

# RACE-BASED MEDICINE: VALID SCIENCE OR RACIST IDEOLOGY?

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AAPA CONFERENCE  
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**I HAVE NO RELEVANT RELATIONSHIPS WITH  
INELIGIBLE COMPANIES TO DISCLOSE WITHIN THE  
PAST 24 MONTHS.**

# OBJECTIVES

1. Differentiate between race, ethnicity, and genetic ancestry.
2. Define and describe race-based medicine.
3. Assess the validity of race-based algorithms in medicine.
4. Examine how the use of race-based medicine perpetuates healthcare disparities.

# AGENDA

Race vs Ethnicity vs Genetic Ancestry

History & The Invention of Race

Race-Based Algorithms & Guidelines

Eliminating Race-Based Medicine

# RACE

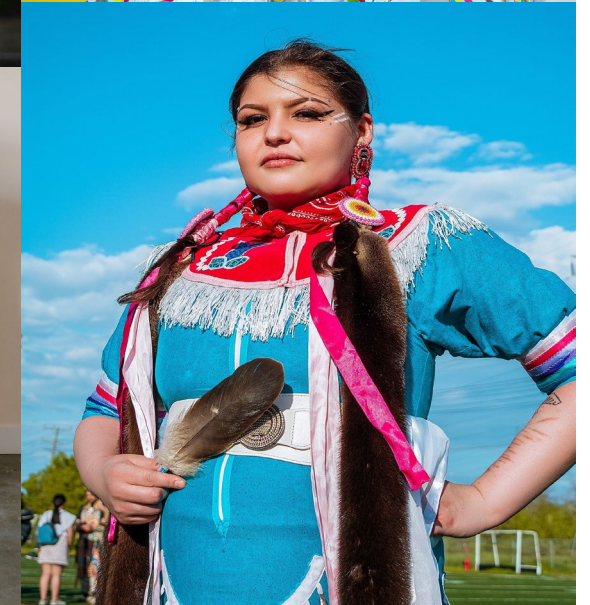
Any one of the groups that humans are often divided into based on physical traits



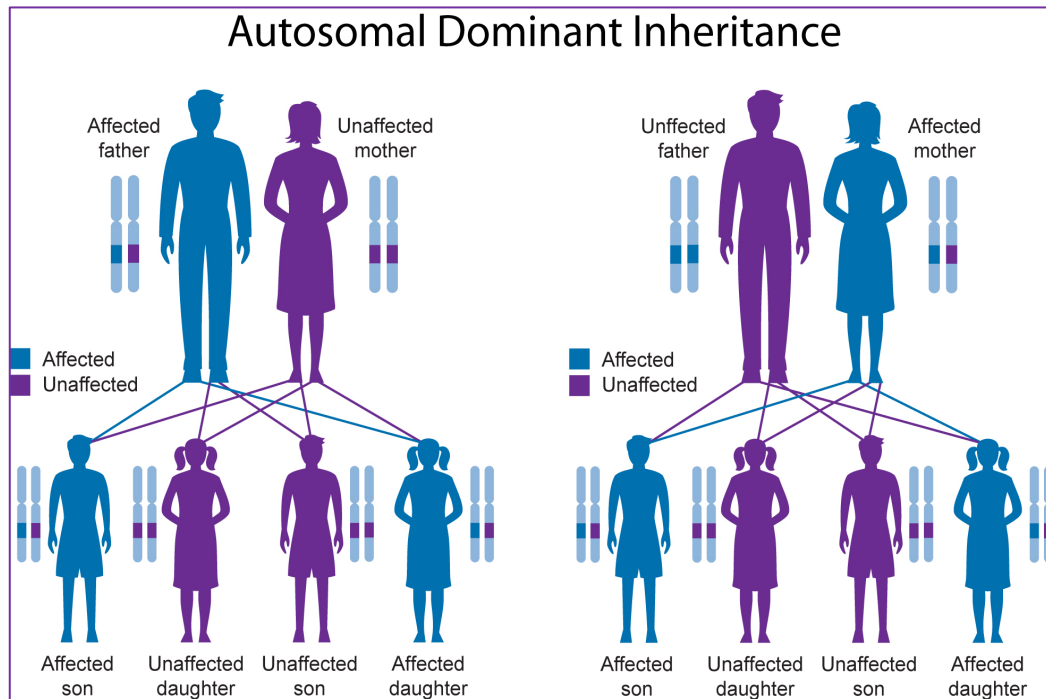


# ETHNICITY

Ethnic – “of or relating to large groups of people classed according to common racial, national, tribal, religious, linguistic, or cultural origin or background”



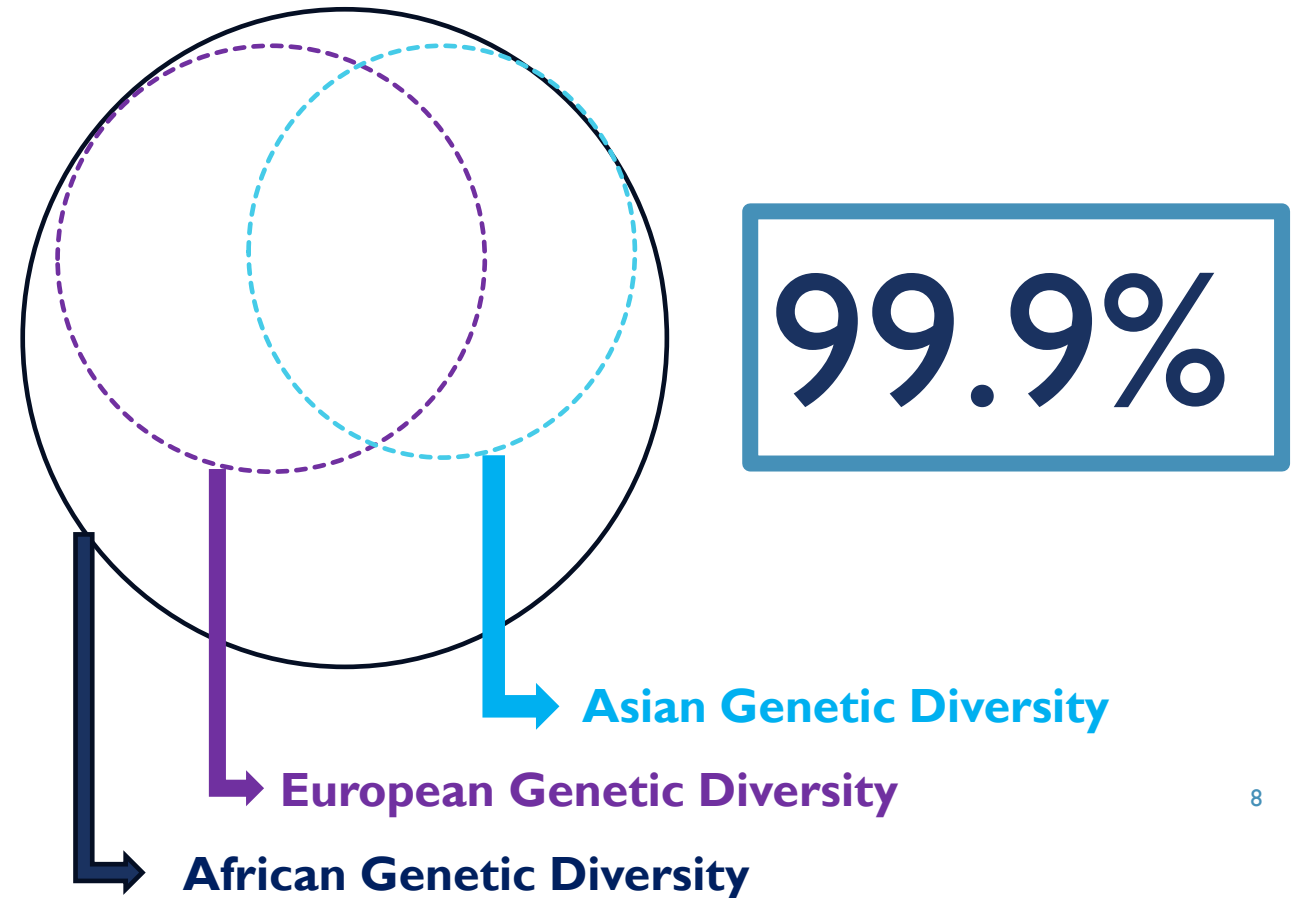
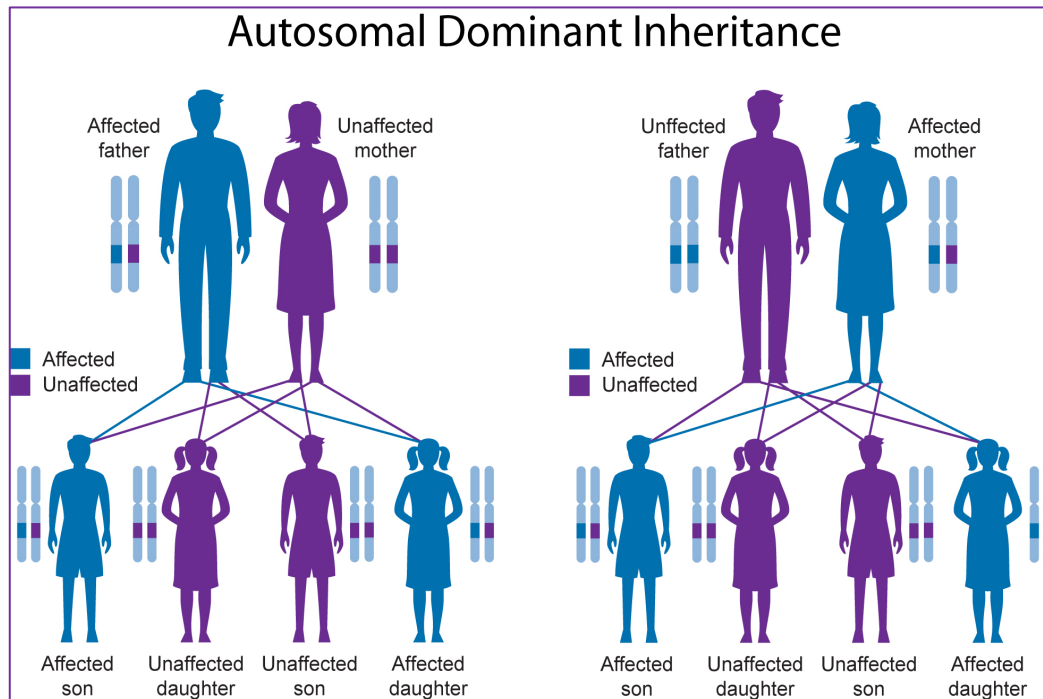
# GENETIC ANCESTRY



Information about the people that an individual is biologically descended from, including their genetic relationships

- National Human Genome Research Institute

# GENETIC ANCESTRY







# WHAT IS RACE-BASED MEDICINE?

# RACE ESSENTIALISM

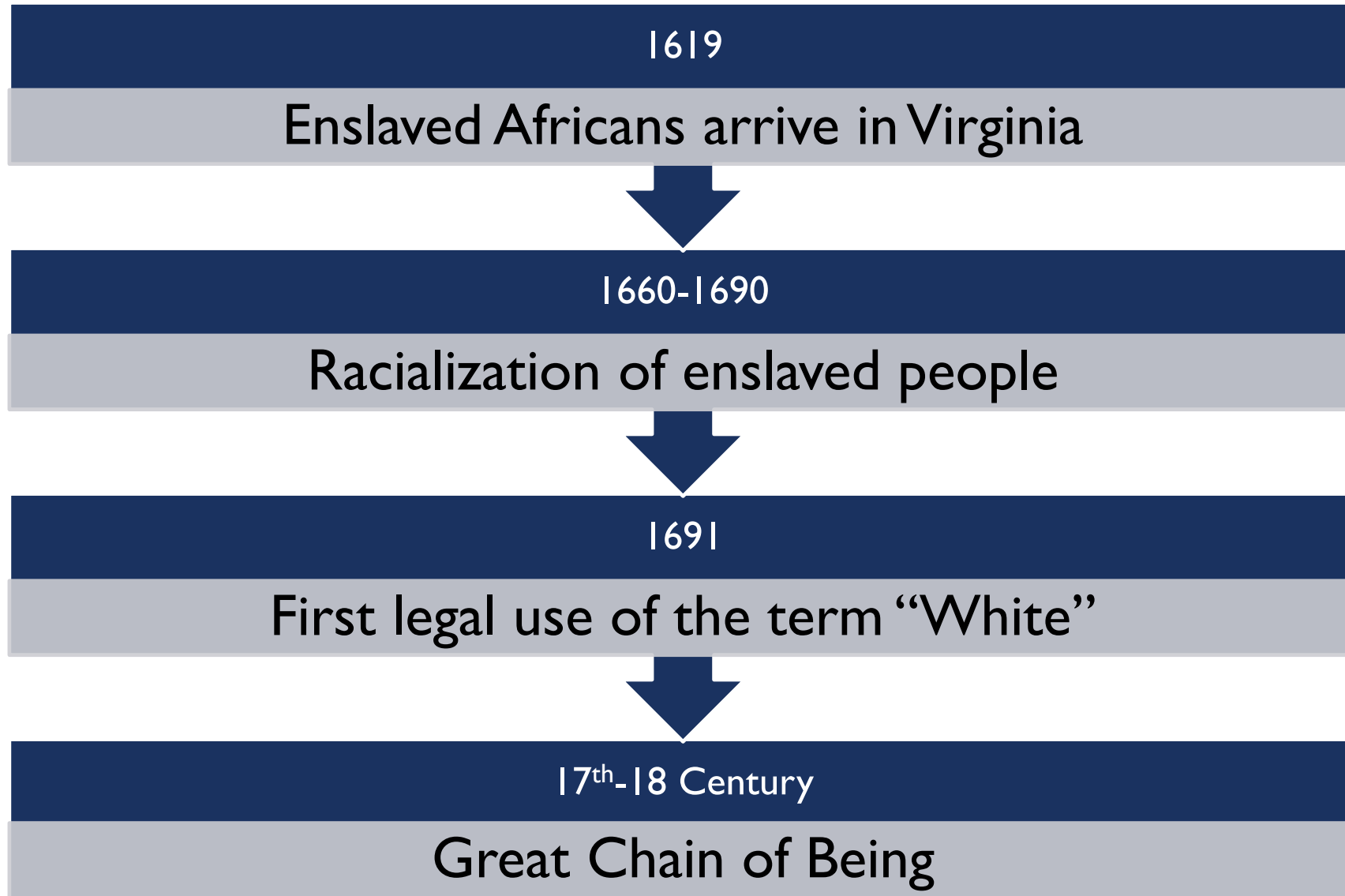
Race is a fixed biological property or “essence”

# RACE-BASED MEDICINE

- The use of race to:
  - Explain health differences
  - Determine treatment regimens



# THE INVENTION OF RACE





# INVENTION OF RACE - 1758

Carl Linnaeus “Father of Taxonomy” created “varieties” of humans

Physical Characteristics + Geography = Behavior

Species	Behavior
Americanus	Unyielding, cheerful, free
Europaeus	Light, wise, inventor
Asiaticus	Stern, haughty, greedy
Africanus	Sly, sluggish, neglectful, lazy

1799

Charles White publishes “scientific” study of the human race



1839

Samuel Morton – “Scientific” measurements of skulls prove inferiority of Black people



1854

“Polygenism” – different races = different species



1896

Fredrick Hoffman (Prudential Life Insurance)

Early 1800s – 1930s

European immigration

Evolving definition of  
“White”



Early 1900s

One drop rule

1952

- "Race is less a biological fact than a social myth and as a myth it has in recent years taken a heavy toll in human lives and suffering." -- UNESCO



**WESTERN DEFENSE COMMAND AND FOURTH ARMY  
WARTIME CIVIL CONTROL ADMINISTRATION**

Presidio of San Francisco, California  
May 10, 1942

**INSTRUCTIONS  
TO ALL PERSONS OF  
JAPANESE  
ANCESTRY**

**Living in the Following Area:**

All that portion of the County of Pierce, State of Washington, east of a line running generally north and south, beginning at the point at which the King-Pierce County line intersects the easterly limits of the City of Tacoma; thence southerly and following the easterly limits of said city to Washington State Highway No. 5; thence southerly along said Highway No. 5 to the intersection of Washington State Highways Nos. 3 and 311; thence southwesterly along State Highway No. 311 to the Pierce-Thurston County line.

Pursuant to the provisions of Civilian Exclusion Order No. 53, this Headquarters, dated May 10, 1942, all persons of Japanese ancestry, both alien and non-alien, will be evacuated from the above area by 12 o'clock noon, P. W. T., Saturday, May 16, 1942.

No Japanese person living in the above area will be permitted to change residence after 12 o'clock noon, P. W. T., Sunday, May 10, 1942, without obtaining special permission from the representative of the Commanding General, Northwestern Sector, at the Civil Control Station located at:

City Hall Auditorium,  
South Meridian Street,  
Puyallup, Washington.

Such permits will only be granted for the purpose of uniting members of a family, or in cases of grave emergency. The Civil Control Station is equipped to assist the Japanese population affected by this evacuation in the following ways:

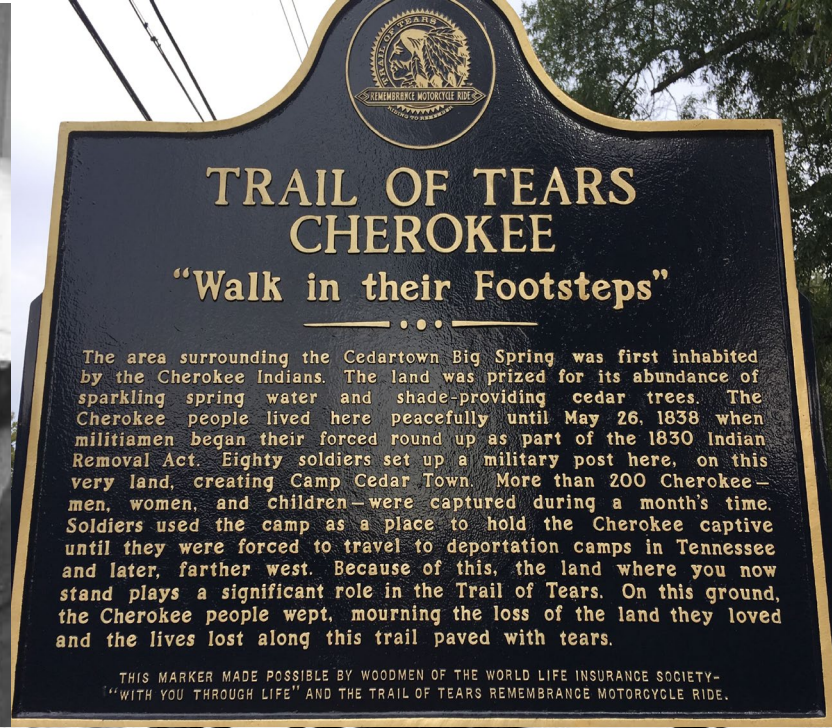
1. Give advice and instructions on the evacuation.
2. Provide services with respect to the management, leasing, sale, storage or other disposition of most kinds of property, such as real estate, business and professional equipment, household goods, boats, automobiles and livestock.
3. Provide temporary residence elsewhere for all Japanese in family groups.
4. Transport persons and a limited amount of clothing and equipment to their new residence.

**The Following Instructions Must Be Observed:**

1. A responsible member of each family, preferably the head of the family, or the person in whose name most of the property is held, and each individual living alone, will report to the Civil Control Station to receive further instructions. This must be done between 8:00 A. M. and 5:00 P. M. on Monday, May 11, 1942, or between 8:00 A. M. and 5:00 P. M. on Tuesday, May 12, 1942.
2. Evacuees must carry with them on departure for the Assembly Center, the following property:
  - (a) Bedding and linens (no mattress) for each member of the family;
  - (b) Toilet articles for each member of the family;
  - (c) Extra clothing for each member of the family;
  - (d) Essential personal effects for each member of the family.

All items carried will be securely packaged, tied and plainly marked with the name of the owner and numbered in accordance with instructions obtained at the Civil Control Station. The size and number of packages is limited to that which can be carried by the individual or family group.

3. No pets of any kind will be permitted.
4. No personal items and no household goods will be shipped to the Assembly Center.
5. The United States Government through its agencies will provide for the storage, at the sole risk of the owner, of the more substantial household items, such as iceboxes, washing machines, pianos and other heavy furniture. Cooking utensils and other small items will be accepted for storage if crated, packed and plainly marked with the name and address of the owner. Only one name and address will be used by a given family.
6. Each family, and individual living alone, will be furnished transportation to the Assembly Center by private automobile in a supervised group. All instructions pertaining to travel will be obtained at the Civil Control Station.







RACISM,  
*NOT RACE,*  
IS A RISK  
FACTOR



# RACE-BASED GUIDELINES, ALGORITHMS, & CALCULATORS

# RACE-BASED GUIDELINES & ALGORITHMS

## Nephrology

- eGFR
- Kidney Donor Profile Index
- Kidney Donor Risk Index





# NKD-ASN Taskforce Recommendations September 23, 2023

- ✓ Recommends immediate implementation of the Chronic Kidney Disease Epidemiology Collaboration without the race variable
- ✓ National efforts to increase the use of cystatin C
- ✓ Encourage research on GFR estimation with new filtration markers and interventions to eliminate racial disparities

# RACE-BASED GUIDELINES & ALGORITHMS

## Cardiology

- Hypertension – JNC 8 Prescribing Guidelines
- ASCVD





# RACE-BASED GUIDELINES & ALGORITHMS

## Pulmonology

Spirometry



# RACE-BASED GUIDELINES & ALGORITHMS

## Urology

### Pediatric UTI Guidelines



# RACE-BASED GUIDELINES & ALGORITHMS

## Obstetrics & Gynecology

- VBAC
- Caldwell-Molloy Classification





# OBSTETRICS & GYNECOLOGY



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# RACE-BASED GUIDELINES & ALGORITHMS

....& MANY  
MORE



# ...& MANY MORE

The American Heart Association's Get with the Guidelines—Heart Failure

The Society of Thoracic Surgeons Short Term Risk Calculator

STONE Score

Rectal Cancer Survivor Calculator

National Cancer Institute Breast Cancer Risk Assessment Tool

Breast Cancer Surveillance Consortium Risk Calculator

Osteoporosis Risk SCORE (Simple Calculated Osteoporosis Risk Estimation)

Fracture Risk Assessment Tool (FRAX)

# POLICY STATEMENTS







## JOINT STATEMENT REGARDING USE OF RACE OR ETHNICITY IN AAPA PRESENTATIONS 2023

The AAPA Commission for Continuing Professional Development and Education and the AAPA Commission on Diversity, Equity and Inclusion recognize the harmful effects of misrepresenting race or ethnicity as biology. Race is a social construct and is distinct from ethnicity, genetic ancestry, or biology. **AAPA supports eliminating patterns or conceptualizations of race or ethnicity as a proxy for biology or genetics in medical education, clinical practice, and policy.**



# American Medical Association 2020

AMA encourages characterizing race as a social construct, rather than an inherent biological trait, and recognizes that when race is described as a risk factor, it is more likely to be a proxy for influences including structural racism than a proxy for genetics.



- American Academy of Pediatrics, 2019
- House Ways & Means Committee
  - Fact vs Fiction: Clinical Decision Support Tools and the (Mis)use of Race, 2021

# SUMMARY

Race/ethnicity  $\neq$   
Genetics

Race is a social  
construct.

Historical roots of  
medical racism

Race-based medicine  
is flawed.

AAPA CONFERENCE 2024

Question all  
guidelines, algorithms,  
calculators that  
include race

Race-conscious  
medicine

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# ANY QUESTIONS?

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**LET'S CONNECT!**

