Throughout his tenure as the AMA’s top elected official, President David O. Barbe, MD, MHA, has emphasized the need for a new kind of leadership among physicians. This brand of leadership, he said, would help bring consensus solutions to difficult issues.

During Saturday’s opening of the 2018 AMA Annual Meeting, Dr. Barbe highlighted what that leadership has looked like over the past year and where it is urgently needed going forward. His concluding words called on physicians to search for and advocate science-based solutions that address “the devastating crisis of our time”—America’s epidemic of gun violence.

“The AMA has demonstrated leadership on this issue for decades,” Dr. Barbe said. “We’ve recommended common-sense gun safety protections, waiting periods and background checks for those seeking to purchase a gun, and increased funding for mental health services.

“We’ve called on Congress to provide resources for the Centers for Disease Control and Prevention to conduct epidemiological research on gun violence—perhaps the only leading cause of death where such research is not funded,” he added. “Yet the fact that this problem continues to worsen has spurred a new sense of urgency” in the AMA House of Delegates, even as “Congress fails to act.”

Citing examples of leadership at the individual level, Dr. Barbe mentioned the efforts of AMA members in combating the opioid epidemic, creating alternative payment models (APMs) and protecting people
in medicine with Deferred Action for Childhood Arrivals (DACA) status.

Success “takes leadership, it takes a team that is persistent, but it also takes innovative, dedicated individuals,” he said. “The AMA is fortunate to count among its members some of the most talented individuals in the country who are leading the way on a variety of health care issues.”

Members to whom Dr. Barbe offered commendation for their efforts to “move medicine” included:

**Jerome Adams, MD:** The U.S. surgeon general recently issued the first advisory from the office in 12 years. It urges those at high risk for opioid overdose and their loved ones to ask their physicians or pharmacists for naloxone and to get trained to administer the drug in case of an overdose emergency. Dr. Barbe offered a strong endorsement of the advisory.

**Larry Kosinski, MD:** A gastroenterologist from Elgin, Illinois, Dr. Kosinski has been an innovator in the treatment of Crohn’s disease. To combat excess costs that stem from hospitalization of those living with the condition, his SonarMD system is a proactive patient outreach mechanism that tracks a patient’s symptoms and intervenes if indicators suggest the patient’s condition is worsening. Since implementation, the system significantly cut hospitalizations, reduced spending and improved patient satisfaction.

**Pratistha Koirala and Ruth Howe:** In recent years, the AMA has adopted policy seeking to protect individuals in medicine with DACA status—allowing undocumented immigrants who came to U.S. as children the right to work. Members of the AMA Medical Student Section, including Koirala and Howe, are among the staunchest proponents of such policy, driving the charge as the Association calls on Congress to find solutions for DACA-status individuals in the medical community.

**How persistence pays off**

On a macro level, Dr. Barbe also celebrated a number of recent policy wins that he attributed to the efforts and leadership from the physician advocates who make up the Association’s membership. Those achievements, many of which were addressed in the Bipartisan Budget Act of 2018, included:

- Eliminating a mandate making electronic health records standards more stringent.
- The permanent repeal of the Independent Payment Advisory Board (IPAB).
- A 10-year extension of the Children’s Health Insurance Program.
- Adjustments to the Medicare Access and CHIP Reauthorization Act that provide greater flexibility for physicians participating in Medicare and encourage the development of APMs.

“These wins were only possible because our winning team put in the hard work of advocacy; taking a stand, educating policymakers and activating our grassroots physicians to speak with their legislators,”
Dr. Barbe said.

“This process can take days … months, or even years, as in the case of IPAB,” he said. “So we must remember that it is important that we keep fighting, all the time, and not lose momentum or become discouraged because of temporary setbacks or because nothing seems to be happening.”

Read more news coverage from the 2018 AMA Annual Meeting.