

# The power of the pen: how doctor voices can combat the coronavirus pandemic

## Dominique Vervoort<sup>1</sup>, Jacquelyn Corley<sup>2</sup>

<sup>1</sup>Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland, USA; <sup>2</sup>Department of Neurosurgery, Duke University Medical Center, Durham, North Carolina, USA

Correspondence to: Dominique Vervoort, MD. Johns Hopkins Bloomberg School of Public Health, 615 North Wolfe Street, 21205 Baltimore, Maryland, USA. Email: vervoortdominique@hotmail.com.

Received: 19 April 2020; Accepted: 24 July 2020; Published: 25 September 2020.

doi: 10.21037/jphe-20-35

View this article at: http://dx.doi.org/10.21037/jphe-20-35

As the number of COVID-19 test-confirmed positive cases is set to reach 10 million around the world, the public resorts to the media to understand the intricacies of the pandemic, the disease, and all that surrounds it (1). As quickly as the virus spreads, so does misinformation, distrust, and fear-risking the largest calamity in modern history. State leaders initially disregarded the threat of COVID-19 when reports from China started to cause concerns among virologists and epidemiologists. Potential pharmacological treatments were monopolized by pharmaceutical companies, whilst initial testing came at a large out-of-pocket cost in the United States. Xenophobia, racism against individuals of Asian descent, and Gen-Z indifference to adhere to social distancing by some underlined the difficulties of containing the pandemic. While clinical preprints and armchair epidemiologists sow fear, physician leaders and trained epidemiologists seek to combat the COVID-19 spread through raising their voices online and in the media.

Health care professionals are in a powerful position to write about their experiences from a point of view many do not understand or think of. Medical training not only provides the foundational education about immunology, microbiology, and epidemiology—several subjects that are deeply relevant with the ongoing pandemic—but we work on the front lines of patient care and witness first hand the devastation of the coronavirus. Before the times of COVID-19—if one can even remember that far back—many doctors were successfully engaging with the general public and taking advantage of the media to share clinical points of view and medical education. Dr. Atul Gawande,

for example, has been writing for the New Yorker since 1998 and has been an influential voice about patient-doctor perspectives, the United States' healthcare system, and public health. Notably, his ability to translate common and often undescribed medical phenomena to the layperson has allowed many to empathize and better understand the intricacies of day-to-day medicine. Now, he is leveraging his position to speak up about the inequalities and untold stories underlying the outbreak, including the need to protect our health care workers (2). Similarly, Johns Hopkins' Dr. Martin Makary, the creator of the Surgical Checklist and New York Times bestselling author, has regularly published in major media outlets such as CNN, USA Today, The Wall Street Journal, and Time. Dr. Makary has been particularly influential in catalyzing health equityoriented discussions with a focus on value-based health care and market pricing in the domestic health system. Now, he, too, is pushing the frontiers of barriers to access to care for COVID-19 suspected and positive cases (3). Gawande and Makary are joined by dozens of physicians using their pens to challenge contemporary medical paradigms and bring a change in our hospital cultures, health systems operations, and broader health policies.

Many opportunities arise for us to think beyond journals and share vital information to the public about COVID-19. Op-eds, "opposite of the editorial", are short communications interspersing facts with authoritative opinions written by individuals with considerable expertise in a certain matter. Writing op-eds for mainstream media substantially differs from preparing a traditional manuscript for academic publication. The tone is more familiar and

evoking emotion is not only allowed but preferred. Writers want the readers to be hooked and feel emotionally involved with the topic. Many pieces start out with a short vignette or story to get the readers interested early on in the process. Persuasive language and opinion need to be integral to the text; the goal is for readers to be convinced of your viewpoint on the topic. Throughout the body of the text, writers can introduce the concept and educate the reader about the message. Additionally, writing blogs and op-eds tend to be shorter pieces that get to the point quickly, but this comes with the need for remaining nuanced and to the point in order to not overwhelm the reader with too much information.

Op-eds are published online, in print, or both, and more freely accessible for the general public. They allow us, as physicians and scientists, to communicate research findings to non-academic audiences in an easily understandable manner. Every day, new studies are emerging about COVID-19, including new potential treatments and vaccines, mortality rates, common complication, geographic spread, and exponentially rising incidences in each country. The average reader will not be able to extract information from a randomized controlled trial, understand the implications of animal models, or decipher what a p-value or confidence interval means. Op-eds further have the power to instigate cultural change and combat public misconceptions. While presidential superpowers were still denying the existence of coronavirus, many scientists and doctors were trying to warn the world of its imminent threat.

Notably, as clinicians, we can be considered societal megaphones, able to approach social (in)justice from a unique perspective: health care professionals, after all, are at the treating end of this abominable viral enemy. Our voices often lack in the health policy discourse, not rarely guided by a non-representative group of stakeholders. As per the Hippocratic Oath, we vow to "keep [our patients] from harm and injustice". Every person in our communities are potential patients; and they need us now. For centuries, physicians have positioned themselves in a trustworthy and privileged role within society; one that should not be taken lightly, and may not be abused but leveraged to great benefit: we ought to advocate for patients, especially those whose voices are left unheard. Now more than ever, doctors and other health care workers need to get more content in the media to be the voices of science and reason and to counteract the growing amount of false data, overly rosy press conference prophecies, and unbridled panic that exists

on our media outlets.

There has been no better time to recognize the impact of health workers on the frontline, and the challenges faced in times of scarcity and growing concerns of systemic overwhelm. Public reports of clinicians in Italy gave insights to the grave scenarios some of the most powerful countries in the world may face, and recent developments in New York, Boston, and Los Angeles suggest no less. However, amidst the cries of despair, so, too, is there time for reason and hope. Voicing ourselves through media, more and more medical professionals are pressuring change among pharmaceutical companies, policymakers, state leaders, and hospital directors.

As health care professionals, we need to raise their voices about coronavirus and its many societal impacts. Op-eds, blogs, and other mainstream publications are the perfect mediums to transcend our messages out of the echo chamber that is academic medicine, to the public. We can challenge the status quo and potentiate social change—such is the power of the pen.

### **Acknowledgments**

Funding: None.

#### **Footnote**

Provenance and Peer Review: This article was a standard submission to the journal. The article was sent for external peer review.

Conflicts of Interest: All authors have completed the ICMJE uniform disclosure form (available at http://dx.doi. org/10.21037/jphe-20-35). DV serves as an unpaid editorial board member of Journal of Public Health and Emergency from Mar 2020 to Feb 2022. The authors have no other conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Open Access Statement: This is an Open Access article distributed in accordance with the Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License (CC BY-NC-ND 4.0), which permits the noncommercial replication and distribution of the article with

the strict proviso that no changes or edits are made and the original work is properly cited (including links to both the formal publication through the relevant DOI and the license). See: https://creativecommons.org/licenses/by-nc-nd/4.0/.

#### References

 Dong E, Du H, Gardner L. An interactive web-based dashboard to track COVID-19 in real time. Lancet Infect Dis [Internet]. 2020 Mar 29. Available online: https://doi. org/10.1016/S1473-3099(20)30120-1

doi: 10.21037/jphe-20-35

Cite this article as: Vervoort D, Corley J. The power of the pen: how doctor voices can combat the coronavirus pandemic. J Public Health Emerg 2020;4:17.

- Gawande A. Keeping the Coronavirus from Infecting Health-Care Workers. New Yorker [Internet]. 2020 Mar 21. Available online: https://www.newyorker.com/news/ news-desk/keeping-the-coronavirus-from-infectinghealth-care-workers
- 3. Nundy S, Makary M. Let patients test themselves at home. The Washington Post [Internet]. 2020 Mar 27. Available online: https://www.washingtonpost.com/opinions/2020/03/20/coronavirus-is-upending-society-here-are-ideas-mitigate-its-impact/?arc404=true