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*****American College of Physicians panel urges physicians to communicate with the press.

"What <u>should</u> change is the medical community's methods of dealing with the press, and one starting point is understanding the limitations of the press," says a noted medical journalist.

"In medical matters the press is, by and large, inexperienced, willing to learn, and a captive of its sources. Physicians should be able to capitalize on that," say David M. Rubin, Ph.D. and Val Hendy in their study "Swine Flu and the Press."

Dr. Rubin, professor of journalism at New York University, presented the results of their study in a symposium "The Swine Flu Immunization Program Publicity Fiasco: Where Were We?" at the annual session of American College of Physicians in Dallas April 20.

Other participants in the symposium were Lawrence K. Altman, M.D., medical reporter for <u>The New York Times</u>; Robert H. Moser, M.D., executive vice president designate, American College of Physicians; and Peter M. Sandman, Ph.D., professor of journalism, University of Michigan, Ann Arbor.

Moderators were Neil J. Elgee, M.D., Department of Medicine, University of Washington School of Medicine, Seattle, and David P.L. Sachs, M.D., Department of Medicine, Case Western Reserve University School of Medicine, Cleveland.

Rubin and Hendy's study of press coverage focused on the week of October 11-17, 1976, when a number of elderly people died after receiving the first inoculations.

The researchers determined that the poorest coverage came from network television, sole news source for 36 per cent of the public, according to one survey. No network raised such questions as "what is swine flu?" or "what is a vaccine?"

"None broke their ordinary pattern of coverage for this story, preempted entertainment programs for a news special, devoted an unusual amount of air time to it, nor provided background or analytical information," said Rubin.

The best coverage came from the news media employing specialized science writers: The New York Times, Los Angeles Times, Washington Post, and Miami Herald.

The majority of American papers, dependent on wire-service reports by non-specialist reporters "hostage to their sources," provided little more than a running "body count," although with assurances that the vaccine inself was not responsible for the deaths. Much of the press coverage faithfully reflected the confusion among public health officials at the Center for Disease Control (CDS) in Atlanta, the Department of Health, Education, and Welfare and in local public health units.

Rubin cited as an example his finding that the public health director in New York City could not get information from CDC and relied on the wireservice reports in the newspaper for his information.

Few dissenters to the inoculation program appeared in the news columns that week, and spokesmen for the government viewpoint had a virtual monopoly of the airwaves and print media.

Rubin urged the physicians to look for more science and medical writers, develop closer relationships with reporters, help prepare reports for major medical stories for which they have advance notice and write more often for a lay audience.

Reporter-physician Altman related his experiences during the week that Rubin and Hendy studied. He said he was still recuperating from coverage of the Legionnaires' disease when his editor told him to go immediately to Pittsburgh where three elderly people had died after receiving the shots.

After thinking it over, he called the editor back and told him the most important immediate story was "what killed the three people" rather then "what's going on in Pittsburgh." The editor agreed, and that was the story Altman did for the next edition. Then he went to Pittsburgh to interview the local health officials.

Altman said the inoculation program was defeated because the government didn't publicize ahead of time that some people would die because people die every day.

He also said physicians he interviewed as supporters of the inoculation program said later that they had been opposed to it. He called for increased accountability of physicians--physicians going on record at the time a decision is made. He said they probably don't remember that they favored the program and suggested that physicians keep a record of their opinions so that they know when they change their minds.

Altman also called on the medical profession to learn to understand the reporting process.

Moser came to Philadelphia from private practice in Maui. He reported that 60 per cent of the people on Maui were inoculated due to persuasion of patients by their own physicians.

Moser wrote a weekly health column in the Maui newspaper.

"It was very widely read. I know because my office nurse told me it was," he joked. Most writing by physicians has been an elite intramural activity, he said and urged physicians to "descend from Olympus" and write for the people.

"Our patients have not learned about medicine from us; they have learned it from Marcus Welby and Joe Gannon. There is public resentment at the sound of silence that emanates from organized medicine. There is an element of distrust--people suspect that wonderous things are happening within our cloisters, and that we are being secretive and self-serving. Ignorance breeds suspicion.

''What I am saying boils down to the fact that, aside from one-on-one education in the office and at the bedside, medicine must 'go public.' We must establish contact; we must become communicators. We can no longer delegate this function," said Moser.

Sandman criticized the public relations program for the swine flu inoculations. He said PR people should have put more stress on probabilities.

'You don't blame your insurance agent if your house doesn't burn or the Pentagon if there's no nuclear war this week," he said. The PR people should have made the inoculation program analogous to fire insurance. And they should have announced ahead of time, "There will be problems, these problems--"

He called for more personal contact between health personnel and the members of the media.

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"Virtually all information came by mail from Atlanta," he said.

In the question and answer period Altman also criticized handling of press relations by CDC. He said CDC is not used to handling press inquiries about a running story. The staff is accustomed to having something happen, then writing it up and handling the press a neat package.

Rubin said reporters that he interviewed complained that CDC staff members were rude and unprepared to answer questions.

The media sessions demonstrated ACP's recognition of the problems in medical communication. Response was so enthusiastic to the one media session at last year's meeting that the organization sponsored four sessions this year. Attending the sessions were approximately 150 physicians, medical reporters and PR people from The University of Texas Health Science Center at Dallas and Baylor University Medical Center.

For more information see "Medicine and Mass Communication: An Agenda for Physicians," Peter M. Sandman, <u>Annals of Internal Medicine</u> 85: 378-383, September, 1976. And for opinion see "Knowledge Is Not Enough" (Sounding Board), Robert H. Moser, <u>New England Journal of Medicine</u> 269: 938-940, April 21, 1977.

Rubin and Hendy's study "Swine Flu and the Press" is available from David M. Rubin, Department of Journalism, New York University, 1021 Main Building, Washington Square, New York, NY 10003, (212) 598-3791.