HISTORY OF JOURNALISM

This chapter is presented in two sections. Section one given a brief sketch about journalism and the section two presents a description of the medical journalism.

Section – I

Introduction

News is natural human need. “Human beings exchanged news long before they could write” wrote Mitchell Stephens in A History of News.”

The desire to communicate is inherent, and it breeds a desire to share new information and gather important intelligence, which begets the concept of news and what would become journalism and the news business. While all people enjoy good news and gossip, it is accurate news that matters most to society. The desire for factual information is an inseparable component of news and has emerged as the foundation of modern journalism. It is also the foundation upon which people and societies make important decisions and formulate their worldviews.

The History of journalism as a profession begins primarily with the early news papers of seventeenth century. But the history of accuracy as a codified professional ethic, within the press begins to emerge only in the twentieth century. “About 80 Years ago, newspapers invented the doctrine of objectivity to assure the public that its news was factual and fair”, wrote Stephen J.A.Ward., The
invention of journalism Ethics, Ward concluded that" Five centuries after the first periodic papers, journalism still struggles to avoid debasement, let alone live up to its democratic duty." The stakes are high, in the early twenty-first century, people expectations of the press may be low, but they have risen over the course of hundred years. Certainly journalists do not mind talking about their invaluable role in society.

The invention of the movable type printing press, attributed to Johannes Gutenberg in 1456, led to the wide dissemination of printed books. The first newspapers appeared in Europe in the 17th century. The first printed periodical was Mercurius Gallobelgicus; written in Latin, it appeared in 1594 in Cologne, now Germany, and was distributed widely, even finding its way to readers in England.

The first regularly published newspaper in English was the Oxford Gazette (later the London Gazette, and published continually ever since), which first appeared in 1665. The first daily newspaper, the Daily Courant, appeared in 1702.

The first real colonial newspaper was Pennsylvania Gazette in America. As the 19th century progressed in America, newspapers began functioning more as private businesses with real editors.

As American cities like New York, Philadelphia, Boston and Washington grew with the rise of the Industrial Revolution, so did newspapers. Larger printing presses, the telegraph, and other technological innovations allowed newspapers to print thousands of copies, boost circulation, and increase revenue.
The first newspaper to fit the modern definition of a newspaper was the New York Herald, founded in 1835. It was the first newspaper to have city staff covering regular beats and spot news, along with regular business and Wall Street coverage. In 1838 Bennett also organized the first foreign correspondent staff of six men in Europe and assigned domestic correspondents to key cities, including the first reporter to regularly cover Congress.

The Tribune was the first newspaper, in 1886, to use the linotype machine, invented by Ottmar Mergenthaler, which “rapidly increased the speed and accuracy with which type could be set.” The New York Times, now one of the most well-known newspapers in the world, was founded in 1851. It established the principle of balanced reporting in high-quality writing.

**New Forms of Journalism**

The New York dailies continued to redefine journalism and introduced investigative journalists. The New York Sun developed the idea of the human interest story and a better definition of news value, including uniqueness of a story.

William Randolph Hearst and Joseph Pulitzer both owned newspaper chains in the American West, and both established papers in New York City: Hearst’s New York Journal in 1883 and Pulitzer’s New York World in 1896. Their stated missions to defend the public interest, their circulation wars and their embrace of sensational
reporting, which spread to many other newspapers, led to the coinage of the phrase “yellow journalism.”

The rampant and flagrant segregation of and discrimination against African-Americans did not prevent them from founding their own daily and weekly newspapers, especially in urban areas. The first black newspaper was called Freedom’s Journal, and it was first published on March 16, 1827. As immigration rose dramatically during the last half of the 19th century, many immigrants published newspapers in their native languages to cater to their fellow expatriates.

**Indian Press and Media**

India is the world’s largest democracy. Its mass media culture, a system that has evolved over centuries, is comprised of a complex framework. Modernization has transformed this into a communications network that sustains the pulse of a democracy of about 1.1 billion people. India’s newspaper evolution is nearly unmatched in world press history. India’s newspaper industry and its modernization go hand in hand. India’s press is a metaphor for its advancement in the globalized world.

The printing press preceded the advent of printed news in India by about 100 years. It was in 1674 that the first printing apparatus was established in Bombay followed by Madras in 1772. India’s first newspaper, *Calcutta General Advertise*, also known as the *Hicky’s Bengal Gazette* was established in January 1780, and the first Hindi
daily, *Samachar Sudha Varshan*, began in 1854. The evolution of the Indian media since has been fraught with developmental difficulties; illiteracy, colonial constraints and repression, poverty, and apathy thwart interest in news and media. It is instructive to examine India's press in two broad analytical sections: pre-colonial times and the colonial, independent press. The post-Emergency phase, which continues at the present, may be the third independent phase of India's newspaper revolution (Jeffrey).

After the liberalization of the economy, the growth of industry, and a rise in literacy, and the boom rekindled by private enterprise began to sustain and pay off, mass communications picked up as a growth industry in the world's largest middle class in news, politics, and consumerism. In 1976, the Registrar of Newspapers for India had recorded 875 papers; in 1995 there were 4,453.

Robin Jeffrey Comments

"Newspapers did not expand simply because the technology was available to make Indian scripts live as they had not been able to live before. Nor did newspaper grow simply because more people knew how to read and write. They grew because entrepreneurs detected a growing hunger for information among ever-widening sections of India's people, who were potential consumers as well as newspaper readers. A race began to reach this audience advertising avenues were the prizes and these would come largely to newspapers that could convince advertisers that they had more readers than their rivals."
Readers, meanwhile, were saying implicitly: *We will read newspapers that tell us about ourselves and reflect our concerns."

**Historical Traditions**

"Newspaper history in India is inextricably tangled with political history," wrote A. E. Charlton (Wolseley 3). James Augustus Hicky was the founder of India’s first newspaper, the Calcutta General Advertiser also known as *Hicky’s Bengal Gazette*, in 1780. Soon other newspapers came into existence in Calcutta and Madras: the *Calcutta Gazette*, the *Bengal Journal*, the *Oriental Magazine*, the *Madras Courier* and the *Indian Gazette*. *The Bombay Herald*, *The Statesman* in Calcutta and the *Madras Mail* and *The Hindu*, along with many other rivals represented the metropolitan voice of India and its people. While *Statesman* voiced the English rulers’ voice, *The Hindu* became the beacon of patriotism in the South.

Patriotic movements grew in proportion with the colonial ruthlessness, and a vehicle of information dissemination became a tool for freedom struggle. In the struggle for freedom, journalists in the twentieth century performed a dual role as professionals and nationalists. It was only during and after the seventies, that regional language newspapers became prevalent.

There were nationalist echoes from other linguistic regional provinces. Bengal, Gujarat, Tamil, Karalla, Punjab and Uttar Pradesh produced dailies in regional languages. Hindi and Urdu were largely
instrumental in voicing the viewpoints and aspirations of both Hindus and Muslims of the Northern provinces.

The trends in circulatory growth and decline varied in regional language papers during 1998-2000: In the three-year period from 1998-2000, circulation of dailies in the country increased marginally from 58.37 to 59.13 million copies. In this time, two distinct groups of newspapers emerge — the first including five languages that have collectively grown in Circulation by a healthy 5.65 percent and representing a combined circulation of 43.35 million copies. Amongst these newspapers, those in Malayalam and Bengali grew fastest at 12.9 percent and 12.8 percent respectively, while Hindi dailies grew by 5 percent and English dailies by 4.7 percent over the three-year period. Although Marathi newspapers increased circulation by 2.75 percent over the three years it would seem that they are in danger of falling out of this group and perhaps entering the phase of stagnation and circulation decline (Khanna 2002).

The second group of stagnating and declining circulations includes newspapers in seven languages with a combined circulation of 14.8 million copies in 2000. These dailies lost almost 1.8 million copies (10.62 percent) of their combined circulation in the last three years. Daily newspaper circulation plummeted most dramatically in Telugu, which fell from 2.28 million to 1.68 million copies, a fall of more than 26 percent. Urdu newspaper circulation fell by more than 12 percent and Tamil dailies’ circulation declined by 10.8 percent with circulation of Gujarati dailies falling by 10.5 percent. Over the same
period circulations of Oriya dailies declined by 2.8 percent and that of Punjabi dailies by 3.2 percent. Although over the three years Kannada newspapers show an insignificant fall in circulation they seem to have entered a period of stagnation and decline of their own.

India’s language newspapers enjoy a relatively new entrepreneurial prowess. A mutually convenient relationship between the owners and capitalists keeps a financial balance between local/regional and national spheres in both private and public sectors. The Second Press Commission in 1982 tried to liberate the press from the monopoly houses. In 1995 the Audit Bureau of circulations had 165 newspapers as members, with a combined circulation of about 16 million copies a day. The top ten newspapers control roughly 50 percent of daily circulations in all languages. Bennett Coleman and the Indian Express own roughly 20 percent of daily circulations (Jeffrey 108).

While capitalists sustained national newspapers, the big houses, Dalmias, Jains, Goenka et al., monopolized and corrupted free journalism. The family and caste controlled small newspapers regionally maintain their freedom from big monopolies, thriving on their loyal supporters in north and south India. Diversity of ownership is reflective of cultural variation in India’s multilingual landscape. Twenty-one newspapers control two-thirds of all circulations.

The Press Council of India was established in 1966 to uphold editorial autonomy. The Press Council, resurrected in 1979, has no legal standing to impose penalties. The Indian press, generally
believed as "managed," is a self-restrained institution generally reluctant to take on the governmental policies.

The Registrar of Newspapers

The Registrar of Indian newspapers, among these official and professional agencies, regulates and records the status of newspapers. A number of professional organizations (like Editors Guild of India, Indian Language Newspapers' Association, and All India Newspapers Editors' Conference etc.) enrich the self-renewal process of the news enterprise. Educational and training programs are gaining importance as professionalization of specialized fields is a prioritized activity under the privatization process.

The Office of the Registrar of Newspapers for India, popularly known as RNI came into being on July 1, 1956, on the recommendation of the First Press Commission in 1953 and by amending the Press and Registration of Books Act (PRB Act) 1867. The functions of RNI involve both statutory and non-statutory functions.

The RNI compiles and maintains a register of newspapers containing particulars about all the newspapers published in the country; it issues certificates of registration to the newspapers published under valid declaration.

News Agencies

News agencies provide regularity and authenticity to news. K.C. Roy is credited with establishing the first Indian news agency, which

The Non-aligned News Agencies Pool (NANAP), formally constituted in 1976 for the purpose of correcting imbalances in the global flow of information, is an arrangement for exchange of news and information among the national news agencies of non-aligned countries, including Asia, Africa, Europe and Latin America.

The organization and structure of Indian news agencies has been undergoing a controversial transformation for quite sometime. This represents a mutual mistrust between privately owned news agencies and governmental structures. Their autonomy, believed to be crucial for objectivity and fairness, is based on their role as cooperatives and non-profit groups. There are four dominant news agencies in India: The Press Trust of India (PTI); the United News of India (UNI); the Hindustan Samachar (HS); and Samachar Bhatia (SB).

**Role of news papers**

Good news papers are essential if individuals are to function effectively in an increasingly complex world and if the democratic system is to prevail. Other media can complement, but not replace news papers.
Traditionally the newspapers basic role have been to inform, influence, entertain and foster the development of the nation's economy through advertising: those roles are still important. But changing the audiences and potential audiences, have suggested the addition of fifth basic function to serve people and help make their lives better.

Newspaper's responsibilities vary with the size, frequency of publication and intended audience of individual publications. The responsibilities of the metropolitan daily, the country weekly and the college newspapers are not the same. Each must determine its particular function and perform them as best as it can. Nevertheless, there seen to be some common; responsibilities that apply to all.

**News Papers Must**

1. Lead in the search for truth;
2. In a democratic society, help make democracy to work
3. Help individuals and communities adjust to change and improve themselves and
4. Remain free, independent and solvent

**Key Trends in the Print Segment**

The change is likely to place newspaper publishers at risk of losing the cream of their audience. Print companies are diversifying into complementary businesses to address this risk. Publishers are launching niche publications, upper-end events, coffee-table books,
news TV channels, special editions, and luxury magazines and adopting several other initiatives such as entering international alliances. Leading print brands have also adopted new media such as mobile and internet, but an appropriate monetization approach is lacking.

**Launch of Hyper-local Editions**

With the economy easing, several publishers have launched hyper-local editions dedicated to particular areas, communities or sections of society, which national TV and internet news services do not cover.

Dailies such as *Hindustan Times*, *Navbharat Times* and *Hindustan* have launched local editions in metros such as Gurgaon, Noida, and parts of Mumbai such as Borivali, Kandivali and Malad. With an upswing in advertisement revenues, hyper-local editions are becoming increasingly attractive media vehicles to target a specific segment, particularly for local advertisers.

**Cost rationalization**

Newspaper publishers have started to outsource non-core functions, rationalize costs in areas such as editorial (previously largely untouched), circulation (subject to union requirements) and marketing, automate functions to drive long-term efficiency and optimize inventory- and cash-management cycles. Cost competitiveness will continue to play an important role, as witnessed
in a recessionary environment and the associated reduction in ad revenues and, more recently, in an inflationary economy with rising input costs.

**Geographic expansion**

Relatively large newspaper publishers are exploring uncharted territory, thereby fueling competition in the sector. In 2010, *Dainik Bhaskar* entered Jammu and Kashmir and Jharkhand; *Times of India* and *Deccan Chronicle* were launched in Coimbatore; while *Dainik Jagran* acquired *Mid-Day* to enter Mumbai. The market entry of new players has led to reduced cover prices.

For example, *Jagran Prakashan* and *Hindustan* halved their cover prices to INR2 in the Jharkhand region post the entry of *Dainik Bhaskar* in Ranchi with a price of INR2. New markets are complex, costly to enter and increasingly competitive with strong local players, making it critical for companies to identify and evaluate risk-reward trade-offs before foraying into new markets. Similarly, incumbent players will need to offer innovative content to continue to attract readers and advertisers.

**Growth in Hindi and Regional Newspapers**

The Indian print market has witnessed a continued shift in focus toward regional and Hindi segments due to:

- Rising literacy rates in non-metros
- Increasing disposable income in these areas as well as consequent advertiser demand for targeting this segment
- Maturing markets in metros and tier-I cities with intense competition.

Some English-language newspapers such as The Pioneer have launched Hindi-language editions to tap the growing potential of this market.

An indicator of how newspapers did in 2009 is the readership. Round 2 (R2) of Indian Readership Survey (IRS), which captures readership trends for the period, January-June 2009, showed an increase in total readership (TR) of all newspapers combined, over the same period last year. The total readership of all English, Hindi and regional dailies combined in R2 2008 was 34.1 crore. It increased by 4.3 percent, to 35.6 crore, in R2 2009. Overall, the readership of English newspapers, and more so, the magazines, was hit harder. The TR of all languages' weeklies and monthlies combined dropped by 6.2 percent, between R2 2009 and R2 2008. In R2 2009, the TR was 10.29 crore, as opposed to a TR of 10.98 crore in R2 2008. The list of top 10 newspapers remains more or less stagnant, with five registering an increase in readership; and five showing a decline.
The growth of the Indian economy had its impact considerably on the newspaper industry. Circulation increased, resulting in increased revenues. And this is expected to grow at 8.5% CAGR over the period 2004-13, as illustrated in figure 2.3.
In India, the dailies in regional languages command more than half of the Average Issue Readership in 2009 as per IRS Q1 2010. There are 90 million readers of dailies in the regional languages as compared to 54 million for dailies in Hindi and 8 million for dailies in English. (see fig 2.4) If we turn to growth in net paid sales, dailies in regional languages have increased by almost 4 million copies in Jan-June 2009 over Jan-June 2006 as per the Audit Bureau of Circulation. The corresponding figures for Hindi dailies is 2 million and for English dailies remaining at one million (see fig 2.5).
Section – II

Medical Journalism

Introduction

In general journalism can be defined both as journalistic processes, working with information sources, ideation, production, reception and the end results themselves: texts and pictures. Moreover, journalism is an institution with an ongoing power struggle. In the context of health journalism it means that not only health information is transmitted via journalism but health and illness themselves are constructed in journalism.

There are numerous reasons to why health and medicine are such popular items. On the one hand health and medicine are items that interest the audience. Health and well-being are issues that concern everyone. Medicine is a matter of death and life so medical actions are good items for dramatic - factual or fictional - stories, too. On the other hand today's health care system and health professionals are more interested in co-operation with the media.

What is Medical Journalism

Journalism basically deals with the art of writing for the purpose of informing the readers about a certain topic. So, the specific part of journalism that deals with the medical field and medical practitioners is known as Medical Journalism.

Medical Journalism as a separate subject of study and practice is relatively new. In the past, only doctors and registered medical
practitioners used to write in various medical or general magazines and journals, sharing their experience in doing a new operation or sharing a new way of detecting a new disease or writing a medical book review, etc.

Journalism on health, illness, health care and medicine is called both health and medical journalism - in fact the term medical journalism has been more common. For example, journalists specializing in health call themselves medical journalists. We use the term health journalism because it indicates more clearly that health related journalism is not only a matter of medicine. Science journalism as its name indicates, dwells on everything that is related to science.

As science is a very broad category of knowledge, it is inclusive of health and medical journalism. Coming to health journalism it deals with the larger gamut of health related issues, such as sanitation, pollution, nutrition, and environmental issues etc. That the society needs to take care of it if it wants its members to be free from the avoidable maladies. Medical journalism, on the other hands, confines itself to focusing attention to the outbreak of disease and their possible prevention and cure. There is an element of immediacy in medical journalism which health journalism lacks as it deals directly with disease and their cure. It follows, therefore that a biomedical writer who writes on medical topics for a newspaper or a magazine may be called a medical journalist. Their stories could either be aimed at the general public or at the health care professionals themselves.
The growth of health consciousness in the people of developing world and disease-consciousness in the people of the developing world has spurred this Janus-faced process of fragmentation towards the evolution of medical journalism. (Scott Eggner 1998)

Medical journalism is a relatively new trend, compared to other types of journalism that have existed for decades and centuries. The purpose of medical journalism differs depending on what the medical journalist is reporting on and writing about.

Articles are constantly being written on new discoveries and inventions in the field of medicine and health. As the reader be a non-medical person, special care is taken about the language in which the articles appearing in the medical section are written. The language should be such that even a layman can understand what is being told to him about the medical field.

Medical journalism is a highly specialized genre of journalism which makes exacting the subjects specific demands from the medical journalists. The medical journalists must be precise and accurate in his/her coverage of medical news events in the writing of stories on medical topics, as these are most often acted upon by the general public, despite the general disclaimer advertised boldly in all medical publications.

As far as the site from which they write, they could be working in the news-rooms, corporations, hospitals, non-profit organizations, entertainment industries, schools, government agencies, health maintenance organizations and pharmaceutical firms.
Forms of Medical Journalism

Medical journalism is characterized by two extreme forms: on the one end are the high brow medical journalists which cater to the specialized sections of medics and on the other end are articles and reports carried by the mass circulated magazines, newspapers, pamphlets, mailings, billboards, radio, television and the internet (Scott Eggener, 1998).

Due to the specialized character of the subject matter dealt with in medical journalism, the emergence of mass based medical journals/magazines depends a lot on the extent to which medics venture out of their medical cloisters to share medical information with the general reading public. Wherever it has happened, the result has been resounding as in the case of Dr. Rajeev Gupta’s Mediatrics. (Mediatrics is a medical journal published from Ludhiana, Punjab on a monthly basis. It claims a wider readership among both general public and the medics)

As technology does not merely act as a vehicle but also structures and modifies the media content according to its particular requirements, it would be rewarding to take a close look at the technology-specific forms of medical journalism namely: print, electronic and online medical journalism.

Print: print media is basically a text-based media with graphics and visuals coming in as reinforcements. Medical news stories and feature articles- both rely on the power of the word to capture the attention of the reader. But if the word is supplemented with pictures
and illustrations, the effect is greater. News papers in India have a limited number of columns or pages on health/medical issues.

**Electronic**

The electronic media, as opposed to the print media, is a visual media and it thrives for its success on the 'spectacle'. The briefer the text, oral or written, the better it is for greater effect. So, the premium here is on precision. But as it is time to bound and commercialized, it may effect the quality of content. This is a serious disadvantage. Perhaps, that is why medical journalism in the electronic media relies on government support. However, as viewer interest in medical journalism continues to grow, TV channels are finding it lucrative enough to spare time slots for medical journalism. For instance, channels such as "Discovery" are thorough and professionally slick in presenting medical stories in their telecast.

In India, many newspapers provide an extensive coverage of separate topics related to health and medicine on the web, for instance, www.indiatimes.com of the times of India has columns like, Health and fitness, Alternative medicine, children's health, disease, exercise and fitness, medical equipment, women's health, hospitals, doctors, yoga, international sites, child birth, weight watches, health answers, world health organization. Similar are the sites of tribuneindia.com and Hindustan times.
Health Journalism – a Meeting Point for Different Perspectives

Health journalism is a part of health communication. Because health communication is a meeting point of different theoretical as well practical paradigms there are diverse even contradictory perspectives on it. The World Health Organization (WHO) defines health communication as a key strategy to inform the public about health concerns and to maintain important health issues on the public agenda. Health communication is thus directed towards improving the health status of individuals and populations. According to that definition health communication does not include all health-related media texts but only those engaged in positive effects on health. WHO defines communication as an instrument to convey information from a sender to a receiver. The mainstream of health communication research is grounded on that kind of communication theory. Thus health communication research is concentrated on finding out what kinds of health stories are published, if health facts are accurate and how health stories affect the audience. Moreover the WHO definition indicates that health is a self-evident truth, not a socially and culturally constructed phenomenon as it is defined in culturally oriented health communication. Cultural orientation is quite a new approach in health communication. It opposes the instrumental definition of health communication and raises questions about how health and illness are constructed in health journalism and how different actors such as doctors, nurses, and patients are represented in those journalistic texts. However, different views on
communication need not be mutually exclusive; they may well be complementary. Health communication could be understood as a cultural process where at the same time 1) health information is being mediated and 2) health and illness is being constructed.

**Importance**

There are plenty of reasons why so many individuals and groups are trying to achieve media publicity. Health service personnel may seek to respond to criticism, ensure favourable interpretations, influence the demand for services, promote or discourage treatments, and health promotion experts want influence people’s behaviour. Patient groups may want to achieve higher profiles and improved services for their members, professional groups seek support for their sectional interests, researchers want to raise their profiles, charity groups seek to raise public awareness and donations for their cause. Media publicity is important to everyone competing for funding or a market share. Furthermore, the reversal of the public health care sector and the emergence of the enlightened patient-consumer emphasise the demand for more open communication and better health information. Thus health care has more communicational functions to perform than before and sometimes it seems that health service personnel expect journalism to compensate for a lack of communication in the health care sector.
**Research on Health Journalism**

Mainstream studies on health journalism seek to ascertain if the media portray health issues accurately. There are many case studies of individual health journalistic stories for example AIDS, cancer, BSE, drugs and suicide, but very few attempts to summarize media health across different health stories. Many commentators rely on those individual studies criticizing the health journalism for being sensationalistic and misleading. In practice those comments are often associated with a view that inaccurate health messages will have direct and harmful effects on the audience. But by analyzing health journalistic texts can also provide insights into the political and social dynamics of health care and the media. There are national, cultural and historical differences as well as variable ways of financing, organising and regulating both health care and health journalism. Researching health journalistic discourses it is possible to render visible a cultural understanding of (ill)health. Culturally orientated studies on health journalism have shown that biomedical discourse dominates health journalism. Most health journalistic stories are organised around diseases and celebrate "medicine's curative power", clinical investigations, high technology and hospital-based interventions.

Although research on health journalism deals more often with journalistic texts there are a few studies on medical journalists, their values and working routines. The medical journalists do not pay attention to power relations as much as journalists generally and they
much more careful about accuracy of information. Thus health journalism is sometimes criticised for being over-dependent on medical experts and health professionals and for its inability to take a critical stand.

**Methods in Medical Journalism**

During the initial period of medical journalism, the persons who were writing on these topics were mostly medical practitioners or professionals related to medical fields. The main source of their writing was the knowledge gained from reading various books and also their personal experience.

But as days have progressed, we see that the medical journalism field has been developing more and more, as more and more journals and magazines are being published.

**Growth of Medical Journalism**

Medical Journalism one of the earliest newspapers on record, the Gazette de France, was issued by a physician, Renaudat (Paris 1631). Its purpose was the prevention of disease and suffering by lessening poverty. With the origin of scientific societies in Italy at the time of the Renaissance, these published journals which sometimes contained articles of medical interest.

The first journal paying considerable attention to medicine was Le Journal des Scavans. This was published every Monday for three months at Paris, at the beginning of 1665. A more purely medical
periodical was the Acta Medica Hafieusia, edited by Thomas Bartholin at Copenhagen in 1671. The Royal Society chartered by Charles II began to publish its well-known philosophical 'Transactions' in 1665. Included among its publications were the works of Malpighi and Leeuwenhoek in the 17th century and those of Galvani in the 18th.

The first medical periodical in the vernacular was the Nouvelles Dicouvertes sur toutes les Parties de la Mæ cine, issued monthly (Paris 1679-81, a Journal de Médecine was published by the Abbe de In Roque and continued by Claude Brunet, who established a monthly, Progris de la Midecine (1695-1709). The second half of the 18th century saw a thorough waking up to the advantage of medical journalism. At Ham burg in 1759 the weekly, Der Arts, began. In 1767, the German medical journal, Neue Arzneien (New Remedies) was founded. Eighteenth century medical journalism or its equivalent, at the time, consisted to a great extent of the transactions of various medical societies. A number of very important con tributions to medicine were published originally in these and they have a distinct bibliographic value. About the middle of the 19th century, year books began to be regularly published. The tendency to extreme specializa tion in medical journalism became marked in the last quarter of the century when special journals for narrow interests were published. Mind (1876), Brain (1879), and La Cellule (1884), are typical examples. Garrison notes that the contribution of the 20th century to medical journalism is the large number of recent periodicals devoted to the psychological and sociological aspects of the sexual instinct.
A very early attempt at the publication of a medical journal in America was made through a translation of the French Journal of the Military Hospitals, under the title of A Journal of the Practice of Medicine, Surgery and Pharmacy in the Military Hospitals of France (Vol. I, No. 1, New York 1790). The founder of medical journalism in its modern sense, was Thomas Wakley, an Englishman, who in 1823 founded The Lancet. The Lancet has always continued the work of its founder in this regard, and has been noted for its crusades against food and drug adulterations, its campaigns for the correction of medical abuses, and its leadership of the medical profession of England generally for the amelioration of medical social conditions.

The British Medical Journal, representing the British Medical Association, was founded in 1857. The British Medical Journal has come to be a most powerful factor for the correction of medical abuses and the exposition of impositions of various kinds upon the profession as well as the public.

The American Medical Association, founded in 1847, did not establish its journal until 1883. The Journal A.M.A. initiated the reform of medical education. The Journal A.M.A. has done extremely valuable work for the medical profession and the public in the exposure of quacks, the regulation of physicians' registration and, above all, the analysis and exposure of so-called patent medicines, many of which selling in very large quantities, at expensive prices and bought particularly by the poor, were shown to contain either such harmful materials as alcohol or cocaine as their chief ingredient, or
else to be made up of absolutely inert materials like salt or sugar and water, slightly colored.

At the beginning of the European War, there were some 1,700 medical journals published in the various languages. Their distribution was as follows: the United States had 630; Germany, that is, the German-speaking countries, 451; the French, 268; the British, 152; the Italian, 75; the Spanish, 29.

**Medical Journalism and India**

_Indian edition_ of British Medical journal by the Kasturba Medical College Trust in March 1985 ushered in a new era in medical journalism in India. In a short span of 17 years it has become the second largest circulated medical journal in India with a circulation as large as 25 thousand and a respectable readership size of 75 thousand. Similarly the publication of the Indian edition of Pediatrics, the official journal of the American Academy of pediatrics (AAP), started in 1989, too has become a success story. Till date, it has become a popular journal among 12 thousand pediatricians in India, as well as the general practitioners. Besides, many national dailies and regional newspapers have a regular supplement/column on health and Medicine. This shows the buoyancy of readers' interest in them. Magazines and e-zines have not been far behind, indicating the general groundswell of interest in medical journalism.
**Evaluation of Medical Journalism**

Ethically speaking medical journalism performs the notable role of filling in the information gap between the professionals, who may be at times inaccessible to the ordinary man in the street and the info-hungry health/disease conscious medical articles/journals for guidance concerning their ailments, which may some times be chronic. So, when they get any such information they immediately act upon it. This makes it obligatory on the part of the medical journalists to be exact in their coverage of medical/health issues. But the media houses for which they work is not there for charitable purpose. It has its own profits to think about. And the barometer of profits rests more on the aesthetics than on grim truth, especially in the case of medical/health issues. Doing up media messages to increase the aesthetic appeal to the readers might entail sacrifice of vital information related to health care. And in many cases, it might entail distortion of information.

According to a study made by Ray Moynihan, a journalist, “there were too many miracle cure stories. huge PR companies shamelessly using the media to promote their products, but not to promote their products in advertising, promote their products in the editorial pages of newspapers, or on ABC News, or on Channel Seven or Channel Nine, so I guess I identified a problem too much journalism looking too much like promotion.”

Echoing his opinion, David Shaw writes in The Los Angeles Times, “it seems as if there are page1 stories, television news reports
and magazine cover stories almost daily on medical breakthroughs”. Shaw finds the process by which medical news is reported as ‘severely flawed’ and to “make matters worse, many medical stories are simply artful rewrites of press releases put out by profit minded medical journals.” Shaw also documents a case of New York Times article that seemed to predict an imminent cure for cancer.

Again, another problem impinging on ethics in medical journalism is the credentials of medical journalists themselves. When the American Medical Writers Association (AMWA), was founded in 1940, its membership consisted almost entirely of those with MD degrees. Over the next 50 years, however physician membership in AMWA, steadily declined. In 1955, 76 percent of members possessed a MD degree, yet in 1991 this figure dropped to 9 percent. Betty Cohen, former president of AMWA, explains, “As AMWA evolved, other non physician writers entered, bringing different enterprise. Physicians may have felt it was no longer their organization.”

Since 1991, this trend has begun to reverse itself and as AMWA membership has increased by 20 percent to 4,000 members, physicians now comprise 12.5 percent of all members. There are few data available to assess the total number of physician writers without ties to professional organizations.

**Who are Medical Journalists?**

In the field of medical journalism, there are many writers who are not medical practitioners. So the whole technique of writing has
seen a considerable change in the past few decades. Now, the writers mostly base their writings on interviews with medical practitioners regarding their topic of writing.

The modern writers also take help from various periodical publications which are published by international organizations such as the World Health Organization (WHO), the International Red Cross Society, etc.

The medical journalism field is a booming business in the modern globe. Furthermore, it is a common belief among the people involved in this field that the best time is yet to come.

**Medical Reporter**

The editors of the NewEngland journal of medicine noted ... “the problem of communicating health is not in the research itself but in the way it is interpreted for the public. To facilitate the flow of pertinent medical research to the public at large, we rely on the skill of medical journalists.” (Scott Eggener, 1998).

The medical reporter occurs in the beginning of the chain. It is the they who hunt for the story, investigate it, pen it down and transmit it to the editor for his/her approval. In order that they might give a good account of themselves. It is necessary that they should be good only at the general journalistic skills of digging out stories and reporting them but also at understanding the essentials of their stories. This implies that they should be well up in medical sciences. While it may not be necessary for them to be medicos, but it would
certainly do them it would of good if they grounded themselves well in the basics of medical sciences. Otherwise, the results of a recent survey shows that they would find it difficult to measure up to demands of their calling. The survey medicos has revealed that in their opinion medical journalists,"do an excellent job of reporting research only around 35 percent of that time". This is so despite the fact that medical journalism is already being taught as a full fledged graduate programme in many US universities where training is imparted in areas as diverse as biostatistics, epidemiology, research methodologies and statistical analysis. It is for this reason that Jon Ziomek, Assistant Dean ang Graduate Editorial Director at Northwestern University's medill school of journalism emphasizes the need for 'connecting classes in medical journalism with the broader, 'big picture', issues of science. Ziomek also wants that trainees must learn more about the business side of the health and medical industries. The Universities delivering courses in medical journalism have found it useful to be linked up with other disciplines such as sociology, economics, history, political science, and social work and community development to examine these topics and give their students a wider view of the issues. A broad understanding of the medical science can enable them to write medical stories that highlight role of the state and the market forces in dollying out cheap and efficient medical care to the underdog in the society.

They should also master library research methods to quickly access multiple sources from respected research journals, the general
trade and press. The uses of databases from online and compact disk material are essential, as is the knowledge of the Internet. They should be able to master the latest media interactive technologies and multimedia skills for combining text, audio, video and graphics as new career opportunities are opening up in the new media of cyberspace. While writing their stories, however, the medical journalists, must take care of the fundamentals such as accuracy, validity, human context and appropriateness of information.

**Editor**

The editor occupies the middle ground between the medical reporter and the media audience. It is for him/her to assess the level, the quality and veracity of the medical reports/stories submitted for publication. Also, it is for him/her to give the publication its singular identity in the market. To this end, (s)he has to utilize all the editorial skills at his/her disposal.

Unfortunately, the stock of medical editing is still very low in most medical journals/magazines. It is for this reason that associations like World Association of Medical Editors (WAME) have come up on the horizon of medical journalism.

In one recent report, WAME observes, “Investigations of the quality of reports of health and medical research in medical journals and text books, and of the process of medical editing having revealed a variety of serious deficiencies and distortions, some of which pose indirect threats to the health of individual and the wider public.”
reason being that most of the medical editors are basically medicos who have rarely ventured into the arena of medical journalism.

In discharging their duties, editors often have to contend with the interests of their masters— the media proprietors. And this is so not only when proprietors is a business house/individual but also when the proprietor happens to be a professional organization.

A case point is that of the dismissal of the editor of the journal of American Medical Association (JAMA), George Lunderberg by surgeon E.Ratcliffe Anderson Jr., MD and CEO of American Medical Association. Lunderberg was fired apparently for publishing the results of a study on sex. The case made out was that he had unduly dragged an academic publication into political and racial controversy.

But deep down, it was other wise. It was not for the publication of the study that had violated the editorial code of conduct but the MD and CEO himself for he did so to appease a section of politicians who had disliked the study. So, it was the MD who had politicized the work of an editor.

**Audiences**

Unlike the audience of other genres of journalism, the audience of medical journalism is divisible into two contrasting groups, while the first audience group has specialized knowledge of the subject matter of medical journalism, the second audience group has possesses at the best a generalist's knowledge of medicine and
diseases. Again, the uses and gratifications that each wish to derive from it are also divergent.

While the first group looks for the information advances in medicine and surgery that could enhance their professional efficiency and effectiveness, the second group seeks information on ways and means of curing ailments, either by oneself or with the help of professionals. So, while the demands of the first group are exacting and technical by scientific standards, those of the second group are simple and general.

Satisfying the needs of these two diametrically opposed audience groups, are the academic medical journals and general medical magazines or supplements/columns in popular media.

Medical journals are written to give medics brief updates on the latest medical information. Medical journalists are needed to compile this information for doctors into stories that are accurate and brief, yet informative. As the end-users of these journals are specialists, the articles in these journals are often peer-reviewed before publication. However, not all medical journals for health care professionals are peer-reviewed which ultimately tell upon their quality. Medical magazines and supplements/columns in popular media, on the other hand, are meant to provide general medical information shorn of all medical jargon in an entertaining manner so that the largest number of readers gets hooked on to them. `Medical Detective' on Discovery Channel is an instance of medical journalism where the purpose is to attest the attention of the viewers like any work of art would.
As the size of the second audience group continues to grow, medical stories in the popular media are bound to flourish. As per a recent survey carried out in Quebec, 44 percent of the respondents were found to be aware of scientific issues, 70 percent were not afraid of scientific and technical developments and only 36 percent of the respondents believe that scientific progress would not improve the quality of life. The results clearly show that audiences have become scientifically minded. In such a media environment, medical journalism of the popular kind is bound to find a greater readership and viewership.

**Media Message**

What mediates between the medical reporter and editor, on the one end, and the audience, on the other end, is the media message put out by the medical journalist. It is the quality of the message that determines the readership of a medical journal or article. This depends on the proper fusion of content and style. Emphasizing the need to marry the two, Christine German, Associate editor, Time advises: ‘Real classical literature to nurture good writing- ideas, images, metaphors- you have to keep constantly nourished in order to marry science and good writing together.’

Infact reporting through the experiences of people affected by the larger health issues, laced with analogy, metaphor and simile in a language people can understand is essential in medical journalism.
Readable English

The copy should be in readable English, with standard English grammar, style and literature. Commenting on the kind of language that medical journalist should use, Cathy Younger Lewis remarks that, "if there is a simple word, use it. And further watch how you read. When we are reading for pleasure we don't want to expend too much energy. Allow your reader to use fewer neurons by writing simply and to the point."

Pictures

Pictures play a major role in the effectiveness of health warnings. Warnings typically contain negative information (side effects), and this negative information is juxtaposed with positive (favourable) information or positive symbols (attractive images) about the product or service. The impact of pictorial warnings is illustrated in experiments in which respondents report dangers of products such as beer, icecream and ciggaretts. Pictorial and non pictorial warnings were attached to advertisements for those products. Selection of warnings by manufacturers and service providers can and should be based on empirical demonstration of the efficacy of those warnings.

Cartoons

People are often reluctant to process health messages about life threatening illness because of fear. Often, the most fearful people are those who are the most, at risk and thus the most in need of behavior
change. Studies are being conducted in the US to examine the use of cartoons as the means of preparing effective messages.

**Scientists and Medical Journalism**

By the time we enter the 21st century, the field of medical journalism has become an established field of study and a new profession. We see that many new journals and magazines related to medicine, and new inventions and discoveries in the field of healthcare and medicine are being published.

Most well known colleges of the world, such as the Harvard Medical School, the medical schools under Oxford and Cambridge Universities and also the various medical colleges of India have been publishing their own journals and magazines, to keep people informed about the various works they are undertaking and also about the new things happening in the medical world.

**The Purpose of Medical Journalism**

The purpose for which a medical journal or magazine is published, may be multi-pronged. Some magazines may be for internal consumption. This is especially true for the magazines published by students of the various medical schools around the world.

The main aim for these magazines is to inform the people inside the college campus about the latest developments going on inside the
college and these magazines also provide a picture of what is going on in the medical field in the world.

Some magazines are published for external consumption and are targeted at medical professionals only. The language of these magazines are definitely technical and they generally contain discussions, new discoveries, solutions to problems, new diagnosis techniques, new medicines and their effects and side effects, etc.

**Principles for Health Reporting**

Four principles from communitarianism are especially important for health reporting. They include mutuality, meaningful interpretation, empowerment, and justice.

*Mutuality* accepts interdependence as a matter of fact. In the concept of mutuality, the individual is defined by his or her community, and “their community must be encouraged as emphatically as their personhood (p. 62). However, for fear that individualism and free expression is devalued by such collective thought, it is helpful to think of the individual as one who can contribute to the community through his or her ability to freely inquire (Lambeth, 1992). The exercising of mutuality might lead a reporter to understand what type of stories should be covered and not to ignore stories that appear to have less appeal but are important health topics for the community. As part of “the community,” the reporter may be able to look not only at what health information he or she individually finds important, but also what health information
may be important to constituent groups in the community for which the reporter writes

**Meaningful Interpretation.**

Meaningful interpretation in a concept that is couched within the idea of mutuality, for “by cultivating and pursuing standards of excellence in the craft of reporting and interpretation, the journalist acquires the truth-telling ability to stimulate and assist the inquiry of fellow citizens” (Lambeth, 1992, pg. 203). A meaningful interpretation provides the information beyond the facts and helps the audience to see how the material is relevant and significant to *them* and might provoke thought and action in that community. Relating facts within a context and to the audience is one way to accomplish meaningful interpretation. Therefore, the implementation of meaningful interpretation would include the reporter providing a context that “makes sense” to people outside the realm of medicine and health care. Providing this meaningful interpretation is not without challenges, for deadline pressures often undercut a reporter’s ability to focus on what the story might mean to the community (Lambeth, 1992)

**Empowerment**

Empowerment is a concept that is meant to give power to the powerless and is “characterized by mutuality rather than sovereignty” (Christians et al., 1993, p. 106). Empowerment is important to health
journalism, because articles with health information can simplify knowledge for the community, taking it out of the hands of sometimes biased health researchers and empowering the common person to make decisions based on balanced information. Health information that empowers citizens to understand the complexities of a complicated system and what they can do both outside and inside that system is undoubtedly a form of empowerment.

Avoiding sensationalism is one way in which a journalist can empower citizens. Therefore, journalists who avoid sensationalizing news stories may work to better empower the members of the community, for “the newsroom adage ‘if it bleeds it leads’ might sell newspapers or attract viewers, but it might also give a false impression of community and its perils to the most vulnerable members” (Patterson and Wilkins, 2005). Again, stories that lack coverage or need follow-up are also an important part of empowerment.

Justice.

Coupled with mutuality and closely related to empowerment is the concept of justice, which “rejects privilege and insists on repairing social, economic, and political inequities” Lambeth (1992) not only says, “at the day-to-day operating level, the principle of justice is reflected in the journalist’s concern for fairness” (p. 27), but also that “the journalist in a free society seeks to know whether and to what
extent it is a free society, whether the preamble's promise to establish justice and promote the general welfare has, in fact, been fulfilled" (p. 28). Not only might the journalist concerned with justice attempt to discover what stories are not being covered for certain ethnic populations, but in order to fight the growing acquisitiveness of the medical industry and healthinsurance companies, he or she might act as a lookout for common consumers as a whole, who may not understand an industry dominated by complex science and may be vulnerable to claims of cures and revolutionary treatments.

Justice is particularly important in regard to biased information or information compromised by a conflict of interest.

The Roles and Responsibilities of the Media in Disseminating Health Information

Some journalists say that their role and responsibility is no different in covering health information than it is in covering politics, business, or any other topic. These journalists say that their primary concern is accurate, clear reporting—they are less concerned about the consequences of their story once it is published]. But that approach may result in shoddy journalism and potential harm to the public]. It isn't sufficient to be accurate and clear when covering health news. Journalists have a responsibility to mirror a society's needs and issues, comprehensively and proportionally]. Often that doesn't happen in health news.
In our current era of entanglement, journalists must investigate and report the possible conflicts of interest among sources of health information and those who promote a new idea or therapy. Such conflicts may not be readily apparent, so journalists must look for them as a routine part of story research and interviews. They must investigate and report the possible links between researchers and private companies, researchers and public institutions, patient advocacy groups and their sponsors, celebrity spokespersons and their sponsors, and nonprofit health and professional organizations and their sponsors. To fail to do so may mean that journalists become unwitting mouthpieces for incomplete, biased, and imbalanced news and information.

Journalists face unique challenges in covering health news. Some specialized skills, knowledge, and judgment are helpful. For example, some information based on poorly designed or poorly powered studies should not be reported unless the flaws are emphasized.

Editors, reporters, and writers need to scrutinize the terminology used in health news. Vague, sensational terms (such as “cure,” “miracle,” and “breakthrough”) may harm news consumers by misleading and misinforming. At the core of journalism's values, such terms should not be used because they are meaningless.

It is not the role of journalists to become advocates for causes. However, journalists have a responsibility to investigate and report on citizens' needs as they struggle to understand and navigate the
health-care system. People need help in understanding the ways in which scientists and policymakers reach conclusions. In that sense, there is an inherent educational role that journalists must assume.

Journalists must weigh the balance between the amount of attention given news about medicine and the attention given news about health and the social determinants of health. There may be too much news about the delivery of medical services and not enough news about the cost of, quality of, and evidence for those services. The current imbalance may contribute to the nation's health-care cost crisis, driving up demand for expensive, unproven ideas. These are responsibilities journalists may not encounter in covering other topics. In health news, they are everyday issues.

Reporting does involve “telling a story,” but it also requires writers to take on additional responsibilities through the story cycle—finding the story, collecting information, and writing it.

Standard news criteria such as timeliness and impact may be used to pick stories. But in health reporting, context is crucial. Research advances to be reported need to be placed in context. Sometimes health research throws up contradictory findings. Is a gene linked to a disease? One study finds a link. Another does not. Such situations demand interpretative and analytical skills on the part of health writers. Otherwise, writers may mislead readers, or leave them confused.
Health reporters need to find out who has funded the research and who might be likely to gain. And reporters must always double-check claims or else they may end up in embarrassing situations.

When a public health situation is involved, health writers and the media can certainly play a role in quickly delivering important messages to the public. But health information in the media cannot substitute for personal medical advice. It is important that the public understands this.

Regulatory mechanisms may be lax in some developing countries. This opens up opportunities for investigative health journalism, an opportunity for reporters to take up the traditional watchdog role of the press to find and report wrongdoing. **Health Journalists Should Discuss Benefits and Harms of New Treatments and Use Independent Expert Sources.**

Health reporting is a major growth area for the media, probably because it is in demand by the public and it is profitable. However, media coverage of medical news is generally of poor quality, particularly stories about new treatments.

Media Doctor is a Web site where the quality of stories in the Australian press is reviewed. They rate articles using ten evaluation criteria.

**Criteria Used to Evaluate News Stories**

- Whether the treatment is genuinely new
- The availability of the treatment in Australia
• Whether alternative treatment options are mentioned
• If there is evidence of disease mongering in the story
• If there is objective evidence to support the treatment
• How the benefits of the treatment are framed (in relative or absolute terms)
• Whether harms of the treatment are mentioned in the story
• Whether costs of the treatment are mentioned in the story
• Whether sources of information and any known conflicts of interest of informants are disclosed in the article
• Whether the journalist relied only on the press release for the story

There are different depths of journalism and that journalists face constraints, including commercial pressures and deadlines that give little time to reflect on stories, which are usually written on the same day as the press release arrives. Some journalists argue that the media are the messengers and not the message, and it is up to others to interpret their reporting. To a reporter who might otherwise exercise more caution, a well-written media release from a large public relations company describing a new pharmaceutical product must be attractive when a deadline is imminent. There is no danger that the company will allege plagiarism if it appears, almost intact, under the journalist’s by-line.

And even when they do have the time, journalists face two major challenges—understanding the clinical science and epidemiology, and
dealing with powerful vested interests. In our view journalists will meet their responsibilities if they cover certain key issues when writing stories about new medical treatments. These include the accurate reporting of the comparative benefits, harms, and costs of the treatment and the extent to which their informants have ties with the manufacturer. It is helpful if journalists use independent expert sources to answer questions about the novelty of the treatment and the availability and efficacy of alternatives,

HealthNewsReview.org used the following ten criteria to evaluate health news stories that include claims of how well things work or how safe they are

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<th>Criteria</th>
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<td>Did the story adequately discuss costs?</td>
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<td>Did the story quantify the potential benefits?*</td>
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<tr>
<td>Did the story quantify the potential harms?*</td>
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<tr>
<td>Did the story evaluate the quality of the evidence?</td>
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<tr>
<td>Did the story compare the new idea with existing alternatives?</td>
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<tr>
<td>Did the story have more than one source and look for potential</td>
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<td>conflicts of interest in sources?</td>
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<td>Did the story appear to rely on a news release?</td>
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<td>Did the story establish the availability of the test or treatment?</td>
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<td>Did the story commit “disease-mongering” – exaggerating the condition</td>
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<tr>
<td>or medicalizing a normal state of health?</td>
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<tr>
<td>Did the story establish the true novelty of the idea?</td>
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Quality Use of Medicines: Responsibilities of the Media

The media are responsible for the following.

- Ethical and responsible reporting on health-care issues
• Reporting on medicines accurately and attempting to have errors corrected if they occur
• Being aware of the variety of available information sources on medicines and the limitations of each source
• Being aware of the impact of media reports on the use of medicines in the community
• Being aware of issues relevant to the broad context of medicine use, including risks of medicine use, non-drug alternatives, and the cost of medicine use to individuals and society
• Encouraging dissemination of messages that enhance the quality of medication use

**Problems of Health Reporting**

Shuchman and Wilkes (1997) underline four features of health reporting that are problematic: sensationalism, biases and conflicts of interests, lack of follow-up, and stories that are not covered.

The four areas named by the researchers will be useful to further examine the characteristics of health news that challenge the journalist's pursuit of ethical coverage.

**Sensationalism**

Shuchman and Wilkes (1997) claim that journalists often "pursue medical news as if they were reporting on a hostage crises". Touting cures or sounding the alarm are two ways in which journalists may overemphasize a medical finding or warning. One
example of touting a cure was the case in which a preliminary study published by the *New England Journal of Medicine* showed positive findings in regard to taking aspirin to prevent heart disease (Moliter, 1993). The study was limited in scope and both the editor and the authors of the study said the public should not start taking aspirin to prevent heart disease. However, the top five national newspapers at the time were not so cautious.

"By omitting information, sensationalizing the results, and making incorrect generalizations, journalists may have been responsible for promoting unhealthy behaviors".

Sounding the alarm can also be dangerous, because it can create panic in a large number of people or at least widespread fear that may involve using up valuable resources, such as the media’s portrayal of the anthrax attacks and the subsequent increase in demand for antibiotics (Mebane, Temin, and Parvanta 2003). However, no one would argue that information about health epidemics is unimportant, but the press must beware of disseminating *misinformation* as much as possible for “mass mediated experiences, events and issues are particularly salient for audiences lacking direct, personal experience with a problem (Altheide &Michalowski, 1999).

In addition, sensational headlines often mislead readers. In one example, “the headline over a story reporting that the GUSTO trial found tissue plasminogen activator (t-PA) given after an acute myocardial infarction [heart attack] to be only slightly better than streptokinase (mortality, 6.3% vs. 7.3%) read, 'Anti-Clotting Therapy
Found to Spare Lives” (Angell & Kassirer, 1994). While the headline was not inaccurate per se, it mislead people to believe that one treatment was vastly more effective than another. Another example of sensationalism is an experiment in 1993 that took place at a George Washington University laboratory. “The researchers had ‘twinned’ a non-viable human embryo to create additional embryos, but journalists wrote about the experiment as if it were a cloning technology for the mass production of human beings”.

**Biases and Conflicts of Interest**

Biases and conflicts of interest are regarded as another challenge for health journalists. “To avoid inaccurate stories, reporters need to examine the credibility and biases of scientific sources”. Abramson (2003), concerned especially with journalists providing a context related to health findings, says, “when financial ties exist between researchers and the medical industry, the results of a study are 3.6 times more likely to be pro-industry”. One case study in his research is that of an article printed in the November 14, 2002 issue of the *New England Journal of Medicine* concerning Creactive protein, which was found to better predict the risk of developing cardiovascular disease than cholesterol level. The lead researcher was financially tied to the findings of the study because he was named as the co-inventor on the relevant patents, and two of the researchers had conducted a study funded by a company that produced relevant drugs. This single study and its sensational findings received wide
press coverage, whereas a more moderate study a month later in the *Journal of the American Medical Association* received little coverage at all. Consequently, had reporters looked more closely at the researchers' ties to the industry, the first study may not have seemed so ground-breaking.

Shuchman and Wilkes (1997) say that many medical journals require researchers to reveal any conflicts of interest, making the information more accessible to reporters than ever before. "Reporting potential conflicts of interest is crucial because this enables the readers to judge the validity of a claim for themselves".

Schuman and Wilkes also warn reporters about public relations departments' press releases and cite the case where a newspaper published a letter from a seemingly autonomous doctor who offered an opinion about calcium channel blockers, only to find later that Bayer Corporation, maker of the drug nifedipine, a calcium channel blocker, had sponsored the letter.

**Lack of follow-up**

The general public tends to be more passionate about findings from single health studies than scientific researchers (Angell & Kassirer, 1994). "To scientists, research becomes reliable, and therefore newsworthy, through replication and endorsement by professional colleagues" (Nelkin, 1996).

For journalists, on the other hand, Established ideas may be "old news", and of far less interest than fresh or dramatic, though
possibly tentative, research. Seeking to entertain as well as to inform, they are attracted to non-routine events, especially those that are not of immediate concern to many readers.

Shuchman and Wilkes (1997) claim, “the public might be more aware of how medical research works if news reporters spend more time following ongoing stories and returning to subjects that were first covered when only preliminary findings were available”. In addition, the importance of repetition of important information cannot be overstated, especially in the case of complicated information.

Brodie et al. (2003), in their analysis of over 42,000 responses to surveys concerning Americans’ knowledge and interest in health news, found that “health policy stories, which are often especially complex and more removed from people’s daily lives, may require more repetition in the media in order for the public to retain the information contained in them”.

Stories Not Covered.

Shuchman and Wilkes (1997) say that important stories are not covered in the news because often the story is not considered newsworthy enough or because journalists devote unequal interest to various medical studies. In addition, the reporter’s lack of scientific understanding may be the reason scientists do not readily present certain issues, or corporate pressures may be levied on researchers because of the competitive nature of research.
Researchers who executed a content analysis concerning how newspapers covered lead risks for children found that "despite the number of children affected, lead does not appear to generate much detailed newspaper attention" (Brittle & Zint, 2003).

Certain ethnic groups are sometimes left out of news, even though some health issues affect members of ethnic populations in ways that are disproportionate to the mainstream population (Marks, Reed, Colby, & Ibrahim 2004).
References


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