AMA Adopts New Policies During Final Day of Annual Meeting

For immediate release:
June 15, 2010

CHICAGO - The American Medical Association (AMA), the nation’s largest physician group, voted today at its Annual Meeting to adopt the following new scientific policies.

Assuring Patient Access to Physicians Under Medicare
In the wake of a Medicare meltdown caused by a 21 percent Medicare physician payment cut, the AMA voted to immediately formulate legislation for a new Medicare payment option. It would allow patients and physicians to freely contract for payments that differ from the Medicare schedule, while allowing patients to use their Medicare benefits.

"Seniors deserve a Medicare benefit that allows them access to and choice of physicians," said David O. Barbe, M.D., AMA trustee. "Low Medicare payments, continued payment uncertainty, and a steep 21 percent payment cut have put access and choice in jeopardy. A new patient-centered category of Medicare payment will allow seniors to use their Medicare benefit fully for the health care they need."

Shackling of Pregnant Women in Labor
The AMA voted to develop model state legislation prohibiting the use of shackles on pregnant women unless flight or safety concerns exist.

"As physicians we must speak out against medically hazardous practices," said David O. Barbe, M.D., AMA trustee. "About a half dozen states have legislation on this issue now, and we urge other states to adopt similar laws."

Physicians Encouraged to Develop Medical-Legal Partnerships
To help physicians identify and resolve diverse legal issues that affect patients’ health and well being, the AMA passed new policy today that encourages physicians to develop partnerships with nurses, social workers and attorneys.

"Through this partnership, the unmet legal or environmental needs of patients can be addressed before they reach crisis proportions," said AMA Board Member David O. Barbe, M.D. "The AMA encourages physicians to develop medical-legal partnerships, and we will help them do this by creating a model agreement and working with key stakeholders on education."

Enhancing Patient Care by Using Personalized Medicine
The American Medical Association (AMA) adopted today at its Annual Meeting new policy to support personalized medicine as a way to enhance patient care. "Personalized medicine" (PM) refers to health care that is informed by a person’s unique clinical, genetic, and environmental information. It has long been known that individual patients respond to the same disease and treatments differently, and the goal of PM is to identify these individual differences so that the best treatments and preventions can be used. In order to maximize the benefit of PM, the health care workforce needs ongoing education about the use of genetic technologies in clinical care. Adequate
health care, further allowing physicians to refine diagnosis, treatment and prevention,” said AMA Board Member Peter W. Carmel, M.D. “The AMA will inform physicians about emerging personalized medicine issues and develop educational resources and point-of-care tools to assist physicians in implementing personalized medicine.”

**Antibiotic Resistance and the Development of New Treatments**
Over time antibiotics lose the ability to treat diseases because bacteria eventually becomes resistant to them. Antibiotics must be used only when necessary so that we can prolong their effectiveness. These challenges are compounded by a lack of new antibiotics under development by pharmaceutical companies. Today the AMA passed policy to increase efforts to educate the public about antibiotic resistance and raise awareness of the lack of new antibiotics in the drug development pipeline. The AMA will also endorse the “10 x ‘20” initiative which aims to create 10 new antibiotics by 2020.

“Antibiotics that have saved millions of lives and eased patients suffering, but antibiotic resistance is a serious patient safety and public health threat,” said AMA Board Member Peter W. Carmel, M.D. “Experts from medical, scientific, policy, and regulatory communities need to work together to increase awareness of antibiotic resistance and find ways to create new antibiotics.”

**Skin Cancer Prevention in Communities of Color**
The five-year survival rate from melanoma is lower in African Americans (58.8 percent) than Caucasians (84.8 percent), and the incidence of melanoma among Hispanics over the past 15 years has risen to rates comparable among whites. Hispanics and African Americans are screened less frequently for skin cancer and mistakenly believe that their chance for developing skin cancer is lower compared to Caucasians. Today, the AMA passed policy to support and encourage efforts to increase awareness of skin cancer risks, skin cancer screening, and sun-protective behaviors in communities of color.

“All patients regardless of race or ethnicity should use the same sun protection measures including sunscreen of at least SPF 15, avoid the sun during peak hours and regular exams,” said AMA Board Member Peter W. Carmel, M.D. “However, African Americans and Hispanics are much less likely to practice these behaviors, and the AMA supports efforts to increase awareness.”

# # #

For more information, please contact:

AMA Media Relations
(312) 239-4991 (HOD pressroom)
(312) 464-4430 (AMA Office)

Follow AMA on Twitter and Facebook.