

Defending science in a time of fear and uncertainty

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Patrice A. Harris, MD, MA

Former President

COVID-19 represents a health challenge our world has not faced for generations.

This enormous threat has touched every state and virtually every community, and it has brought out the best in our physicians, nurses, medical staff, public health officials and scientists who are working heroically under intense pressure.

In these extraordinary times, however, their best efforts are hampered by the spread of misinformation and half-truths online, across social media, and in the media at-large. We're living in a time where evidence and facts have increasingly become viewed with skepticism. The result is a growing mistrust in American institutions, in science, and in the counsel of leading experts whose lives are dedicated to the pursuit of evidence and reason.

In a virtual address hosted by the National Press Club, I made an appeal for science in slowing the spread of misinformation and in helping turn the tide against COVID-19.

The public is already making significant sacrifices by staying at home and avoiding large gatherings. But the nations need much more from our leaders. And we need to be able to trust that our institutions are keeping science at the fore of their decision-making.

With that in mind:

- The AMA calls on all elected officials to affirm science, evidence and fact in their words and actions.
- We call on media to be vigilant in communicating factual information from credible sources and to challenge those who chose to trade in misinformation.
- We call on tech platforms to advance evidence-based information from credible sources and reduce the spread of misinformation.
- We call on our government's scientific institutions, to be led by experts who are protected from political influence.

- We call for an environment in which physicians, scientists and other experts are free to communicate evidence-based, factual information.
- We call for determinations about the safety and efficacy of drugs to be made by scientists and researchers, based on data. Treatment decisions should be made via a shared decision-making process between a patient and physician without intrusion by any third-party, government or otherwise.
- We call for the robust collection of data, including data segmented by race and ethnicity, to make sure we have a thorough understanding of the pandemic's impact on every community.

Looking back to look ahead

America has faced—and overcome—enormous public health challenges before. We greatly reduced smoking, discovered treatments for HIV/AIDS, and eradicated polio and other vaccine-preventable diseases. These were challenges that required changes in thinking, policy, and behavior. Scientists and physicians found solutions by using facts and evidence, and widespread change was enacted because policy makers and the public believed them.

That's why we know that stay-at-home orders and physical distancing are effective in combatting a flu pandemic.

The last time we experienced a pandemic on this scale was a century ago, when an influenza swept across our country and the world. Back then, different cities in the U.S. took different approaches. And evidence shows that cities that quickly instituted physical distancing restrictions—shutting businesses and schools for short periods of time – had the lowest death rates.

Take Philadelphia and St. Louis as examples. The first case of influenza was recorded in Philadelphia on September 17, 1918. Days later, they held a war-bonds parade attended by 200,000 people. Within two weeks, over 20,000 people had contracted the flu.

St. Louis was a different story. Monitoring the way that the flu had impacted cities on the East Coast, public officials acted quickly. Just a couple days after their first reported case, they shut the city down. And as a result, they experienced half the death rate that Philadelphia did. The science and evidence tells us that physical distancing measures work and must not be relaxed prematurely. We are encouraged by those federal and state leaders who are willing to keep physical distancing restrictions in place until the evidence suggests it is safe to return to normal. And we continue to call for governors who have not yet implemented physical distancing in their states to do so—immediately.

Danger of misinformation

Some have referred to this pandemic as a war. We must make sure this is not a war on science. We all want to find a solution to this pandemic as quickly as possible, but doing it correctly requires patience and adherence to the core principles and knowledge we've relied on in the past.

That's why we all have a responsibility to seek out, and share, information only from credible sources.

And to make sure we have a thorough understanding of the pandemic's impact on every community, we need a robust effort to collect data segmented by race and ethnicity.

There are so many things we don't yet know about this pandemic, but there is something that we do. It is science that will bring about proven, effective treatments for COVID-19 and create a vaccine. It is science that will allow us to reduce or delay infections and save lives. **Every person in this nation is a partner to physicians** in fighting this virus. And we all have a responsibility to do our part.

It's important to remember that while we may at times feel hopeless and overwhelmed in the face of a pandemic, we are not powerless. And we have science and evidence on our side.