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AMA Adopts New Public Health Policies to Improve Health of Nation

November 17 2021 – The American Medical Association (AMA), the premier national physician organization in the country, announced policies adopted by physician and medical student leaders aimed at improving the health of the nation. The new policies, which include protecting workers from heat-related illness, ensuring equitable representation of skin tones in medical education, increasing the availability of feminine hygiene products in schools and workplaces, and bolstering efforts to promote safe use and recovery for people who inject

drugs, were approved during the voting session of the Special Meeting of the AMA House of Delegates.

The policies include:

Advocating for Heat Exposure Protections for All Workers

Despite the fact that heat-related deaths and illnesses are preventable, each year thousands of people become ill from occupational heat exposure and an average of about 658 people die from extreme heat annually, according to the Occupational Safety and Health Administration (OSHA) and the Centers for Disease Control and Prevention respectively. Prolonged exposure to heat can lead to potentially deadly illnesses, such as heat exhaustion and heat stroke, and symptoms can strike quickly. In addition, working in excessively warm conditions has been shown to increase workplace accidents from fatigue. Excessive sun exposure can cause skin cancers, melanomas, and premature aging. The new policy adopted today by the AMA House of Delegates calls for the organization to advocate for all workers to have access to preventative cool-down rest periods in shaded, ventilated, and/or cooled areas to prevent injury from sun exposure and heat injury, as well as appropriate access to emergency services when signs and symptoms of heat exposure injury appear.

Under the new policy, the AMA will advocate for legislation that creates federal standards for protections against heat stress and sun exposure specific to the hazards of the workplace. The policy also calls for AMA to support policy change at the federal level, through legislation or administrative rule changes by OSHA, requiring that workers receive educational materials in their primary language about prevention and signs of heat exhaustion and heat exposure injury. The AMA will also work with the U.S. Department of Labor, OSHA, and other appropriate federal stakeholders to develop and enforce evidence-based policies, guidelines, and protections against heat injury for workers independent of

legal status.

“Every person should have the right to work in an environment that’s safe and free from the dangers of extreme heat. We believe that better federal heat-specific injury protections are needed to protect all workers from heat-related illness, injury and death, whether working inside or outside,” said AMA Immediate Past Board Chair Russell W.H. Kridel, M.D.

Additionally, the policy adopted today recognizes that there are particular medical conditions and medications, including but not limited to psychotropics, which increase an individual’s vulnerability to the negative impacts of heat and sun exposure. As part of the policy, AMA will advocate for recognition of this, as well as additional protections as part of any guidelines, legislation or other policies.

Ensuring Diverse Range of Skin Tones Represented in Dermatology Medical Education

Building on significant efforts to achieve optimal health for all, the AMA House of Delegates today adopted policy to encourage comprehensive, inclusive and equitable representation of a diverse range of skin tones in all dermatologic and other relevant medical educational resources for medical students, physicians, non-physician health care providers and patients. The new policy seeks to address higher probability of late detection of diseases for people with dark skin tones, as well as a larger lack of targeted skin cancer awareness and prevention efforts for patients with darker skin tones, resulting in lower rates of skin cancer screening.

“With about 75 percent of dermatological imagery in medical textbooks representing people with lighter skin tones, there is a significant gap in training and education with important downstream impacts on patient populations,” said AMA Immediate Past Board Chair Russell W.H. Kridel, M.D. “By bolstering diversity in imaging and educational materials, the chance for

early detection of skin cancer and other dermatologic pathologies is greatly increased among populations with darker skin tones.”

Increasing Availability of Feminine Hygiene Products

Recognizing the adverse physical and mental health consequences of limited access to menstrual products, the American Medical Association will seek to increase their availability in the workplace and schools.

The AMA will ask the Occupational Safety and Health Administration and other relevant stakeholders to provide free, readily available menstrual care products to meet the needs of workers. In addition, the AMA will advocate that public assistance programs cover the cost of these products. Currently, benefits from neither the Supplemental Nutrition Assistance Program nor Special Supplemental Nutrition Program for Women, Infants, and Children can be used to purchase menstrual hygiene supplies, even though these are necessities for women.

Surveys have shown that impoverished women struggle to pay for menstrual products. As a result, they are used in an unhygienic way or rely on homemade products that can lead to serious health problems.

“Without proper hygiene products, women sustain infections, injuries, or embarrassment. Women report high rates of having had to miss work since menstrual products are not available publicly, and girls report high rates of having had to miss school for the same reason,” said AMA Board Member Willie Underwood III, M.D., M.Sc., M.P.H. “Moving policy in this direction will combat gender inequities by making hygiene products available in public spaces, including schools, and incorporating these products in supplemental nutrition programs.”

Enhancing Harm Reduction Policies for Safe Use and Recovery

for People Who Inject Drugs

With the opioid epidemic worsening and exacerbated by the COVID-19 pandemic, the AMA House of Delegates adopted policy aimed at bolstering ongoing efforts to promote safe use and recovery for people who inject drugs. Provisional data from the Centers for Disease Control and Prevention reports more than 92,000 drug-related overdoses between December 2019-December 2020. Illicitly manufactured fentanyl and fentanyl analogs are driving drug-related overdose and death, fentanyl is a contaminant in many illicit substances, and methamphetamine and cocaine are killing more people than prescription opioids or heroin.

Most people who are using fentanyl-contaminated drugs do not know they contain fentanyl, and, unfortunately, drug-checking technologies, such as fentanyl test strips, are classified as illegal drug paraphernalia in the majority of U.S. states even though such technologies are associated with positive health outcomes and may decrease overdose rates. The new policy calls for the AMA to advocate for harm reduction policies that provide civil and criminal immunity for the use of “drug paraphernalia” designed to support safe use of drugs, including drug contamination testing and injection drug preparation, use, and disposal supplies.

“Over the past decade, mitigation efforts like syringe service programs have effectively promoted safe use and recovery for people who inject drugs. This policy builds on those successful efforts and seeks to break down barriers to better address the ongoing tragedy of the drug-related overdose crisis,” said AMA Immediate Past Board Chair Russell W.H. Kridel, M.D.

About the American Medical Association

The American Medical Association is the physicians’ powerful ally in patient care. As the only medical association that

convenes 190+ state and specialty medical societies and other critical stakeholders, the AMA represents physicians with a unified voice to all key players in health care. The AMA leverages its strength by removing the obstacles that interfere with patient care, leading the charge to prevent chronic disease and confront public health crises and, driving the future of medicine to tackle the biggest challenges in health care.

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