

Items for CME Moderators to Note in their Evaluations

Off Label Uses of Pharmaceutical Products

AAPA would like to informally identify the number of CME sessions that include mention or discussion of “off-label” uses of pharmaceutical products (i.e., uses/indications of drugs that have not be explicitly approved by the FDA). As part of your assignment, we would appreciate your noting if such discussion in the sessions for which you moderate.

Use of Race in Presentations

AAPA’s Commission on Continuing Professional Development and Education (CCPDE) strives at all times to uphold the strictest scientific rigor in our conference presentations, and your role as moderator helps us to continue to strive for excellence. Given the updated scientific findings which demonstrate that race is a socio-political construct that does not have a basis in biology, the CCPDE released a recommendation for our speakers regarding the use of race in their presentations. Race has been embedded into medical practice in ways that can result in disparities in medical care and outcomes. Often race is misrepresented as a proxy for genetic or biological differences. However, studies have demonstrated more variation within defined racial groups than between them.

CCPDE and AAPA’s DEI Commission have asked speakers to qualify the use of race in any slide reference that might imply race as a factor to explain a health difference. The purpose for this is to avoid perpetuating disproven understandings of biologic differences by race while calling for more research on the role of racism versus race as a key driver of health inequities. Here is a copy of the information that faculty received: [Use of Race in AAPA Presentations](#).

As a moderator, we are asking you to help us with this task. If you see or hear any mention of race in a presentation, we ask only that you please record this in your evaluation. In our goal to be educational rather than punitive, a member of CCPDE will review the presentation and if necessary, provide the speakers with specific feedback and direct them to educational materials. We welcome any feedback as we continually strive to improve this process.

Examples of what you might see:

“The survey demonstrated that anemia is more prevalent among Asians than African American or Hispanic population.” If the sentence ends here, this is an example of a reference in which race is used as a proxy for genetics or biology.

If, however, the presenter in any way qualifies the above statement by referencing the current scientific literature, such as, “However, since this study was published the newest evidence-based literature makes it clear that race should not be used as a proxy for biology or genetics, and that these distinctions may not be useful”, than this falls within the realm of what we hope to see presenters including in their presentations, again, as our goal is ensuring that all presentations are representative of the most up-to-date science.

As this is an ongoing shift in medicine, we realize these changes will take time. For example, there are still hospital systems and labs which continue to report eGFR using measurements for both African American/Black

patients and other populations despite the latest scientific developments which demonstrate this is not useful, and likely contributing to health disparities.

To educate yourself on the basic concepts, we urge you to review this article prior to moderating:

Amutah C, Greenidge K, Mante A, et al. Misrepresenting Race - The Role of Medical Schools in Propagating Physician Bias. N Engl J Med. 2021;384(9):872-878. doi:10.1056/NEJMms202578.

<https://www.nejm.org/doi/full/10.1056/nejmms2025768>