The Future of Health Journalism

Gary Schwitzer

Huge, expensive proton beam therapy facilities are popping up like wildfires across the American health care frontier. And in this case there is, indeed, some similarity with the gold rush of the Wild West. Proliferation seems to come in pairs; one medical center announces its plans to acquire the technology and soon a competitor in the area announces it is acquiring one as well. These cancer radiation systems may cost $125 – 225 million to install. Individual treatments may cost as much as $90,000. And in the current American health care picture, someone stands to profit from this high-technology wildfire.

Will journalists help citizens learn about the costs, and about the concerns that proliferation is outpacing evidence for this approach (Goozner, 2010)? Or will they simply be stenographers, writing down and passing along the claims made by proponents who have invested in – and stand to benefit from - these facilities?

Fear-mongering is also spreading across the American health care frontier, especially in the wake of historic health care reform legislation. Special interests are arming themselves to combat any evidence-based recommendation that any new comparative-effectiveness research effort might make. Efforts to publish evidence-based recommendations on mammography screening (US Preventive Services Task Force, 2009) and prostate cancer screening (American Cancer Society, 2010) have been branded by some as big government cost-cutting efforts, even though independent, non-government researchers made the recommendations in both cases.

Will journalists help citizens learn about some of the rampant uncertainties in current screening efforts and medical care? Or will they become advocates and crusaders for non-evidence-based causes?

Disease-mongering is a third plague sweeping the U.S. Its practitioners would lead everyone to believe that they have weapons of mass destruction inside of them and that if they haven’t been tested for their coronary artery calcium score or if they haven’t started taking statins daily, they are unwise (Wilson, 2010). Of course, there is an element of fear-mongering in disease-mongering, but it’s broader than that. This is the clear attempt to expand markets for drugs beyond their original intended use – drugs for erectile dysfunction, restless leg syndrome, social anxiety disorder, toenail fungus, overactive bladder, female sexual dysfunction and more.

Will journalists employ sound basic journalistic skepticism and poke holes in these marketing campaigns? Or will they turn over their airwaves, publications and websites, giving free advertising to the disease mongers? The future of health journalism will be defined by how journalists act on questions such as these.

Their performance on such stories in the immediate past shows how far they must go.

Our http://www.HealthNewsReview.org project has now reviewed more than 1,000 new stories concerning claims made for treatments, tests, products and procedures. We use ten standardized criteria to review stories, asking our reviewers (3 per story) to judge whether the story:

- Adequately discuses costs?
- Avoids disease-mongering?
- Evaluates the quality of the evidence?
- Quantifies the potential benefits? (in absolute, not just relative terms)
- Quantifies the potential harms? (in absolute, not just relative terms)
- Establishes the potential harms? (in absolute, not just relative terms)
- Establishes the availability of the idea?
- Establishes the availability of the approach?
- Uses independent sources and identifies conflicts of interest?
- Compares the new idea with existing options?
- Appears to rely on a news release?

After four years, and after reviews of more than 1,000 news stories by more than 70 news organizations, we report that about 70 percent of stories over-emphasize benefits, minimize harms, and fail to adequately discuss costs. A similar imbalance between the harms and benefits of cancer treatments was found in an analysis that focused on cancer-related news coverage (Brown, 2009 and Fishman et al., 2010).

Some journalists may feel that we have set an unrealistically high standard. We believe we have identified the standards that must be addressed in order to fully inform consumers of news and of health care. These stories reflect an overly optimistic view of progress in medical research. We believe they lead citizens to develop unrealistic expectations of their health care system.

Such stories may raise undue demand for costly and unproven approaches that may, in the end, cause more harm than good.

At the same time, there is some reason for hope. There are several excellent journalism training opportunities in...
the US that emphasize an evidence-based approach to health news. We must help journalists help their readers to become healthy skeptics and evaluators of the myriad claims made about health care interventions. Washington Post reporter David Brown wrote:

``In this new world, science reporting – done without exaggeration, and with an eye to giving the reader enough information to make up his own mind – can be a model for intelligent discourse."

We have not had much of an intelligent discourse about health care, about the medical arms race, about those who don’t have insurance, about evidence, about disparities, about costs, or about rationing in the pages, websites or broadcasts of many American news organizations. It’s an agenda-setting role that journalists should play but often don’t in this arena of health care. While this is an American perspective, many of these themes are probably pertinent in the practice of health journalism around the globe. The future of health journalism will be determined by which roles journalists choose for themselves: cheerleader or watchdog, fear-mongerer or evidence-based reporter, part of the solution or part of the problem.

Literatur siehe Literatur zum Schwerpunktthema.
www.elsevier.de/phf-literatur

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Abstract
The HealthNewsReview.org project finds that many news stories reflect an overly optimistic view of progress in medical research. This may lead citizens to develop unrealistic expectations of their health care system, raising undue demand for costly and unproven approaches that may, in the end, cause more harm than good. The future of health journalism will be determined by which roles journalists choose for themselves: cheerleader or watchdog, fear-mongerer or evidence-based reporter, part of the solution or part of the problem.

Keywords:
health journalism = gesundheits journalistus, disease-mongering = krankheit schwarzmalerei, proton beam therapy = protonentherapie, screening tests = screening-tests, medical arms race = medizinische wettrüsten, medical evidence = medizinische beweise

References