Among the enduring lessons from COVID-19 are how quickly medical misinformation and disinformation can be spread online and through social media, and the devastation they leave behind. Both can have serious consequences for our patients and the health of the nation—the distinction between the two is that disinformation is intentionally deceptive. The resulting distrust in experts, science, and medical institutions hampers our ability to respond effectively in a health crisis.

As AMA president, I have the opportunity to talk with colleagues all over the country. And one theme I hear over and over is how frustrated physicians feel when longstanding patients who have trusted them with so many prior health issues suddenly make decisions about vaccination or Covid therapies based on false or misleading information they discovered online in a social media group.

Medical disinformation certainly isn’t new. The AMA made a name for itself in the late 19th century by pushing back against the harm being done by medical quackery and junk science. The AMA has always endeavored to stand on the side of science and evidence, and we have been outspoken in our support for vaccine science and warned against the overt politicization of health care since the earliest days of the pandemic.

But the acceleration of medical misinformation and disinformation we’ve experienced during the COVID-19 pandemic should alarm all of us who have taken an oath to protect our patients from harm. We have learned a lot in our long fight with COVID-19, especially as we have seen the extent of damage from well-coordinated, heavily centralized disinformation efforts by just a few individuals on social media.

I recently participated in an annual fact-checking festival hosted by media organizations Poynter and Politifact, called the United Facts of America, where I explained the impact of unchecked medical misinformation to a diverse audience of journalists, policymakers and pundits, and also the responsibility physicians have in policing it.
Countering anti-science aggression

Make no mistake, the health of our patients is put at risk by coordinated, well-resourced efforts to mislead the public about medicine and science. This anti-science aggression, as some have called it, not only undermined confidence in the COVID-19 vaccines, but it has also been used to widen existing divisions on far-ranging issues such as access to safe reproductive care, achieving health equity, and discrimination against transgender patients.

It has contributed to declining vaccination rates. New York Gov. Kathy Hochul recently declared a state of emergency as low vaccination rates have led to the once unthinkable resurgence of polio in her state.

Facing these immense challenges, I’ve never been prouder as I see fellow physicians in their offices and hospitals, in their local communities, and on all types of media talking about medical science and evidence. Organized medicine has stepped into this fight as well—working to effectively counter voices who spread blatantly false information and monetize these damaging activities.

We know we can fight disinformation while protecting our cherished First Amendment principles. We have no interest in policing the open debate of ideas that has been the cornerstone of scientific advancement. But scientific discourse doesn’t include spreading dangerous, known falsehoods that harm the public health with the intent to deceive. We are disheartened that a very small number of physicians and health professionals have been among the loudest purveyors of false health information about COVID. That’s why the AMA has called on state medical boards and specialty accreditation boards to respond swiftly when physicians spread disinformation, violating the ethics of our profession.

3 key steps forward

The AMA House of Delegates, representing every state and specialty, also adopted a comprehensive strategy to address health-related disinformation spread by health professionals at the 2022 Annual Meeting in June. The new policy includes nine concrete actions we can and must take to counter the spread of disinformation. These include:

- Ensuring the widespread availability of evidence-based medical and health information for physicians and the public.
- Addressing the dissemination and monetization of disinformation by health professionals via social media platforms.
Educating health professionals and the public on how to recognize disinformation as well as how it spreads.

The AMA continues to urge media outlets, including influential social media companies and streaming services, to remain vigilant to help their readers, viewers and listeners more easily separate fact from fiction. And we continue to partner with outside organization to help the public at-large better discern credible sources of information online.

We recently worked with the nonprofit, nonpartisan News Literacy Project to create a free online lesson to help teachers, students and the public be more critical consumers of medical information. The “Be Health Informed” lesson includes videos and stories, and it teaches viewers how to spot red flags that often accompany health misinformation. It also explores why some people are more vulnerable to health misinformation than others, and examines the high cost of distrust of the health institutions.

Combating the spread of medical misinformation and disinformation online is too important and too large a job for any one organization to do it alone. The responsibility falls on all of us who have taken an oath to protect patient health.