# VITALSIGNS



Vital Signs is the member publication of the Massachusetts Medical Society.

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## Lifestyle Medicine: How You Can Engage Patients and Incorporate It into Your Practice

BY SANDRA JACOBS, VITAL SIGNS EDITOR AND JENNIFER DAY, DIRECTOR, CHARITABLE FOUNDATION

When MMS member Michelle Dalal, MD, came across a conference on lifestyle medicine about six years ago, she was drawn to its evidence-based approach to nutrition, physical activity, and other behaviors for maintaining health and preventing disease — all of which she found very relevant to her work as a pediatrician in Milford.



Dalal

"What we are doing in medicine is reactive," says Dr. Dalal. "I was starting to feel burnout, and it was good to be involved with like-minded people and to find a village."

Similar frustration led MMS member Steve Stein, MD, to draw on his interest in the effects of diet on health and incorporate lifestyle medicine education with patients at Family Medicine Associates of South Attleboro. "You get to a point in practice where you feel like you prescribe things and do things, but you are not getting to the core of the [patient's] issue." In addition to his family medicine practice, Dr. Stein is a co-founder of Plant



Docs in Providence, Rhode Island, which educates the public and medical professionals about the benefits of whole-food, plant-based nutrition.

Lifestyle medicine (LM) is an evidence-based approach to preventing, treating, and reversing diseases by replacing unhealthy behaviors with positive ones. It focuses primarily on six pillars: eating healthfully, being physically active, managing stress, avoiding risky substance use (tobacco, alcohol, and illicit drugs), getting adequate sleep, and having healthy relationships or a strong support system. The goal of LM is to use therapeutic lifestyle behavior change as a key approach to address the root cause of chronic disease.



Despite the growing body of research in lifestyle medicine, its integration into conventional medicine is relatively recent. In a 2022 survey of American Academy of Family Physicians members, nearly 80% of respondents felt that LM competencies were important, while only 3% of all respondents were board-certified in LM. Survey participants identified the most common barriers to incorporating lifestyle medicine into practices as difficulty with changing patient behavior (88.6%), inadequate time during office visits (81.2%), and poor patient compliance (79%).

Dr. Dalal is one of 64 Massachusetts physicians listed as certified on the website of the America Board of Lifestyle Medicine, which establishes and maintains the standards for assessing and credentialing physicians practicing lifestyle medicine. Becoming a diplomate requires 30 hours of lifestyle medicine online CME; 10 hours of attendance at live in-person CME; submitting a case study of the positive impacts of lifestyle medicine intervention; and passing a certification exam. Non-physician clinicians who have a bachelor's, master's, or PhD level education in a health field — including nurses, nurse practitioners, psychologists, nutritionists, and others — are eligible to pursue certification. "Board certification is not cumbersome," says Dr. Dalal. "It's a good way to learn to incorporate evidence-based nutrition and lifestyle advice into routine clinical visits."

#### Massachusetts Stands out as a Leader in Lifestyle Medicine

With 79 clinicians certified to practice lifestyle medicine in Massachusetts and 200 ACLM members in the state, the specialty has a greater presence here than in some other areas, says MMS member Beth Frates, MD, current president of the American College of Lifestyle Medicine and director of Lifestyle Medicine and Wellness in the Massachusetts General Hospital Department of Surgery.



In education, Tufts University School of Medicine is considered a leader among US medical schools in incorporating nutrition in its curriculum, Frates notes. And numerous educational resources in lifestyle medicine have been created by physicians in Massachusetts. Drs. Frates, Dalal, and four others co-authored the 2020 The Teen Lifestyle Medicine Handbook: The Power of Healthy Living. Dr. Frates has also authored numerous other guides and handbooks.

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#### PRESIDENT'S MESSAGE

#### Dear Friends:

Please allow me to offer one more time my sincere thanks to all our members who participated in myriad ways in our 2023 Interim Meeting in December.

As you'll read in this issue, our Medical Society passed some important new policies with a critical focus on our continued and necessary work to improve and optimize public health and to ensure equity in access to care and patient outcomes. I am proud of new policies that address support for migrant families, access to maternal care in underserved areas, responsible use of artificial intelligence in medicine, and firearm violence.

This February's annual Black History Month coincides with the MMS release of an extensive "Annotated Multimedia Bibliography of Resources on Black Americans and Health Care in Massachusetts since the Founding of the Massachusetts Medical Society in 1781." Congratulations to the MMS Committee on History members who laboriously produced this bibliography to help share important history and many painful truths, from original accounts of prior centuries to contemporary books and videos.

Also in this issue is an interesting opportunity to learn about <u>lifestyle</u> <u>medicine</u> and how to incorporate its principles in your practices.

I think you'll also enjoy the recap of what was a fantastic <u>Annual</u> <u>Women in Medicine Networking and Awards Dinner</u>.

If you missed some of this winter's news, please visit the MMS website to view our public position statements on recent changes to potentially stigmatizing credentialing questions, integrity and transparency in reproductive health care in the state, addressing the primary care workforce shortage, measles vaccination, and advocacy regarding for-profit entities in health care.

It is my hope that you can find some quiet time to read this issue. As always, I appreciate hearing your ideas and concerns.

#### Sincerely,

Barbara S. Spivak, MD, president@mms.org

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#### **Lifestyle Medicine**

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Despite perceptions of patient and physician hesitance to address lifestyle medicine, Dr. Dalal found parents in her pediatric practice to be quite willing to hear about actions that would benefit their children. "Especially if we have evidence-based measures, ask open-ended questions with curiosity, and can offer practical tips to help make small changes, they are open to it," she says. Since late 2022, as the full-time medical director of Northeastern University's Health and Counseling Services, Dr. Dalal says that since the pandemic, students seem interested in seeking advice from medical and mental health professionals and peer mentors about how eating, sleeping, and exercise habits could improve their health and well-being.

#### The MMS Supports Lifestyle Medicine

In May 2023, the MMS House of Delegates voted to support and actively promote to MMS members educational resources regarding the evidencebased principles and interventions of lifestyle medicine, including its six pillars for the prevention, treatment, and reversal of chronic diseases, and that the Society would actively promote the evidence-based principles and interventions of lifestyle medicine. The resolution was the result of a report from the MMS Committee on Nutrition and Physical Activity.

MMS policy also supports food is medicine interventions. The Society has been a partner in developing a <u>Massachusetts Food is Medicine State Plan</u> and is an inaugural leader of Food is Medicine Massachusetts (FIMMA) Coalition's Provider Nutrition Education and Referral Task Force. While clinicians recognize the critical role that food plays in shaping health outcomes and impacting health care costs, they often lack information on nutrition services available in their communities. Through the FIMMA Coalition, the MMS supported the continuation and expansion of MassHealth's Section 1115 Waiver and the Flexible Services Program, which may provide nutrition services at the household level in specific circumstances and prescriptions for free or discounted nutritious foods.

But when it comes to speaking with patients about lifestyle medicine, many physicians don't have the knowledge base or confidence due to the focus of their own training on pharmacological and surgical interventions but not on nutrition and prevention, Dr. Stein says. "And, it can be challenging when some nutrition recommendations contradict themselves," he notes. "Doctors who don't eat well themselves are less likely to make dietary recommendations."

#### Small Steps Can Overcome Hurdles for Physicians and Patients

To ease the incorporation of lifestyle medicine into office visits for both physicians and hesitant patients, Drs. Dalal, Frates, and Stein offer these suggestions, focused mostly on diet change:

- Start with small steps and move slowly. Explain that adding a single fruit or a vegetable to the daily diet can make a difference. Recommend the <u>Daily Dozen free app</u> or a cookbook.
- Encourage patients to move gradually to more plant-based foods rather than jump to a complete plant-based diet.
- At each office visit, set one SMART (Specific, Measurable, Achievable, Relevant, and Time-Bound) lifestyle goal. Discuss possible barriers.
- For teens to change their behavior, convenience is essential. Make healthy behavior the easy option, such as keeping carrot sticks and apple slices at-the-ready in the refrigerator.
- Write a prescription and hand it to the patient. Prescribe one simple, concrete action at a time, such as "Eat a fresh fruit and a fresh vegetable of your choice once daily."

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#### Lifestyle Medicine

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- Ask adult patients, "Are there any goals you want to work on?" Even if the patient's goal differs from what you had in mind, you will have opened the door to a conversation about behavior change.
- People resist diet changes because they fear higher costs. Explain that healthy eating doesn't have to be expensive and provide examples, such as the cost and number of meals that can be made with a pound of beans.

"I hope others will learn about lifestyle medicine," says Dr. Dalal. "It's the only way we can make a dent in chronic disease. These things can influence lifelong change."

#### Learn More About Lifestyle Medicine

- Visit the Lifestyle Medicine Resources page on the MMS website.
- The American College of Lifestyle Medicine's 5.5-hour online course, <u>"Lifestyle Medicine and Food as Medicine Essentials</u>," is offered at no charge.
- Look into publications by Beth Frates, MD, with co-authors: <u>The</u> <u>Lifestyle Medicine Pocket Guide</u> (for medical students and physicians) and <u>The Lifestyle Medicine Handbook: An Introduction to the Power of</u> <u>Health Habits</u> (2018).
- Physicians and medical students can get involved in lifestyle medicine interest groups that have formed at many medical schools, in Massachusetts or elsewhere. Or you can start one with the help of this <u>ACLM Toolkit</u>.

#### **BLACK HISTORY MONTH**

## New Resource on Black History in Massachusetts Health Care

#### MMS Committee on History Compiles Annotated Multimedia Bibliography

#### BY SANDRA JACOBS, VITAL SIGNS EDITOR

After the murder of George Floyd and the inequities in health care made more apparent by the COVID-19 pandemic, the medical profession turned inward to examine its own racial biases.

"Many organizations, including the Massachusetts Medical Society, were spurred to look at ourselves in the mirror and assess what we could do," says Eric Reines, MD, chair of the MMS Committee on History. Directed by the MMS Antiracism Plan and initiatives on Diversity, Equity, and Inclusion, the Committee on History was charged with examining race and bias in medicine in Massachusetts



and within the MMS since its beginnings. As committee members scoured resources that chronicled inequities confronted by patients and physicians, they wrestled with the most effective way of presenting their findings.

What emerged is the "Annotated Multimedia Bibliography of Resources on Black Americans and Health Care in Massachusetts since the Founding of the Massachusetts Medical Society in 1781." Now <u>available on the MMS</u> <u>website</u>, the bibliography is intended not only for historians and other researchers but also for physicians, students, and anyone interested in Black history or the history of medicine. "The bibliography has a lot of good, readable, and informative resources across a range of formats, including YouTube and other videos, first-person accounts, and archival material," says Reines. "I'm hopeful people will look into it and browse around in it. Everyone will find something of interest." He cites as especially "eye-opening" the book *Medical Apartheid: The Dark History of Medical Experimentation on Black Americans from Colonial Times to the Present* by Harriet A. Washington.

# "If we don't recognize our own biases, we'll forever be ignoring people."

One surprise, Reines says, was that a close reading of the 1923 volume <u>A History of the Massachusetts Medical Society, 1781–1922</u>, by Walter L. Burrage, AM, MD (then secretary of the MMS), revealed only one mention of the Civil War and no mention of slavery or abolition. "This shows that the MMS was keeping silent on these issues, which is disturbing but the truth."

"One thing about racism is that individuals don't realize their own biases," Reines says. "When we know the truth, both the good and the bad, we can be honest. If we don't recognize our own biases, we'll forever be ignoring people."

Among what he learned, Reines says, is that "for a long time, doctors had blinders on and thought social issues and racism were outside of their bailiwick. But now we know they are not."

"Blaming disease on immigrants or "foreigners," for example, often was the result of "misplaced awareness," he says. "It was prejudicial, and it was wrong.... When [any one group of] people are left out of the health care system, it is bad for everyone. We all suffer."

# "An excellent start, but . . . what's been written and documented is not the complete history."

Among the history committee members who researched sources to include in the bibliography is Sharon Marable, MD, MPH, who joined the committee in 2022. "What I've learned from this work is that even in 2023, it is amazing how much people don't understand about the impact of racism on health equity and what people of African descent have contributed to medicine," she says. She describes the bibliography as "a valiant effort" and "an excellent start," but notes that, "as someone who is an African American, I know that what's been written and documented is not the complete history."

Experiences are often passed down orally through family stories about lack of care, the disregard for Black people as patients or as research subjects,

and even as corpses appropriated for teaching, she explains. "People of color have made contributions to medicine — dead or alive. This bibliography represents a history of racism that is *published*....It doesn't encompass all of it."



But the MMS bibliography is a good place to start, Dr. Marable says. "This is not just for historians. It's for everybody and anybody."

#### NEJM launches "Recognizing Historical Injustices in Medicine and the Journal"

In December 2023, the *New England Journal of Medicine* announced a new series of articles, <u>Recognizing Historical Injustices in Medicine and the Journal</u>, which examines biases and injustices that NEJM has helped to perpetuate over its history, in the hope that reckoning with its past will help NEJM prevent harm in the future. Read the <u>introductory</u> <u>editorial</u> and the <u>full collection to date</u>.

## MMS Women Physicians Find Support and Mentorship at Annual Dinner

BY SANDRA JACOBS, VITAL SIGNS EDITOR

When 30 women physicians and MMS leaders gathered on a rainy November evening for the annual MMS Women in Medicine Networking and Awards Dinner, the room radiated warmth and welcome from physicians supporting each other through the challenges and triumphs of their careers.

The program honored recipients of the 2023 awards chosen by the Committee on Women's Health and the Women Physicians Section (WPS), which sponsored the event. <u>Khama D. Ennis, MD, MPH, FACEP</u>, received the Woman Physician Leadership Award in absentia, and <u>Megan R. Miller, MD</u>, received the Women's Health Award.

With many newcomers to the MMS in attendance, event leaders pivoted to an unplanned passing of the microphone for all attendees to introduce themselves and describe "what the MMS means to me."



<sup>66</sup>[The] MMS to me equals education. I've especially enjoyed and benefited from in-person education since I became a member in 1992."

— Diane W. Shannon, MD

<sup>66</sup> There are many opportunities here. The MMS can help you find mentors who can help you with your career. There is also a lot going on that you can get involved with."



— Patricia Rose Falcao, MD, MPH, FACOG



**"**[Once I got involved,] I felt empowerment from the welcome of other women at MMS."

– Catherine C. Lanteri, MD, a founder of the MMS Women Physicians Section



Lauren Estess (left) and Pooja Patel (right), both first-year students at Tufts University School of Medicine, enjoyed attending their first Massachusetts Medical Society event to begin their involvement in the MMS.

Pei-Li Huang, MD, chair of the MMS Women Physicians Section, which cohosted the event with the MMS Women's Health Committee, kicked off the introductions: "Some of us are early-career, some mid-career, and some retired. But we all have something to impart to each other." See below.

As the microphone reached MMS president-elect Hugh Taylor, MD, he looked around the room and summed up what the MMS meant from where he stood: "MMS gives me the opportunity to interact with so many amazing people."

Concluded Dr. Kim-Sun: "I'm hearing there is a need for talking about how we got where we are and for helping the younger generation of physicians with what they're going through so that each of us doesn't have to reinvent the wheel. Discussion needs to be more at the forefront, not just for women but for all [physicians] to be more supportive of each other."

For more information on the MMS Women's Health Committee, the MMS Women's Section, or how to get involved, please email Erin Tally at <u>etally@mms.org</u>.



<sup>44</sup> The MMS does great things in advocacy, education, and public health. If you are frustrated about certain aspects of medicine, this is a place where you can speak about it and do something about it."

— Olivia Liao, MD, FACS, MMS Vice President

<sup>66</sup>I [got involved two years ago because I] wanted to be in a room of people who had achieved and who I could learn from. It's nice to have the community and be with people who can support you in all your endeavors."



— Geunwon Kim-Sun, MD, PhD, chair of the MMS Women's Health Committee



<sup>66</sup>I appreciate serving as a member of the House of Delegates and writing reports and resolutions that allow us to be agents of change locally and nationally. Heading committees hones leadership skills and advance causes that improve patient and physician well-being.

Engaging medical students, residents, and fellows in our endeavors mentors and nurtures the next generations of physicians. I cherish the friendships I have built by working closely with colleagues who share my passions and commitment to enhancing health care. I encourage colleagues at all levels to get involved."

— Helen Cajigas, MD, FCAP, former chair of Women in Medicine, Women's Health, and Senior Volunteer Physicians Committees

## New MMS Policies Address Access to Care, Health Equity, and Public Health Risks and Needs

BY SANDRA JACOBS, *VITAL SIGNS* EDITOR AND TOM FLANAGAN, MMS MEDIA RELATIONS MANAGER

The policymaking session of the Massachusetts Medical Society's House of Delegates at the 2023 Interim Meeting in December produced several new MMS policies that focus on access to care, health equity, and addressing public health risks and needs. Proposals accepted by the House of Delegates became organizational policy that will guide the advocacy efforts of the Medical Society.

# FOLLOWING ARE NEW POLICIES AND RELATED ACTIONS TO BE TAKEN:

**Supporting adequate access to obstetrical care in underserved areas.** The MMS supports legislation and regulation in the following three areas: for increased access to obstetric care in rural areas; for improved and timely access to patients' medical records; and for providing insurance coverage for out-of-network care for patients who must travel due to limited local networks.

Addressing access to pediatric hospital care. The Society will work with relevant stakeholders to develop state recommendations to alleviate barriers to accessing regionalized pediatric care, especially inpatient pediatric care; to assess the effectiveness of alternative pediatric care pay models and of developing digital cross-sector care coordination at the state level; and to develop an inpatient pediatric care crisis action plan that includes financial and logistical support to ensure care delivery during surges of inpatient need, considering the youth mental health crisis and future pediatric national emergencies.

Supporting responsible use of artificial intelligence (AI) in medicine.

A new policy strongly supports the idea that Al developers and relevant stakeholders should work together with clinicians and other health care providers to ensure the responsible use of Al in medicine. It also calls for the MMS to advocate to Al developers, health systems, payers, and provider organizations that Al in medicine is used in a safe, ethical, and equitable manner to improve the lives of patients.

**Increasing support for migrant parents and children.** The MMS will encourage the state to collaborate with community leaders, nonprofit organizations, and others in the health care system to coordinate efforts to address the medical and mental health needs of migrant families, pregnant people, children, and youth and support the efforts of housing advocates to improve access to safe and stable housing for migrants. The Medical Society will also work with state education and health officials, other nongovernment organizations, municipalities, and physicians statewide to facilitate the immediate enrollment of migrant children into school systems.

**Extending hospital visiting hours.** In recognition of the benefits of open visitor policies in hospitals, the MMS will work with interested parties to advocate that hospitals in Massachusetts review their policies and update them to implement less restrictive, more open visitation policies.

**Combatting the public health crisis of gun violence.** The MMS will advocate for and strongly support legislation, regulation, and reform that seeks to address the public health crisis posed by gun violence.

Protecting local communities from the health risks of decommissioning nuclear power plants. The MMS will advocate to Massachusetts legislators and/or regulatory entities to fund scientific studies to adequately evaluate the health effects of decommissioning the Pilgrim Nuclear Power Station on workers, residents, and the environment, which might include the evaluation of radioactive releases, the collection of biometric data, and the placement of appropriate radiation monitors before proceeding.

Supporting the inclusion of information about lung cancer screening on cigarette packaging. The MMS will work with the American Medical Association to advocate for information about lung cancer screening to be included within cigarette packages.

See a complete listing of newly adopted MMS policies (with member login).

## Educational Offerings from the 2023 Interim Meeting Are Still Available, with CME Credit

BY JESSICA VAUTOUR, SENIOR PROGRAM MANAGER, CONTINUING EDUCATION

In case you missed the education activities that were part of the MMS 2023 Interim Meeting, recordings of the two live, virtual sessions are available as online CME courses.

**The 2023 Annual Oration**, "The Science and Art of Making Medical Decisions," was presented by John B. Wong, MD, MACP, who discussed integrating the science (evidence) and art (uncertainty and patient values) for optimal, evidence-based, and efficient patient-centered care choices in the face of uncertainty. He presented specific ways to apply a systematic rational approach to patient-centered decision-making.

Dr. Wong is vice chair of academic affairs, Department of Medicine at Tufts Medical Center, and distinguished professor of medicine at Tufts University School of Medicine. In an engaging conversation following the presentation, Dr. Wong and MMS President Barbara Spivak, MD, discussed many aspects and questions related to the topic.

This session took place on November 29, 2023. An online version of this educational activity is <u>available here</u>.

**The 2023 MMS Interim Meeting Ethics Forum**, "Psychedelics: Ethical and Practical Considerations," is an informative and timely program in which a panel of dynamic speakers considered the use of psychedelic compounds in the context of rapidly evolving practice, law, and policy.

"Psychedelic compounds, such as LSD and psilocybin, have demonstrated early possibilities in the treatment of many psychiatric disorders, including depression, post-traumatic stress disorder, anxiety, disorders, and addiction," noted moderator Rebecca W. Brendel, MD, JD, director of Harvard Medical School's Center for Bioethics and Chair of the MMS Committee on Ethics, Grievances, and Professional Standards, as she introduced the Forum.

Panelists Carmel Shachar, JD, MPH, assistant clinical professor of law, Harvard Law School; Gregory Barber, MD, Washington Baltimore Center for Psychoanalysis; and Mason Marks, MD, JD, law professor, Florida State University College of Law, discussed the regulatory landscape for clinical and non-clinical use, including recent FDA guidance and the unique ethical and safety concerns surrounding the study and use of psychedelics.

The one-hour forum took place on November 6, 2023. An online version of this educational activity is <u>available here</u>.

Each of the above online educational activities is approved for AMA PRA Category 1 Credit™.

## **MMS Member News and Notes**



Peter B. Kang, MD, FAAN, FAAP, MMS past secretarytreasurer (2013–2014) and past president of the Suffolk District Medical Society (2008–2010), now of Minneapolis, Minnesota, took office in October 2023 as the president of the Child Neurology Society for a two-year term. He completed fellowship training in clinical neurophysiology at Beth Israel Deaconess Medical Center in 2002 and then served on the staff of Boston Children's

Hospital and on the faculty of Harvard Medical School for the subsequent 11 years. Now at the University of Minnesota Medical School, Dr. Kang is director of the Greg Marzolf Jr. Muscular Dystrophy Center and Vice Chair of Research for the Department of Neurology at the University of Minnesota Medical School.



**Robbie Goldstein, MD, PhD**, was named in December as an Honorable Mention Bostonian of the Year for 2023 by the *Boston Globe Magazine*. In April 2023, Dr. Goldstein was appointed commissioner of the Massachusetts Department of Public Health. An infectious disease physician, he formerly worked at Massachusetts General Hospital and served as a faculty member at Harvard Medical School. He also previously served as senior policy advisor at the Centers for Disease Control

and Prevention. The magazine honored Dr. Goldstein, along with his mentor Rochelle Walensky, MD, MPH, for their successful work to reverse a decadesold ban on blood donation by gay men and to update the policy to reflect current science.



Jim O'Connell, MD, was named in December as an Honorable Mention Bostonian of the Year for 2023 by the *Boston Globe Magazine*. President and founder of Boston Health Care for the Homeless Program, Dr. O'Connell was one of the nation's first street doctors for people experiencing homelessness and has spent four decades providing medical care to homeless people in Boston. In 2022, Dr. O'Connell delivered the MMS

Annual Oration, titled "Rethinking Homelessness, Health, and Housing — A View from the Streets," which is available as a one-hour <u>video course on the MMS website</u> for CME credit.

Do you have news to share about yourself or a colleague? An achievement or accomplishment? A new role? Please email <u>vitalsigns@mms.org</u>.



The Massachusetts Medical Society's resident-fellow delegation to the American Medical Association Resident and Fellow Section (11 of the 12 MMS delegates appear in the picture above) convened in late 2023 with nearly 100 other residents and fellows in National Harbor, Maryland, where they debated proposed resolutions relating to health care system reform, medical aid in dying, and other topics relevant to all physicians.

## Across the Commonwealth

#### STATEWIDE NEWS AND EVENTS

WORCESTER — Please see the latest issue of *Worcester Medicine*, entitled "A.I. in Medicine." Also note Health Matters, now celebrating over 220 TV programs. Produced in a half-hour interview format, each program offers valuable information on disease prevention and treatment options. Click <u>Health Matters</u> to view our programs. For more information, please email: <u>MWright@wdms.org</u>.

#### ARTS, HISTORY, HUMANISM, & CULTURE MEMBER INTEREST NETWORK

Lecture: Nineteenth Century Medicine: Discovery, Denial, and the Death of President Garfield. Wed., Feb. 28, 7–8:15 PM. The nineteenth century witnessed a transformation in medical practice from poorly educated physicians using traditional but unproven treatments to science-based practice by educated physicians. But when are discoveries accepted, and who decides? The lecture looks back at the death of a president while in the care of physicians whose prestige was based on outdated approaches and the hanging of a man for a death that the doctors may have caused. Register here.

Lecture: Crossing Bhutan: The Kingdom in the Clouds, Land of the Dragons. Tues., Mar. 5, 7–8:15 PM. Photographs will be shared of the country's beautiful wildlife, magnificent scenery, and inspirational religious art and architecture. The talk will recount the exciting adventures of crossing the Thrum Singla Mountain pass in a blinding snowstorm, watching ceremonial dances, hearing the chants and music in historic temples, and hiking to the Tiger's Nest. Register here.

Contact Cathy Salas, West Central Regional Office, at (800) 522-3112 or <u>csalas@mms.org</u>.

## Genetics for the Nongeneticist -A Free CME Webinar Series

Jointly Provided by the Massachusetts Medical Society and New England Regional Genetics Network

## Going on Metabolism Rounds: Patients with Muscle Symptoms

Wednesday, March 6, 2024, 12:00-1:00 PM

Positive Newborn Screen — Now What? Wednesday, April 3, 2024, 12:00–1:00 PM



# **FUTURE HEALTH BEST** Practices for Advancing Care

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KEYNOTE SPEAKER Maia Hightower, MD, MBA, MPH CEO, Equality Al

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- Nurse practitioners
- Physician assistants
- Public health and government leaders
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- Participate in our Lunch and Learn Career Workshop: Alternative Paths in Medicine: Exploring Novel Careers
- View the 15th MMS Research Poster Symposium
- Attend our Product Theater with new technology presentations
- Enjoy a Box Lunch
- Engage in Informal Networking with new colleagues

# Thank You!

The Massachusetts Medical Society would like to thank the following entities for their generous support of the event.

## Signature Sponsors:

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## SCHEDULE AT-A-GLANCE

7:00 a.m3:00 p.m.	Networking and Exhibit Hall
8:15–8:30 a.m	Opening Remarks
8:30–9:30 a.m.	Keynote*
9:45–10:45 a.m.	Session 1*
11:00–12:00 p.m.	Session 2*
12:00–1:05 p.m.	<ul> <li>Lunch included for in-person attendees</li> </ul>
	<ul> <li>Lunch and Learn Career Workshop</li> </ul>
	Research Poster Symposium
1:10–1:50 p.m.	Product Theater
2:00–2:55 p.m.	Session 3
2:55–3:00 p.m.	Closing Remarks

Accreditation Statement: The Massachusetts Medical Society is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

AMA Credit Designation Statement: The Massachusetts Medical Society designates this live activity for a maximum of 3.0 AMA PRA Category 1 Credits<sup>™</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

This activity meets the criteria of the Massachusetts Board of Registration in Medicine for risk management study.

\*Approved for AMA PRA Category 1 Credits™

Registration Categories for In-Person and Virtual Attendees	Early Bird Registration through February 15, 2024		Regular Registration after February 15, 2024	
	MMS MEMBER	NON-MEMBER	MMS MEMBER	NON-MEMBER
Physician	\$249	\$449	\$299	\$499
Business Professional/ Executive	N/A	\$449	N/A	\$499
Allied Health Professional/ Other	N/A	\$209	N/A	\$259
Resident/Medical Student	\$79	\$209	\$129	\$259



## **In Memoriam**

Stephen J. Alphas, MD; 96; Weston, MA; Boston University School of Medicine; died September 19, 2023.

Vincent A. Andaloro Jr., MD; 81; Lexington, MA; State University of New York Upstate Medical School; died May 31, 2023.

Philip J. Arena, MD; 87; Hingham, MA; Boston University School of Medicine; died January 23, 2023.

Alan B. Ashare, MD; 85; Waltham, MA; Albany Medical College of Union University; died July 5, 2023.

Robert Dennis Blute Jr., MD; 75; Worcester, MA; Tufts Medical School; died November 5, 2023.

James J.A. Cavanaugh, MD; 96; West Yarmouth, MA; Georgetown University Medical School; died November 8, 2023.

John P. Cocchiarella, MD; 84; Holliston, MA; Boston University Medical School; died May 13, 2023.

Richard B. Culliton, MD; 87; Salem, MA; Tufts University School of Medicine; died December 12, 2023.

**David P. Curtiss Jr., MD**; 85; Sherborn, MA; State University of New York Downstate Medical School; died October 21, 2023.

Joseph L. Dorsey, MD; 84; Walpole, MA; Harvard Medical School; died November 22, 2022.

James F. Dunphy, MD; 81; Milton, MA; Tufts Medical School; died January 8, 2022.

Shahira H. Falous, MD; Framingham, MA; Kasr-El-Aini-Fac of Med Cairo University, Egypt.

Mark David Kelleher, MD; 86; Norwell, MA; Boston University School of Medicine; died September 7, 2022.

Christopher H. Linden, MD; 71; Shrewsbury, MA; University of Massachusetts Medical School, died August 26, 2023.

Edward G. Lund Jr., MD; 85; South Dartmouth, MA; Yale Medical School; died June 1, 2023.

Amine B. Maalouf, MD; 93; Fall River, MA; University of Alexandria, Egypt; died June 18, 2021.

**George P. Meltsakos, MD**; 66; Andover, MA; Aristotle University of Thessaloniki, Greece; died October 12, 2023.

Loren J. Mednick, MD; 89; Palmer, MA; University of Basel, Switzerland; died October 28, 2021.

Alfred J. Nicholson, MD; 93; Norton, MA; Tufts University School of Medicine; died October 2, 2023.

Anthony S. Patton, MD; 91; Topsham, Maine; Harvard Medical School; died June 25, 2023.

**Neil Scannell, DO**; 50; Worcester, MA; University of New England College of Medicine, Biddeford, Maine; died December 6, 2023.

Charles S. Tippetts Jr., MD; 97; Fernandina Beach, FL; Jefferson Medical College; died September 9, 2022.

Aram Tomasian, MD; 93; Belmont, MA; Tufts University School of Medicine; died October 14, 2022.

Elinor E. Weeks, MD; 86; Norfolk, VA; Case Western Reserve University School of Medicine; died September 1, 2023.

## How to Join an MMS Committee

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