Black doctors relevant then, now

By Glenn Ellis Special to Sentinel-Voice

One hundred and eleven years ago, two years after performing the world's first successful open heart surgery, Dr. Daniel Hale Williams was at the forefront of an even greater accomplishment.

With the 38-year-old, all-White American Medical Association maintaining its consistent policy of excluding African-American medical doctors from AMA membership, Dr. Williams founded the National Medical Association, the NMA.

It was 1895 when the NMA became the catalyst to facilitate the growing number of African-American doctors to practice and provide the healthcare services that a nation of African-Americans had been denied up to that point.

With the advent of the NMA, America began to see the proliferation of Black hospitals, medical clinics, and doctor's offices, all contributing to address the health needs of a growing African-American population, one the White medical establishment and AMA body had effectively turned its back on.

The NMA just concluded its annual conference in Dallas. Between the first convention 111 years ago and the Dallas convention, the medical field has undergone many changes.

With the exception of Howard and Meharry universities, all the remaining medical schools for African-American doctors have closed, along with the segregated hospitals. The AMA has changed its racist policy, and it now allows African-American doctors in its ranks

The NMA has never ceased to exist. Today, there are only about 30,000 African-American doctors in the U.S., out of the population of more than 38 million Blacks. Clearly, most African-Americans will never have an African-American doctor. To some extent, with a significant percentage of African-American doctors working in academic or corporate settings, many of them will never treat an African-American patient.

The looming question now is, "Is the NMA relevant today?" If there was any doubt, the question was answered with an resounding yes on a scorching hot week in Dallas, Texas, last week. The 2006 NMA Annual Convention and Scientific Assembly convened with thousands of Black doctors from all over the country attending.

The gathering was like a Who's Who of African-American doctors, including former U.S. Surgeon Generals Louis Sullivan and David Satcher. With African-Americans suffering disproportionately in practically every major health category, and with a similar ranking in death rates, major portions of the convention schedule reflected the focus and commitment the organization has in addressing the challenges.

As usual, another trade group for Black healthcare specialists, the Association of Black Cardiologists or ABC, holds it convention concurrently with the NMA. One of the many powerful symposiums was the presentation on health disparities.

Among the panelists presenting was Dr. Pamela Davis, who spoke about the importance of increasing participation of both African-American doctors and patients in clinical trials.

In looking at disparities, Dr. Davis made a point of talking about how important it is for African-American inclusion in trials on new drugs to make sure that new medicines are developed with the knowledge of their effectiveness on as wide a segment of the entire population as possible.

Despite the intense con-

troversy surrounding the ABC's involvement in the clinical trials of the high blood pressure medication BiDil, which is marketed for use primarily for Blacks, the fact that the trial was almost unprecedented in ending with all patients remaining in the trial from beginning to end.

This is not common in clinical trials. This fact points out one of the many benefits to African-American patients of increased participation by African-American doctors.

This leads to another heated issue discussed at the convention: race, genomes, and medicine. Dr. Charmaine Royal of Howard University did an outstanding job of enlightening her colleagues on this crucial issue. As genetics and race become more talked about in medical research and application, answering the question, "What's Race Got to Do With It?" was empowering to the filled-to-capacity room of doctors representing more than 24 medical specialties.

One of the most powerful symposiums was the Mazique Symposium, named in memory of Edward C. Mazique of Washington, D.C., a well-respected pioneer member of NMA. The symposium took a look at lessons learned in the after-

math of Hurricane Katrina in New Orleans. A panel moderated by NNPA editor-inchief George E. Curry, featured Dr. Keith Stephens, Health Commissioner of New Orleans. Dr. Stephens presented a riveting look at the disaster.

He felt that what happened in New Orleans was similar to pulling "back a curtain," exposing what was lurking in the background. In this case, it was the frailties of the vulnerable poor and a primarily African-American population.

The message for America is that "every major city has a curtain. For New Orleans, it was Katrina. For other cities, it could be any number of natural or manmade disasters. We need to start looking at how to ensure the health and well-being of our communities, while we have a chance."

Health disparities are the "Achilles heel" of American medicine, and the NMA has it dead center on its radar screen. Dr. Sandra Gadson, the NMA's president whose term ended at convention, expressed her satisfaction that the NMA has stayed true to its mission to improve the quality of health among minorities and disadvantaged people through, advocacy, research and partnerships

with federal and private agencies.

Perhaps the perfection of private partnership is no more evident than through the visible relationship that NMA has developed with AstraZeneca, which has become a role model in how pharmaceutical companies can be good corporate citizens and provide resources to enhance the capacity of organizations, such as the NMA, to fulfill their missions.

Throughout its history the NMA has focused primarily on health issues related to African-Americans and medically underserved populations; however, its principles, goals, initiatives and philosophy encompass all ethnic groups.

As evidenced by a statement from the NMA Board of Trustees Chair Dr. Carolyn Barley Britton, "The NMA is the conscience of medicine. If we continue to be the voice of African-Americans in health disparities, it will ensure that all people can and will receive the best health care".

The NMA is poised to move through the 21st century as the leading advocate to end health disparities.

Glenn Ellis lectures on health topics and hosts glennellis.com.

AIDS

(Continued from Page 1) and Congresswomen Maxine Waters (D-Calif), Barbara Lee (D-Calif.) and Donna M. Christensen (D-V.I.).

Citing statistics from the Centers for Disease and Control, Wilson said that there are 650,000 Black people in the U.S. living with AIDS—a little more than half of the U.S.'s AIDS cases.

"We are here this afternoon to launch a national
Black mass AIDS mobilization with a goal of reversing
the epidemic in Black
America by 2011, just five
years from now," Wilson
stated. "We realize this is an
ambitious goal — some
might say unrealistic. We
believe anything less would
be immoral."

One by one, after explaining how their organizations would contribute to the war on AIDS, the leaders each signed a large poster board patterned after the original U.S. Declaration of Independence on a brown, weathered paper background with Old English lettering. Bond said although the NAACP has

been in the fight since 1998, they know they must do more.

He said the NAACP would send delegates to every future International AIDS Conference, provide HIV screenings at all seven of its regional conferences and at the national convention and lobby for the reauthorization of the Ryan White CARE Act, federal legislation that provides funding for, among other things, uninsured HIV patients.

The NAACP's newest initiative, Bond said was to heavily promote mandatory HIV testing on prisoner's entering and exiting America's correctional facilities.

"We can't accept that healthy men and women enter our systems for short stays on minor charges or longer stays for serious charges and then are released with a death sentence from which there is no pardon or parole," he said. Sandra Goodridge, director of Health-Quality of Life programs for the National Urban League, said the civil

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rights group would also launch more testing programs and would participate actively in World AIDS Day and the National Day of Service.

Understanding that Black women have started to become infected with HIV/AIDS at rapid rates, Cheryl Cooper, executive director of the National Council of Negro Women, said they would use their resources and join with the Coalition of 100 Black Women and the Black AIDS institute this year to reach out to Black women.

"Unbelievably, 68 percent of women newly infected with HIV are African-American women, our women," Cooper said.

Seele explained that while

stigma and reluctance to discuss HIV and AIDS in Black churches still exist, Balm in Gilead has united thousands of Black churches across the nation not afraid to reach out, test the community and open clinics for infected people in their churches.

"I am happy to say that we have not done all that we can do, but we're going to do more," Seele said. She said the most recent gain is the AME, AME Zion and CME churches signing on with Balm in Gilead to have health coordinators for every Episcopal district in the US.

In the Black Press, National Newspaper Publishers Association News Service Editor George E. Curry pointed out that the NNPA already syndicates a column by Wilson and has been providing extensive coverage of the pandemic, including staffing this convention.

Speaking after one panelist admitted that he was openly gay, Curry said, "I am a straight Black man and the issue is not whether one is straight or gay. The issue is whether we're going to save lives."

Waters, known for her inyour-face style, including being an advocate for needleexchange programs and being vocal about the ineffectiveness of the U.S.'s "abstinence only" policies, said that when it comes to AIDS, she's actually been too mild.

"I'm taking the gloves off. I'm not so nice about this anymore," she said as congressional representatives Lee and Christensen stood beside her. Waters also stressed the importance of HIV testing in the corrections system and said she is fighting on Capitol Hill to make that happen.

In addition, Waters stressed the need to reautho-

rize the Ryan White CARE Act, money for another massive federally funded AIDS program - the Minority AIDS Initiative - is also dwindling, while the need is growing. She said the initiative got as much as \$156 million in 1999 but funding was stagnant during the Bush administration. She and 119 members of Congress are currently pushing to appropriate \$610 million to the initiative, to properly care for Blacks, Hispanics, Asian and Native Americans struggling with the disease.

Waters also pointedly challenged the pharmaceutical industry, urging them to assume a more active role in combating HIV and AIDS. But before any government or corporate support can take place, Waters explained it starts with individual commitments.

"Get your heads out of the sand and understand you are just as vulnerable as anybody else," she said. "First, take responsibility so that we can demand from others that they take responsibility."