AMA's outgoing president reflects on the previous year with Gerald E. Harmon, MD

AMA's Moving Medicine video series amplifies physician voices and highlights developments and achievements throughout medicine.

Featured topic and speakers

In today’s episode of Moving Medicine, AMA Chief Experience Officer Todd Unger is joined by the AMA's outgoing president, Gerald E. Harmon, MD, a family medicine specialist in Pawleys Island, South Carolina. Dr. Harmon shares his reflections and learnings from a presidency that continued to be shaped by the COVID-19 pandemic.

Speaker

- Gerald E. Harmon, MD, outgoing president, AMA

Transcript

Unger: Hello, this is the American Medical Association's Moving Medicine video and podcast. Today we are joined by the AMA's outgoing president, Dr. Gerald Harmon, a family medicine specialist in Pawleys Island, South Carolina, who's going to share his reflections and learnings from a presidency that continues to be shaped by a very unpredictable pandemic. I'm Todd Unger, AMA's chief experience officer in Chicago. Dr. Harmon, it's hard to believe that almost a year ago today, you stepped into your presidency and also kicked off the very first video in our Moving Medicine series. It was a very hopeful time in the pandemic with vaccines just beginning to take hold and we hadn't yet experienced the impact of variants and sub-variants, which made the year much more challenging than anyone could have ever predicted. Why don't we start by looking back? What do you think was your biggest learning from the past year?
Dr. Harmon: I learned so much, Todd, I'm still learning even today but I would tell you, I learned despite a pandemic, despite a pandemic of the virus. While we had this pandemic, we also had a pandemic of misinformation or disinformation and distrust of public health officials in government. That was a real surprise to me. I really was disturbed and disappointed in that but I did find that most patients, even though they might distrust government, they might distrust public health professionals, agencies. They do trust their doctor. They trust their trusted health advisory, maybe a doctor, maybe a community nurse, maybe a pharmacist but they do. They have someone they trust. It's interesting. I learned that and it applies not only to the patients but actually to the local governments and the agencies. Agencies, of course, would have to follow the various ... The CDC guidelines or the state agencies but the local people, the local governments, the local schools and all, we come to a local trusted physician. Our point in AMA's point of being that trusted source of valuable peer-reviewed honest information was really reinforced. I was impressed with that.

Unger: You've been a very steady and strong voice for both our nation's physicians and their patients over the last year. I'm curious, given what you just talked about, especially the misinformation and disinformation, which is something you've really addressed over the year. Is there anything else that you have found to be personally challenging?

Dr. Harmon: Yeah, I did. I will tell you that even though people trust me and trust their local doctors, it was a little bit disappointing to me. And it was really emotionally stressful for a lot of us to see folks who didn't follow our advice. They didn't follow the advice of the overwhelming medical community and didn't get vaccinated or didn't practice public health measures. And it was difficult to see them die. When I think the evidence clearly indicated they didn't have to get that sick and they didn't have to wind up in the ICU and the ventilators, and really didn't have to die with a ... They would had a much greater chance to survival if they had listened to some of those trusted advisors.

I'll tell you, what's also been a challenge for me and a bit of a disappointment, even though over 96% of doctors said, I'll get whatever shock you make available. They said, give me. They were among the front lines and the first vaccine recipients for the COVID-19 vaccine, there's still a small but very vocal, very influential number of physicians and health care professionals putting out misinformation. They were taking their message beyond just a trusted physician, patient relationship. They were taking it to social media, to meetings. Sometimes I believe for, I suspect for fame, fortune, economically and they were putting out disinformation, they risk the health of millions of patients. I was really disappointed in that. That was a challenge that even now we're trying to overcome.

Unger: Well, despite the challenges that you mentioned in many others, you led the AMA through a lot of successes over the past year. It's hard to pick but if you were to talk about the one or the ones that you're most proud of, what would those be?

Dr. Harmon: I would tell you, the thing I'm most proud of about the AMA and about my opportunity to be the president of AMA is that in the face of misinformation and the face of a pandemic of distrust on
the face of hesitancy with vaccines, with masking precautions, public health precautions and some hesitation and taking the offered evidence of treatments of appropriate monoclonal antibodies, appropriate antivirals. When we gave steroids, when we gave oxygen, all the things that we know from the evidence was effective. What we did at the AMA was in order to overcome that hesitancy was to continually and universally and consistently maintain overwhelming competence. You’ve heard me say that before people, have heard me say that in talks, I’ve put that on my presentations, the way to overcome resistance, organizational and community resistance is continually be the mainstream overwhelmingly competent and give accurate information, reliable information and be trustworthy. We’ve done that. And I think I’m real proud of that.

Unger: Well, you’re ending your presidency with a pivot to recovery and have used the platform provided by the AMA’s first in-person meeting in more than two years to kick off something called the AMA Recovery Plan for America’s Physicians. Tell us a little bit more about this idea and why it’s so important to work on healing and supporting our nation's physicians at this moment.

Dr. Harmon: Todd, one of the things we’ve learned in the pandemic was what we already knew before the pandemic. We need doctors, America needs doctors. We have a growing population. We have a growing burden of chronic disease. We have growing public health issues. We already had projections of physician shortages before we had the COVID pandemic. And now two years into it, we have evidence that as many as 20% of America's doctors indicate they’re going to ... Not only reduce their opportunities to practice, they’re going to quit, they’re going to retire, stop practicing medicine in the next 24 months. And another 20% are going to substantially reduce their patient care opportunities or their workload. So, that's a real threat. We need to figure this out. We need to come up with ways to expand health care for America and quality with physician-led health care versus just having so many, be overwhelmed, be burdened, be burned out.

So we really need to take the opportunity with our recovery plan that we’re going to unveil at AMA meeting soon or we'll be unveiling. It basically looks at how to take the current lessons of the pandemic. The other glide paths that we knew were coming and take some issues that will improve the physician workforce. Physicians are important but there are finite research. We got to take here. We've got to feed water America's physician, so to speak and not just take them for granted as part of the infrastructure, we want to improve digital health. We want improve the Medicare payment reform system, which is critically underfunded and really a critical cause of economic disruption for practices. We want to reduce the burdens to caring patients such as prior authorization. Remember that continual dirty word we've actually seen recently where the Medicare Advantage plans have then held the task about using prior authorization restrictions as a way to enhance their coughers without improving care.

We want to have doctors be the health care team leaders. We know we need to have team-based health care but doctors need to be in charge of that health care. You just can't say, well, we don't have
enough pilots. So let's put nine pilots in the cockpit. No. You got to have physicians, qualified physicians leading the team. And we want to improve the diversity to the physician workforce, improve health equity and reduce physician burnout, give opportunities for our graduating medical students to expand the physician workforce, improving GME. And we want to reduce the stigma around mental health. So when doctors are stressed, when they're having burned-out issues and other health care workers, they can seek medical care, appropriately care, keep themselves in the game, help improve their behavioral health issues and not lose them to their workforce. A big bite of the apple but we're going to have to do it. And I think AMA now is got the resources. We've got the energy enthusiasm and the receptive audience to make this happen.

Unger: So it's an ambitious plan and very much needed, as you pointed out. A lot of these problems, we had to a certain extent going into the pandemic only revealed to be even worse during that. But the ones that you outline, everything from expanding and supporting telehealth, reforming Medicare payment, stopping inappropriate scope of practice expansion, prior auth, which is of course a huge issue and continues to be a big patient care issue. And then addressing what has been really exacerbated by the pandemic, which is this issue, physician burnout and really looking at wellness for our physician force. Are there other huge opportunities that you see for the AMA in the coming year and for yourself as a leader in medicine?

Dr. Harmon: Well, I think what we really need to do and when we talk about all these things for recovery plan and better than is what you summarize, let's take care of these burned out doctors. Most recently, unfortunately, we've had not only the economic woes, we've had the practice barriers. We've had the educational woes. We've had prior authorization barriers to practicing medicine. We've had the need for Medicare payment reform. Now we're having some ... Not only intimidation and/or aggression against physicians, now we've had some real physical violence, some gun violence in the workplace.

Physicians are already trying to take care of the other victims of gun violence. The physicians are trying to take care of the folks who are getting sick from COVID and the chronic diseases. And then if you put the problem of attacking physicians into that, no wonder physicians are stressed. No wonder these young doctors are concerned about ... It's unfortunate, they have to worry about your own security, your own personal safety before you can feel comfortable giving care to an injured patient. So this is ... yeah, the AMA has gone a lot on this plate right now but we need to take this opportunity in today's time to make a difference.

Unger: And I think at the same time, as much as we want this pandemic to be over, it seems to be other nature, it seems to throw us continuous curve balls and we have to stay prepared for this and whatever else we might face. What are your thoughts on that?

Dr. Harmon: Well, we do. We have be careful and I use the analogy that we're in a race against the pandemic and the pandemic for a long time was ahead of us. And then we caught up with it when we
had vaccines and some treatments. And I was hoping to put it literally in our rear view mirror and figuratively in our rear view mirror. So we can say, all right, post pandemic, let's do this but we're not post pandemic. It's not yet in our rear view mirror. Every time we think we've got it comes up within an accelerant and it comes up with a sub-variant. We had Delta, then we had Omicron and it has ways to work around because this is a viral replicating type, self-replicating type agent. It is serious. It is not just your standard germ. It is a pandemic.

And our technology has had to develop, our science has evolved and that's been frustrating to a lot of the non-scientists. And they say, well, why can't y'all make up your mind, whether this treatment's going to do it or this vaccine is going to work. It's because it's science. It evolved. The data tells us and it drives our decision-making. We believe in the science, not just the anecdotes and the standard small ends. We try to do the right thing. So yeah, we're going to be living in a pandemic age. We're going to protect ourselves, not only against the current pandemic but there'll be another one. So the steps we take today, the preparatory steps, the learning we make, the learning we have that has occurred, we make that the future so that we memorialize some of the things that we've done such as the Operation Warp Speed.

I talked about a speech of the National Press Club. This is one of the greatest successes of the 21st century, this warp speed, developing this vaccine, deploying it with all the safety hurdles being met. That was an incredible operational success. So that's what we've learned. We can rapidly deploy when we get rid of the red tape and move forward with the science. We can do things like that. So, yeah we're still in the middle of a pandemic. We can't let off the gas. I want to put it in the rear view mirror and I'm confident we can eventually get there as we learn more about the virus.

**Unger:** I mentioned up front that you were the first Moving Medicine video and podcast guest. I think our thought at the time was that we would be transitioning into that and away from our COVID-19 Update, obviously other things happened but in that particular first episode, one of the things that you talked about was this idea that physicians and residents and students need to quote, act worthy of yourselves. This was the term you used. On reflection, a year later, has the meaning of that phrase taken on new meaning to you? What do you want both seasoned physicians and those just entering the professions to take away from this message?

**Dr. Harmon:** Well, that's a good point. Physicians, practicing doctors, those in training programs, medical students, they have a special gift. It allows them the opportunity to enter one of the most trusted, valued professions in all of human history. They're remarkably well-positioned to have a positive impact on society and civilization as a whole. So all of us, and I tell you, every doctor, every doctor in training, every medical student takes this seriously. And they do strive mildly to attain that effort where we make a difference on society and civilization. And I want all of our colleagues in the medical profession to understand that. I understand that, I respect the pressures we put on ourselves. We're achievement-oriented, we're all high achievers. That's how we got to where we were. We have
a gift and from our creator, and I think we all strive to act worthy to serve well.

We need to be a little careful that we don't set such a high bar that anything short of perfection and makes us have self-doubt, makes us have burnout. That's why we have to balance what we're doing. And part of acting worthy is to keep yourself whole, to keep yourself in the fight so that you're part of the solution as opposed to becoming one of the injured and become part of the problem. So keep our workforce healthy. I did quote Major General Warren of a Revolutionary War fame, who said, we need to act worthy of ourselves because millions of unborn Americans will be affected by actions of the day and of coming day. So I think that's important.

**Unger:** Well, as your term comes to an end and as we push for a recovery plan for America's physicians, I just wanted to say to you that it's been an amazing privilege to have had the chance to work with you over the past year. Thank you so much, Dr. Harmon. The challenge coin that you gave me earlier in the year has been one of the most meaningful memories of this past year. I keep that close by just to remind me of the work that we're doing. Thanks again for everything. We know you'll continue to be a strong voice for the AMA and our nation's physicians. And while this might be our last episode of your presidency, it certainly won't be the last time we have a conversation here on Moving Medicine, which I'll look forward to again. We'll be back soon with another Moving Medicine video and podcast. And make sure to check out all our videos and podcasts at ama-assn.org/podcasts. Thanks for joining us today and please take care.

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