

Medical recommendations should go beyond race, scholar says

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(Medical Xpress)—Medical organizations that make race-based recommendations are misleading some patients about health risks while reinforcing harmful notions about race, argues a Michigan State University professor in a new paper published in the journal *Preventive Medicine*.

While some racial groups are on average more prone to certain diseases than the general population, they contain "islands" of lower risk that medical professionals should acknowledge, said Sean Valles, assistant professor in MSU's Lyman Briggs College and the Department of Philosophy.

For instance, government dietary guidelines recommend lower <u>salt</u> <u>intake</u> for African-Americans, based on their elevated risk of hypertension. However, foreign-born blacks have substantially lower rates of cardiovascular diseases, partly because of <u>lifestyle factors</u>.

Similarly, while Caucasians are far more likely than other <u>racial groups</u> to have <u>cystic fibrosis</u>, only one in 25,000 people of Finnish descent are born with the usually fatal disease, a rate 10 times lower than among Caucasians generally.

By glossing over the varying degrees of health risk within a racial group, <u>medical recommendations</u> imply that all members of each race are biologically the same as one another and different from others – a view that promotes prejudice and discrimination, according to Valles.



"There's something a little bit dishonest about not recognizing low-risk groups when we know they're there," he said. "I'm not trying to say that we should change the course of science to be politically correct. I'm saying we know this stuff. Let's take it seriously."

In the paper, Valles urges health agencies to simply add the phrase "non-Finnish" to recommendations about whether Caucasians should undergo screening for the recessive cystic fibrosis gene. Likewise, he says <u>dietary</u> <u>salt</u> recommendations for African-Americans should include the phrase "U.S.-born."

"Of all the levels of specificity to choose, we've been fixated on the one that has the most negative repercussions," he said. "There are very serious problems that come with giving the misleading impression that races have some sort of very deep and intrinsic biological meaning. You don't get that with the term non-Finnish Caucasians."

Valles said race does have some practical value for identifying at-risk populations, but he hopes his two specific recommendations demonstrate that health organizations could be more effective and socially responsible by being more specific.

"It's not even clear whether the term African-American includes black immigrants," Valles said. "The census form kind of implies yes. Some members of African-American or immigrant communities might say no. It's a mess."

Provided by Michigan State University

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