build offsite visibility.

Try it yourself

How varied are the sources behind each answer?

PATIENT *What medications are used alongside blood thinners to treat atrial fibrillation?*

HCP *How should clinicians approach atrial fibrillation management differently in elderly and frail patients?*

AI's sources shift by audience and journey stage

For UK patients asking about anxiety and depression, **Mind** shows up as a source more as the journey progresses, reaching 52–54% across the final three journey stages from 40%. **YouTube** is a constant too, staying in the top three throughout.

For HCP queries, AI leans much more heavily on academic and guideline sources, led by **NIH.gov**, **NICE** and **ScienceDirect**. It also turns to the **Royal College of Psychiatrists**, showing that more specialised UK sources can find their way into HCP answers.

	Top 10 Patient Domains	*Citation Freq.*
1	nhs.uk	72.0%
2	nih.gov	70.0%
3	youtube.com	68.7%
4	mayoclinic.org	53.3%
5	mind.org.uk	50.7%
6	webmd.com	40.7%
7	healthline.com	36.7%
8	clevelandclinic.org	31.3%
9	medicalnewstoday.com	26.7%
10	reddit.com	26.7%

Top 11 HCP Domains	*Citation Freq.*
nih.gov	98.7%
nice.org.uk	70.0%
sciencedirect.com	64.7%
youtube.com	50.7%
cambridge.org	35.3%
bmj.com	33.3%
scot.nhs.uk	26.0%
icb.nhs.uk	24.0%
oup.com	24.0%
rcpsych.ac.uk	24.0%
wiley.com	24.0%

AI looks beyond the biggest medical authorities

For US patients asking about anxiety and depression, **YouTube** stays near the top, while **Reddit** appears at every stage of the journey. **Mayo Clinic** also stands out, showing up more here than for patient questions in any other US therapy area studied.

For HCP questions, **NIH.gov** still leads, but AI also turns to more specialised clinical sources, including **AAFP**, **Psychiatry Online**, **Psychiatric Times** and **Psychiatrist.com**.

Reddit stays in the conversation

For patients in the US, **Reddit** appears as an AI source at every stage of the journey, making community-led content more visible here than in the UK.

	Top 10 Patient Domains	*Citation Freq.*	*Top 10 HCP Domains*	*Citation Freq.*
1	nih.gov	77.3%	nih.gov	100.0%
2	youtube.com	66.0%	sciencedirect.com	63.3%
3	mayoclinic.org	62.7%	youtube.com	51.3%
4	webmd.com	45.3%	aafp.org	40.0%
5	clevelandclinic.org	41.3%	psychiatryonline.org	34.7%
6	healthline.com	34.7%	jamanetwork.com	30.7%
7	goodrx.com	32.0%	mayoclinic.org	27.3%
8	reddit.com	30.7%	cambridge.org	26.0%
9	nhs.uk	26.7%	psychiatrictimes.com	24.0%
10	medicalnewstoday.com	25.3%	psychiatrist.com	24.0%

What this means for Anxiety & Depression

WHAT WE FOUND

Look beyond the biggest medical authorities for HCP visibility

AI also turns to specialist professional sources, including **Royal College of Psychiatrists**, **AAFP** and **Psychiatry Online**. Understanding what those sources publish, cite and link to can help uncover realistic ways to build authority around the answers AI is already surfacing.

For anxiety and depression, lived experience matters

When questions extend beyond the clinical into uncertainty, reassurance and support, AI may look to sources that reflect lived experience alongside traditional health information, including **Mind** and **Reddit**.

WHAT TO DO

Learn from the sources AI turns to for support

Mind and **Reddit** can reveal the questions, language and experiences that sit behind more personal queries. Use those signals to shape owned and offsite content that better reflects what people need when they're looking for support.



Try it yourself

When does AI turn to lived experience alongside clinical sources?

PATIENT *What are the side effects of antidepressants I should know about?*

HCP *How should I approach the conversation with a patient who has been stable on antidepressants for two years and now wants to stop?*

AI brings community voices into the answer at key moments

For UK patients asking about chronic pain, AI draws from medical, consumer and media sources, with **YouTube** consistently prominent throughout the journey. **Facebook** only enters the top 10 at the diagnosis stage.

For HCP-related questions, AI leans more heavily on academic sources. **NIH.gov** and **ScienceDirect** lead overall, while **BMJ** and **British Pain Society** are most prominent at the awareness stage. This suggests AI can look to more pain-specific sources for early clinical questions, alongside established academic publishers.

	Top 10 Patient Domains	*Citation Freq.*	*Top 10 HCP Domains*	*Citation Freq.*
1	youtube.com	67.4%	nih.gov	97.3%
2	nih.gov	63.8%	sciencedirect.com	66.0%
3	nhs.uk	53.2%	youtube.com	53.0%
4	clevelandclinic.org	43.5%	nice.org.uk	40.7%
5	mayoclinic.org	36.0%	bmj.com	33.9%
6	webmd.com	26.1%	oup.com	33.7%
7	nhsinform.scot	22.5%	wiley.com	28.1%
8	healthline.com	20.5%	britishpainsociety.org	26.9%
9	sciencedirect.com	18.9%	fpm.ac.uk	26.6%
10	medicalnewstoday.com	16.5%	springer.com	22.5%

Community sources emerge as ongoing support becomes more relevant

For US patients, **YouTube** remains visible throughout the journey, peaking before treatment. **Facebook** and **Reddit** follow a different pattern, appearing in the top 10 only at the management stage, as AI begins to surface more community-led sources around post-treatment support.

For HCP queries, AI stays much closer to established medical and academic sources, with few chronic pain-specific destinations among the overall leaders.

	Top 10 Patient Domains	*Citation Freq.*
1	nih.gov	70.3%
2	youtube.com	63.6%
3	clevelandclinic.org	50.6%
4	mayoclinic.org	43.3%
5	webmd.com	31.5%
6	healthline.com	22.5%
7	nhs.uk	17.6%
8	hopkinsmedicine.org	16.7%
9	medicalnewstoday.com	16.4%
10	medlineplus.gov	16.3%

Top 11 HCP Domains	*Citation Freq.*
nih.gov	98.0%
sciencedirect.com	66.4%
youtube.com	53.9%
oup.com	31.9%
cdc.gov	25.8%
medcentral.com	22.7%
wiley.com	22.4%
tandfonline.com	20.5%
springer.com	20.1%
jamanetwork.com	19.3%
aafp.org	19.3%

What this means for Chronic Pain

WHAT WE FOUND

Video content surfaces across the journey

YouTube appears consistently across both patient- and HCP-focused questions, so video can support needs from early understanding through treatment and ongoing management.

For chronic pain, the patient experience matters

Community sources surface around diagnosis and ongoing management, where questions can extend beyond the clinical into uncertainty, lived experience and support. AI may be looking to community perspectives when a purely medical answer doesn't tell the whole story.

WHAT TO DO

Use those moments to understand what people need next

Community sources may not be where a brand can always show up directly, but they can reveal the questions, language and concerns that surface around diagnosis and ongoing management. Use those signals to shape content and channel planning around the moments that matter most.



Try it yourself

When does AI look beyond clinical sources?

PATIENT *How do I know if my current pain treatment is actually working?*

HCP *What does real-world evidence show about long-term outcomes for spinal cord stimulation in chronic back pain versus trial data?*

YouTube gains ground later in the journey

For UK patients asking about obesity, **YouTube** ranks among the top three sources at every stage, rising to first in the management stage.

For HCP questions, **NIH.gov** and academic publishers lead, with **YouTube** also prominent. Here too, **YouTube** peaks later in the journey, reaching its highest citation frequency in response to adoption-related queries.

Nature.com stands out for obesity-related prompts

Among the five therapy areas studied, obesity is the only UK HCP set where **Nature.com** appears in the top 10.

	Top 11 Patient Domains	*Citation Freq.*	*Top 10 HCP Domains*	*Citation Freq.*
1	nih.gov	65.5%	nih.gov	97.7%
2	youtube.com	58.3%	sciencedirect.com	51.7%
3	nhs.uk	45.4%	youtube.com	48.2%
4	boltpharmacy.co.uk	35.5%	boltpharmacy.co.uk	35.9%
5	mayoclinic.org	34.1%	nice.org.uk	33.4%
6	clevelandclinic.org	24.9%	bmj.com	31.5%
7	healthline.com	24.3%	oup.com	29.9%
8	lvhhospital.com	20.7%	wiley.com	28.5%
9	webmd.com	15.5%	nature.com	20.2%
10	medicalnewstoday.com	13.9%	springer.com	20.1%
	sciencedirect.com	13.9%		

AI turns to support sources early in the patient journey

For US patient questions, AI draws on YouTube throughout the journey, but turns to support-focused sources early. **MyObesityTeam** and the **Obesity Action Coalition** are most prominent at the symptoms stage, suggesting AI looks beyond traditional health information when people are first looking for answers.

For HCP questions, AI shifts toward medical and academic sources, led by **NIH.gov** and **ScienceDirect**. It also consistently draws on the **American Society for Metabolic and Bariatric Surgery**, keeping obesity-specific expertise present throughout the journey.

	Top 10 Patient Domains	*Citation Freq.*	*Top 10 HCP Domains*	*Citation Freq.*
1	nih.gov	76.7%	nih.gov	99.7%
2	youtube.com	49.3%	sciencedirect.com	57.7%
3	mayoclinic.org	41.2%	youtube.com	40.9%
4	clevelandclinic.org	35.8%	oup.com	31.3%
5	healthline.com	28.8%	asmbs.org	29.1%
6	lvhhospital.com	20.2%	wiley.com	24.7%
7	webmd.com	19.4%	nature.com	22.5%
8	obesityaction.org	17.9%	bmj.com	20.5%
9	hopkinsmedicine.org	17.6%	jamanetwork.com	20.5%
10	sciencedirect.com	17.1%	springer.com	19.5%

What this means for Obesity

WHAT WE FOUND

Different needs call for different kinds of expertise

AI turns to patient support organisations early in the obesity journey, while specialist clinical sources remain relevant throughout HCP answers. The sources may share an obesity focus, but the role they play in AI answers is very different.

WHAT TO DO

Map specialist sources before deciding where to play

Obesity-specific organisations are already appearing in AI answers, from patient support organisations to specialist clinical bodies. Look at what they publish, reference and link to, then identify where brands can realistically contribute, partner or build citation proximity.

AI surfaces YouTube at different moments in the obesity journey

For obesity-related questions, **YouTube** appears throughout both patient and HCP journeys. In the UK, it peaks later, at management for patients and adoption for HCPs. In the US, it peaks at diagnosis for patients and adoption for HCPs.

Build video for the question, not just the channel

YouTube visibility spans audiences and stages, but AI doesn't surface it equally at every point. Video content should answer distinct needs across the journey, with clear structure and indexing that helps AI connect the right video to the right question.

Try it yourself

Does the expertise behind the answer change with the question?

PATIENT *What are the risks and benefits of weight loss surgery?*

HCP *What should I do with an obesity patient who hasn't responded adequately to medication but isn't eligible for surgery?*

What does this mean for *healthcare* brands?

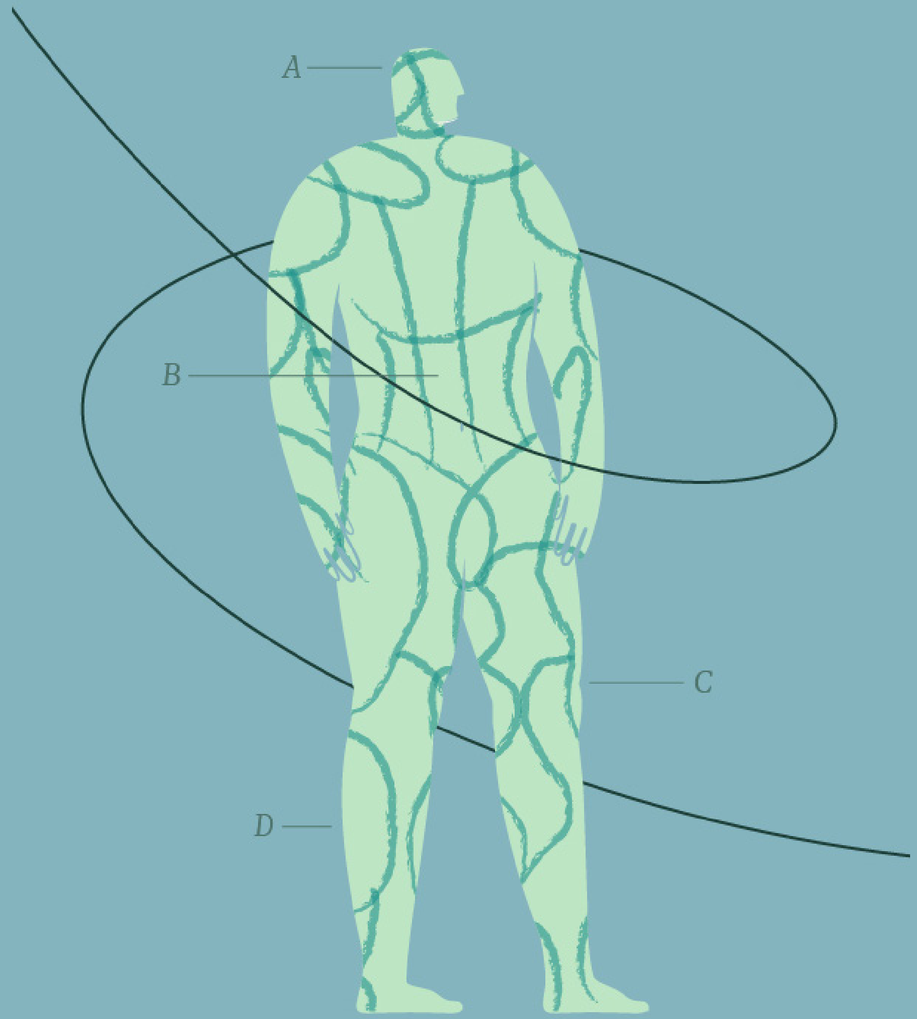


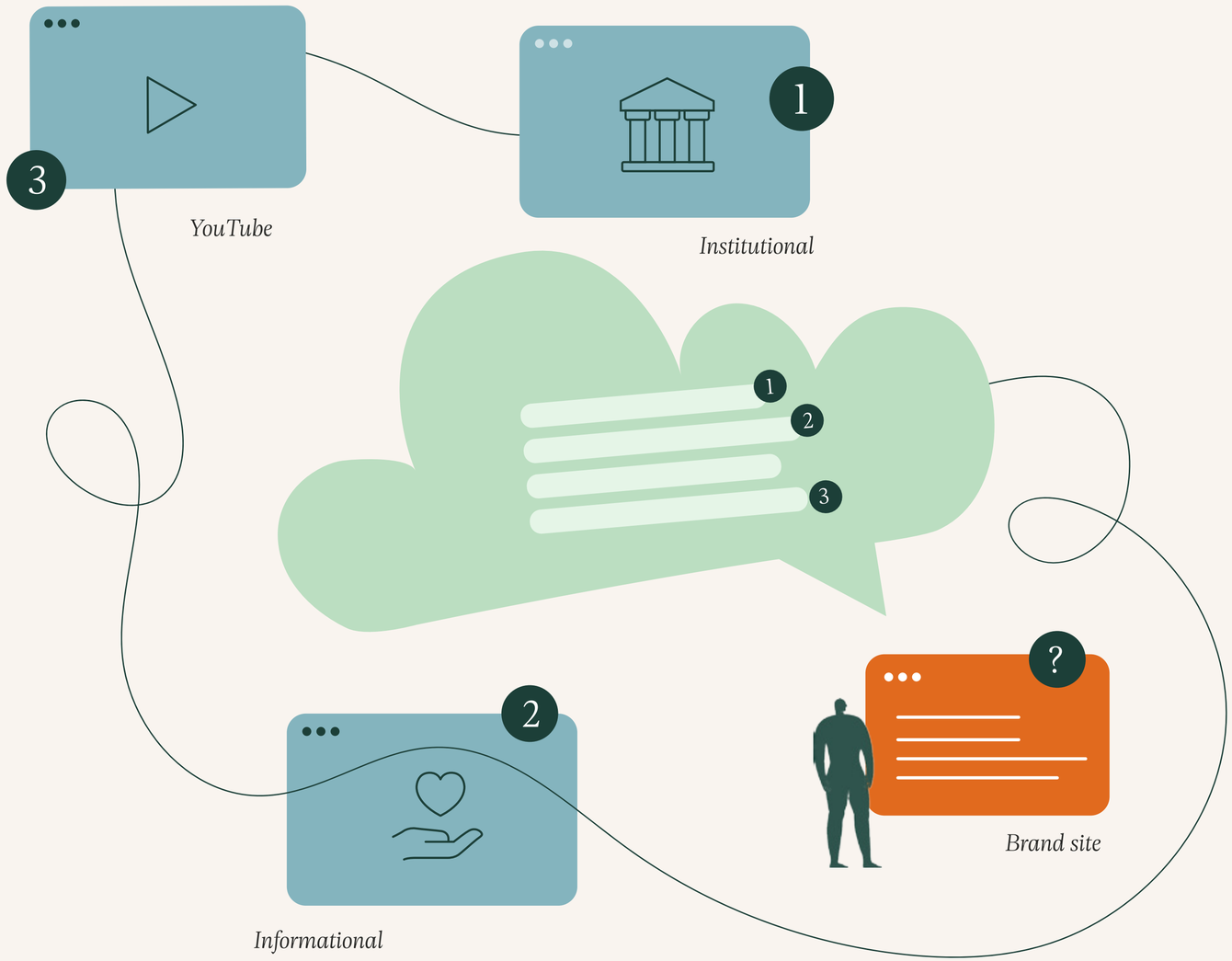
Fig 37.

AI visibility is built across an information ecosystem

There is no single route into an AI answer. The sources AI uses shift with the question, from established medical authorities to consumer health information, specialist organisations, community perspectives and video.

For healthcare brands, that presents a challenge. A strong owned presence still matters, but AI visibility is also shaped by the wider sources it finds and surfaces.

The question is no longer just does our content rank? It's are we present in the information environment AI relies on?



What that means: Build for the answer, not just the click

Know where AI looks

This study maps general therapy-area questions. Brand-specific prompts can reveal where your brand appears, which sources shape those answers and where the gaps are.

Build the right kind of authority

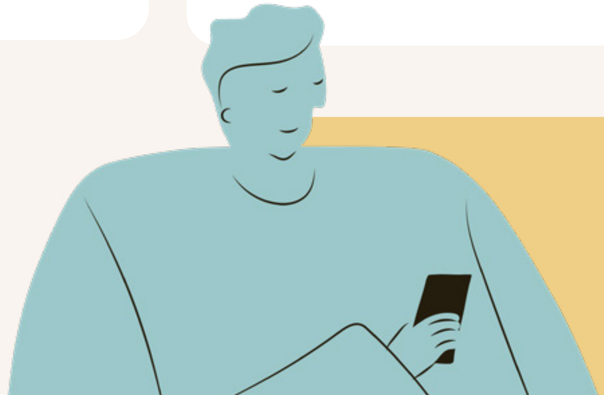
Look beyond owned content to realistic opportunities across publishers, professional sources, patient organisations, video and other relevant offsite environments.

Match the source to the moment

The sources that matter early in a journey may not be the ones AI turns to later. Plan content and offsite activity accordingly.

Keep testing the picture

AI sourcing is dynamic. Benchmark your brand's visibility, watch how citation patterns change and use those shifts to refine where you invest.



See the picture for your brand

Benchmark your brand-specific prompts to see where you appear in AI answers and which sources are shaping them. **Talk to us to find out more.**

The brands AI surfaces tomorrow are being shaped *today*

AI is changing how people are finding healthcare information, but the fundamentals of authority haven't disappeared. Useful content, credible sources and genuine relevance still matter.

What has changed is where brands need to build that authority. The opportunity now is to understand the sources shaping AI answers and become part of that wider information environment, creating more ways for your brand to be found when it matters.

Where does your brand show up?

Benchmark your visibility today, then build a GEO strategy around the sources and questions shaping AI answers in your market.



Appendix

Detailed methodology

Prompt design

- 3,000 prompts across five therapy areas
- 600 per therapy area: 300 UK and 300 US (150 prompts per patient and HCP)
- Split across four journey stages
- Written with market-specific language and context
- Prompt sets covered pharma, medtech or both, depending on therapy area

Data Collection

- Tracked across ChatGPT, Perplexity, Google AI Overviews and AI Mode
- Citation data captured through AccuLLM
- Obesity, chronic pain and AFib tracked over 10 days and averaged across the period
- T2D and anxiety & depression used a final-day snapshot

Analysis

- Citation data segmented by market, audience and journey stage
- Domains compared by citation frequency to identify the sources appearing across the broadest range of prompts
- Results analysed within each therapy area and across the full study

Study scope

- Markets: UK + US
- Language: English
- Audiences: Patients and HCPs
- Therapy areas: T2D, AFib, obesity, anxiety & depression, chronic pain
- LLMs tracked: ChatGPT, Perplexity, Google AI Overviews and AI Mode
- Metric: Citation frequency

Data collection periods

- T2D: 24 May 2026
- Anxiety & depression: 4 June 2026
- Obesity: 8–17 June 2026
- Chronic pain: 24 June–3 July 2026
- AFib: 26 June–5 July 2026

How we interpreted the data

Citation frequency

Citation frequency tells us how widely a source shows up across the prompt set, but not how consistently individual LLMs use it. We use it to understand overall source visibility, rather than performance on any one platform.

Prompt design

Our prompts are designed to give us a consistent way to explore sourcing patterns across audiences and journey stages. But because they aren’t drawn from real-world queries, the findings tell us about how AI responds to our test set, not how patients or HCPs actually search.

Sector coverage

We included both pharma and medtech questions, but the balance varies across therapy areas, audiences and journey stages.

Data treatment

For three therapy areas, we tracked results over 10 days to smooth day-to-day variation. T2D and anxiety & depression use a final-day snapshot, so we’ve kept that difference in mind when comparing therapy areas.

How the prompt set was structured

Data Set (The same in each market)	Med Tech	Pharma	Both
T2D Patient	20	40	90
T2D HCP	27	82	41
Afib Patient	31	31	88
Afib HCP	51	51	48
Chronic Pain Patient	32	32	86
Chronic Pain HCP	53	53	44
Anxiety/Depressive Disorders Patient	n/a	54	96
Anxiety/Depressive Disorders HCP	n/a	108	42
Obesity Patients	33	33	84
Obesity HCP	50	50	50

Patient Journey Stage	HCP Journey Stage	Prompts
Symptoms	Awareness	25
Diagnosis	Understanding	25
Treatment	Confidence	50
Management	Adoption & Reinforcement	50

everybody

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