

2-1-1995

[Book Review of] *The Serpent on the Staff (The Unhealthy Politics of the AMA)*, by Howard Wolinsky and Tom Bruce

Eugene F. Diamond

Follow this and additional works at: <https://epublications.marquette.edu/lnq>



Part of the [Ethics and Political Philosophy Commons](#), and the [Medicine and Health Sciences Commons](#)

Recommended Citation

Diamond, Eugene F. (1995) "[Book Review of] *The Serpent on the Staff (The Unhealthy Politics of the AMA)*, by Howard Wolinsky and Tom Bruce," *The Linacre Quarterly*: Vol. 62 : No. 1 , Article 12.

Available at: <https://epublications.marquette.edu/lnq/vol62/iss1/12>

BOOK REVIEW

The Serpent on the Staff *(The Unhealthy Politics of the AMA)*

by

Howard Wolinsky and Tom Bruce

G.P. Putnam's Sons, New York 225 Pages Plus Appendice \$24.95

The authors of this expose of the inner workings of the American Medical Association are two experienced investigative reporters from *The Chicago Sun Times*. One of the authors, Howard Wolinsky, also spent ten years with the AMA where he became privy to the inner workings of the massive professional organization. The authors are very knowledgeable when detailing the behind-the-scenes political activities of the AMA hierarchy, but it is not always easy to agree with the inferences and deductions drawn regarding the motivation for these activities.

The authors detail the declining authority of the AMA vis-a-vis other professional organizations representing the various medical specialty groups such as the American College of Surgeons, the American College of Ob-Gyn, the American College of Physicians, and the Family Practice Group. The decline in authority has been particularly in the area of scientific prestige where its authority has been diluted by its dealings with drug companies, food companies, and other corporate sponsors. Its biggest scientific influence derives from the *Journal of the American Medical Association*, the largest medical journal in the world with 700,000 subscribers. The influence of JAMA is extended by the fact that news releases based in *Journal* articles are sent to 4000 science writers and spot announcements are circulated to 5000 radio stations and 340 television stations. Most of these releases are used by media people hungry for current and authoritative medical material.

The decline of the AMA is best demonstrated by the decline in dues paying members. The AMA claims to speak for "90% of doctors". This would be 576,000 members. In 1993, however, there were only 275,510 members in the AMA. If the non-physician student members are subtracted, this leaves 245,465 members which is not 90% of doctors but actually *only* 38%. Furthermore, some residents and retirees pay reduced dues. The number of members who pay full dues are 153,268 which is only 24% of doctors. This membership is 1/2 of what it was 20 years ago and only about 1/3 of what it was 30 years ago.

The AMA claims to be democratic by way of the 440 members of the House of Delegates who theoretically represent a grass roots constituency. The House of Delegates, in turn, elect the trustees and the president. While the president is largely a figurehead and a mouthpiece for the policies of the AMA, the Chairman of the Board is a powerful leader who draws a \$200,000 annual salary.

There is question as to how well the leadership represents the rank and file. In 1966, 73% of members approved the actions of the leadership. In less than 20 years, this had dropped precipitously to the point where only 33% currently endorse the actions of the leadership. The image of the physician has dropped in the public perception during this same period. 71% of patients feel that they wait too long, 44% feel that the doctors act superior to other people, 69% feel that doctors are too interested in making money and 2/3 feel that fees are too high. All of these numbers are up dramatically in the last 30 years. Like members of Congress, the public may like their own physician, but do not like doctors as a group.

The AMA has developed a reputation as a trade association representing the interests of its membership rather than the interests of the patient. This reputation was earned over three epic battles in the past half century to protect the fee-for-service system. The struggle with federal forces culminated in 1964 when the Johnson administration was able to pass Medicare and Medicaid over AMA objections. Medicare has, however, proved to be more of a bonanza than a burden to the medical profession. 80% of bills for services exceeded medical "reasonable charges" in 1983 since there were no statutory limitations on reasonable charges. Charges were much higher than Blue Shield payments for comparable services and most medical doctors engaged in balance billing rather than accepting assignment. In 1984 the AMA called for a freeze on fees and Congressman Rostenkowski, in the powerful House Ways and Means Committee, proposed mandatory assignment and freeze of fees. Doctors, however, circumvented the freeze by increasing the number and variety of services. The momentum for health care reform actually can be attributed to the avarice of physicians who contributed heavily to the escalating cost of federal medical care. The increase in medical costs vastly outstripped inflation. The aging population and new technologies contributed to the escalation of costs.

It is questionable how big a player the AMA will be in the present health care reform movement. Hillary Clinton's task force included no AMA representation among its 538 members and the AMA was slow to show appropriate affront at this insult. In fact, when Hillary appeared before the House of Delegates, she was given a standing ovation *before she spoke!* After this she fed them the usual Clinton line of things they wanted to hear, including a preposterous promise of tort reform.

The greatest strength of the AMA in the health reform debate will derive from its Political Action Committee — AMPAC. AMPAC over the years has contributed approximately \$100 million dollars to politicians, including candidates. This is three times more than the National Rifle Association and 1½ times more than the National Education Association. A list of recipients of AMA largesse in the book includes congressional members who are opposed as well as supportive of AMA positions. Support of enemies is justified in the dubious rationale of "keeping lines of communication open".

In the 1970's, AMPAC spent \$10,300 on average on every seat in the house. AMA got deeply into the Reagan-Bush campaign and bought three buildings in Washington, D.C. to further its political arm. The reputation of AMPAC inside the beltway is that of a very sophisticated lobbying group operating ingeniously within the \$5000 contribution limit by various strategies of "indirect contributions" such as supporting advertisements and buying campaign materials. Dr. F. J. L. Blasingame, one of the more revered executive directors in the history of the AMA, warned about the threat to the scientific and educational activities of the organization posed by political maneuvering. This was confirmed during the administration of Dr. James Sammons who involved the AMA aggressively in politics and high finance.

One of the most sensitive issues threatening the reputation of practicing physicians is the issue of self-referrals. The image of the physician as a patient advocate is tarnished by his ownership of laboratories, X-ray facilities and MRI machines. A study by the Institute of Medicine estimated that 12% of physicians were double-dipping by referring to facilities in which they shared ownership. A Florida study estimated that the actual figure was more like 46%. The AMA, embarrassed and feeling that Caesar's wife should be beyond reproach, formed a Task Force on Self-Referral. This task force recommended that self-referral should be discouraged except in small communities where there was no other option. The Task Force recommended that doctors remember their calling and learn to choose professionalism over entrepreneurship. The New Jersey delegation nevertheless introduced a resolution in the House of Delegates saying that self-referral was permissible as long as the patient knew about it. Representative Pete Stark of California, calling The New Jersey actions the "Oath of Hypocrisy", introduced a bill banning self referrals. The credibility of the AMA was severely tarnished in the process.

The book explores the AMA's activity on specific issues with great cynicism. On the subject of tobacco, for example, the AMA has a checkered record of performance. Between 1930 and 1950 JAMA accepted cigarette advertising. In 1950, Dr. Ewerts Graham demonstrated a relationship between tobacco and lung cancer. JAMA accepted \$100,000 worth of cigarette ads on the micronite filter in 1952 even though the filter let through 56% of tars and 59% of nicotine. The authors allege that there was a covert alliance between the AMA and tobacco state members of congress in which silence on tobacco's dangers was exchanged for opposition to Medicare. In 1964 when the Surgeon

General's report confirmed that cigarette smoking caused lung cancer, emphysema, and heart disease, the AMA accepted \$10 million from tobacco companies as contributions to the AMA Education and Research Fund. Also in 1964, the AMA opposed warning labels on cigarettes in favor of further research on tobacco hazards. It took until 1978 before the AMA began to testify in congress, against tobacco in favor of warning labels. In 1985, the AMA finally disinvested in tobacco companies although it continues to accept donations from conglomerates that include tobacco companies. Finally, in 1994, the AMA accepted a grant from the Robert Wood Johnson Foundation to open an anti-tobacco office.

The AMA's performance on the issue of abortion is a strange and sorry odyssey indeed. From 1850-1900, the AMA, led by Dr. Horatio Storer and spearheaded by obstetricians, campaigned for the criminality of abortion. Proceedings of the AMA House of Delegates during the century from 1850-1950 read like proceedings of a Right to Life convention. In 1871, the Committee on Criminal Abortion called abortion "unethical" not because of a risk to the pregnant woman but emphatically because of the sanctity of fetal life. Ironically, the feminist movement of the time supported the AMA because of their desire to protect women from forced abortion.

In the 1960's, the AMA began to revisit the issue based on the American Law Institutes Model Penal Code. When states began to pass laws based on this code between 1967 and 1970, the debate intensified. Finally in 1970, the House of Delegates took the perposterous position that abortion was ethical if it took place in a state where it was legal but unethical if it took place in a state where it was illegal. In doing so, the AMA made the fatal mistake of tying its ethics to the laws of the state. This was the same mistake of the Nazi doctors who defended themselves by pleading at the Nuremberg trials that they were only following orders from the Nazi government. Medicine as a learned profession should have its own code of ethics separate from that of the state.

The hypocrisy of the AMA position was not lost on the members, 20,000 of whom defected from the AMA over the abortion issue between 1970 and 1972. After the *Roe v. Wade* decision in 1973, the AMA took the position in testimony before congress that the government should not substitute its judgement for the doctor's as to when abortion should take place. In doing so, it abandoned its concern for its patient, the unborn child, that it had espoused for 100 years and overlooked the fact that the abortionist was a financially interested party to abortion. In 1987, the House of Delegates acknowledged a "right to early abortion" but retreated from it in response to protest.

The sorriest record on the issue of abortion relates to the editorial policy of JAMA on the issue. Wolinsky is in possession of an internal memo from Editor George Lundberg of JAMA indicating that he wanted his editorial board to screen out anti-abortion articles in favor of abortion advocacy. The book is fairly easy on Dr. Lundberg, the hapless incumbent of the JAMA. Dr. Lundberg is a pale imitation of past respected editors such as Dr. Morris Fishbein or even recent talented editors such as Drs. Talbot and Barclay. An inept and polemical person, Dr. Lundberg has been in constant hot water with the membership. His principal gaffe was the notorious "It's over, Debbie" article in which he published an anonymous article by a house officer who murdered a patient he was seeing for the first time by injecting her with a fatal dose of morphine. In response to protest, Dr. Lundberg pleaded first amendment protection, a ludicrous defense, while refusing to identify the author. This allowed the author to go free to kill again. He stated that mercy killing needed a "crisp discussion", whatever that is. Later he decried the fact that doctors discriminated against women even though 56% of office visits were for the care of women. Subsequently he lamented that only the United States and South Africa failed to provide adequate health care for black "minorities". His protest failed to recognize that blacks are a majority not a minority in South Africa and his evidence for discrimination in the United States was political not medical. Several attempts by the House of Delegates to provide an oversight committee for their loose-cannon editor have failed of passage. It is unfortunately likely that his biased and incompetent editorship will continue to stumble into the era of health care reform.

The weakest chapter in the book is the chapter on AIDS, which repeats the old cliches of accusation against the various villains who "failed to respond" to the AIDS' epidemic. All of the propaganda of the Gay Rights Movement is resurrected to accuse the AMA along with everybody else except the homosexuals and drug users responsible for the behavior that established and perpetuated the epidemic. "Gay-related Immune Deficiency Syndrome" was first reported by the Communicable Disease Center of the U.S. Public Health Service in 1981. The AMA had a policy of "non-judgmental" treatment by 1983. After the HIV antibody first became available in 1985,

Surgeon General Koop developed a 40 point AIDS policy. The AMA reluctantly recommended that infected surgeons stop performing invasive procedures and finally was dragged kicking and screaming with a recommendation for voluntary testing of high risk groups. The authors of this book politicize all of the epidemiological responses to the spread of AIDS in an unsophisticated and scatter-shot set of accusations. They naively describe ACT-UP, the group responsible for sacrilegious attacks on St. Patrick's Cathedral communion services as a group "famous for street theater". The chapter is so politically correct and doctrinaire that it threatens the credibility of the entire book.

On balance, however, the book is worth reading as it documents the AMA's core position as

- 1) Extending the power of the AMA as an organization
- 2) Defending the autonomy of doctors over social justice
- 3) Enabling physicians to make as much money as possible
- 4) Maintaining physicians' control over the health care system
- 5) Defending fee for service as the preferred method of health care delivery

Not all of these core goals are indefensible but the pursuit of primarily economic goals has allowed the AMA to abandon important opportunities to defend crucial ethical issues such as abortion, physician assisted suicide, euthanasia and provision of health care for the poor.

The AMA spends a \$180 million annual budget, including six figure salaries for much of its leadership, without convincing the membership that it is effective or even relevant. Its recent endorsement of organ donation by live anencephalic donors indicates that it is particularly inept in the field of bioethics. This book is a serious indictment of the AMA as it attempts to lead the progression into an era of radical change and health care reform.

— Eugene F. Diamond, M.D.
Professor of Pediatrics