5 key terms future doctors must know to counter COVID-19 “infodemic”

OCT 21, 2022

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Medicine has long been plagued by snake-oil salesmen who prey on people’s emotions and the gaps in their knowledge. But health misinformation and disinformation have been taken to new heights during the COVID-19 pandemic, described by some as an “infodemic.”

Bad actors, bad ideas and bad data have corrupted some of the most important health topics, including COVID-19 vaccines and treatments. Even physicians, medical students and pre-meds who recognize this may not know how exactly to protect themselves and their loved ones from false information and might even unwittingly share it.

A free online lesson, “Be Health Informed,” produced by the nonprofit News Literacy Project teaches how to distinguish fact from fiction in health and wellness news. The free, one-hour lesson is geared toward the general public, but may be especially useful for pre-med students and others studying science, technology, engineering or math subjects. “Be Health Informed” features short videos backed up by brief quizzes to help users learn to spot the red flags that often accompany health misinformation and disinformation.

The lesson—developed with input from experts at Brown, Duke and McGill universities, the AMA, Centers for Disease Control and Prevention, and others—also helps students discern scientific reality based on evidence and testing, rather than feelings and intuition.

“For more than two years, physicians have fought twin pandemics of COVID-19 and medical misinformation,” said AMA President Jack Resneck Jr., MD. “The mistrust of medicine sown by misinformation, social media influencers, and even—in the worst-case scenarios—health care professionals has led to decreased vaccination rates, a far higher death rate in the U.S. from COVID-19 compared to other well-resourced countries, and most recently, a state of emergency in New York over polio. This lesson is critical to rebuilding trust in science and medicine as we redouble our efforts to improve the health of the nation.”

URL: https://www.ama-assn.org/delivering-care/public-health/5-key-terms-future-doctors-must-know-counter-covid-19-infodemic

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Key terms to sift fact from fake

Real-world examples of misinformation and disinformation pulled from social media platforms are sprinkled throughout. And to ensure learners gain a baseline understanding of the issues, the lesson also features a handy glossary of 11 essential terms, including the five below.

**Misinformation.** This is information “that is misleading, erroneous or false,” the lesson says. “While misinformation is sometimes created and shared intentionally, it is often created unintentionally or as humor—for example, satire—and later mistaken as a serious claim by others.”

**Disinformation.** This is “deliberately created to be false, usually to achieve a desired ideological or political result.”

**Anecdotal evidence.** Not really evidence at all, this is “made up of people’s stories about their personal experiences. It is notoriously unreliable and is not a good basis for making decisions.”

**Evidence.** This is the real thing—“facts that support a conclusion about whether a claim is right or wrong.”

**Echo chamber.** This is an “online space in which only information that supports a given belief is shared or repeated and any information that contradicts that belief is excluded.

Read about the AMA’s plan to stop the public health “infodemic.”

Applying the past to the present

The lesson also explores why some people are made more vulnerable than others to health misinformation and disinformation, as well as how racism, medical exploitation and limited access to care in historically marginalized communities have driven distrust of the American health system. It also explores some notorious examples of medical exploitation, including the U.S. Public Health Service Syphilis Study at Tuskegee.

Patients’ experiences “in the health care system—and the distrust those experiences engender—can make it easier for misinformation to spread,” said the lesson’s host, Melissa Clarke, MD. She formerly served as assistant dean at Howard University College of Medicine and is now CEO of the Be Health Empowered Group.
In a recent Leadership Viewpoints column, AMA President Jack Resneck Jr., MD, explained why turning the tide against medical disinformation will take all of us.

**Putting learning into action**

“It’s good to cultivate reasonable skepticism when it comes to health information that we see every day,” Dr. Clarke said.

“A few new habits can go a long way to making you more health informed,” she said. “The easiest and most important thing you can do is slow down. Pause before you share. Verify health information before spreading it.”

In other words, while social media posts may be stir your passions, that doesn't mean they are safe to share.

“If you feel yourself having an emotional reaction, step back,” she noted. “Think about those vulnerabilities that bad actors exploit—our distrust, our fears and our interest in belonging and storytelling. Question the source, evidence and consensus. And when you have questions or concerns, communicate with your doctor, not strangers on the Internet.”

Find out why social media networks must crack down on medical misinformation.