

Observations from the Mayo Clinic National Conference on Medicine and the Media

Jane C Lantz and William L Lanier

The Mayo Clinic National Conference on Medicine and the Media, held 20-22 September 2002 in Rochester, Minnesota, was attended by more than 500 participants—medical and health journalists, scientific-journal editors, physicians and other health-care professionals, industry representatives, government officials, institutional public-information officers, public-relations professionals, patients, and patient advocates. Its purpose was to bring together all facets of the medical-news dissemination process with the hope of identifying ways to serve the public more effectively.

Nondidactic methods were used throughout the conference.

Case Study

One of the case studies used to provide a context for an analysis of the medical-news dissemination process was an article on hormone-replacement therapy (HRT) published in the *Journal of the American Medical Association* in July 2002.¹ Data presented by the Gallup Organization indicated that after the media coverage of research about HRT, 44% of women said that the media reports did more to confuse than to enlighten them; 37% felt the reports made them better able to make decisions about this health issue, and 19% had no opinion. The net result was that 33% of women claimed that the news reports about the new HRT research either had caused or might cause them to reconsider use of HRT.

Discussion ensued among a diverse panel

JANE C LANTZ is an editor in the Section of Scientific Publications, Mayo Clinic. WILLIAM L LANIER is editor-in-chief of Mayo Clinic Proceedings and a consultant in the Department of Anesthesiology, Mayo Clinic; he was a cochair of the conference.

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that included medical journal editors, television and radio reporters, newspaper and magazine journalists, patients, and researchers. They represented the spectrum of transmission of medical information from initial presentation of full clinical-study results in a peer-reviewed medical journal to newspaper and magazine articles to radio and television reports.

It emerged that reporters often rely on medical journals as a principal source of information for new discoveries. However, the physicians and scientists who write articles for the medical journals target their writing to other physicians and scientists who are trained to judge the merit of the research and to place research findings in proper context.

It is a challenge for reporters to interpret medical journal reports—which might not contain conclusive information but instead offer preliminary results of research in progress—and translate the findings to an expectant public. Their success in doing so depends on reporters' expertise and ability to obtain analytic insights and commentary from experts in medical research relevant to the topic of discussion. Sentinel reports issued by elite media organizations, which presumably have the desire and expertise to validate the credibility of medical reports, are often used as source material for other less-privileged or time-challenged news organizations. As information moves through the news-dissemination process, it may become markedly attenuated compared with the original medical journal article and comprehensive media reports.

Although the public expects medical-news reports to contain an educational element, reporters tend to focus on straightforward, accurate, and timely reporting. Providing background educational information is of secondary concern.

Observations

On the basis of this case study, another case study concerning mammography screening,^{2,4} a mock hearing demonstrating the oversight efforts of the Minnesota News Council to ensure media integrity, and a

discussion of the influence of money on the media, concluding observations focused on three themes.

First, the scientific issues that form the basis of media reports are often not clearly resolved before media reports are formulated and disseminated. Confusion arises from conflicts between news generators (physicians and scientists who may prefer to wait for clearer scientific evidence to evolve) and the media and public (who desire rapid reporting of the best available information).

Second, people with a variety of interests and agendas contribute to the generation and dissemination of medical news. These values may differ from the needs of the news consumers. The goals and interests of both reporters and consumers may change as medical news cascades from one media format to another. Frustration arises when the expectations of news consumers differ from those of news providers.

Third, the needs of the news consumer vary according to the basic health status or situation: The needs of the reader confronting illness may not be the same as those of the healthy, curious observer. The needs of the patient may differ from those of the concerned family member.

Conclusion

The conference format of case and panel discussions proved effective in stimulating debate and making all participants aware of the strengths and limitations of existing medical-news dissemination activities. 

References

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