Helping Journalists
Make and Break News

Health Research Alliance
Members’ Meeting 2016

Jessica Firger
Senior Health Writer
Newsweek
j.firger@newsweek.com
News Travels Fast
CDC Confirms Healthcare Worker Who Provided Care for First Patient Positive for Ebola

Patient isolated and public health investigation ongoing

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Media Statement

For Immediate Release: Sunday, October 12, 2014

Contact: Media Relations, Office of Communication
(404) 639-3286

Today, the Centers for Disease Control and Prevention (CDC) confirmed test results reported late last night by the Texas Department of State Health Services’ public health laboratory showing that a healthcare worker at Texas Presbyterian Hospital is positive for Ebola. The healthcare worker, who provided care for the Dallas index patient, was isolated soon after symptoms started and remains so now.

On Friday, October 10, the healthcare worker reported a low-grade fever overnight and was referred for testing. The healthcare worker had been self-monitoring for fever and symptoms. As a precaution, after identification of fever, the healthcare worker was isolated and CDC staff interviewed the patient to determine additional contacts or potential exposures. At this time, one close contact has been identified and is being monitored.

The hospital and patient were notified of the preliminary and confirmatory test results. Treatment decisions will be made by the patient and hospital.
WHO declares Zika-related microcephaly a "public health emergency of international concern"
RANDOMIZED TRIAL OF PEANUT CONSUMPTION IN INFANTS AT RISK FOR PEANUT ALLERGY

George Du Toit, B.Ch., Graham Roberts, D.M., Peter H. Sayre, M.D., Ph.D., Henry T. Bahnson, M.P.H., Suzana Radulovic, M.D., Alexandra F. Santos, M.D., Helen A. Brough, M.B., B.S., Deborah Phippard, Ph.D., Monica Basting, M.A., Mary Feeney, M.Sc., R.D., Victor Turciano, M.D., Ph.D., Michelle L. Sever, M.S.P.H., Ph.D., Margarita Gomez Lorenzo, M.D., Marshall Plaut, M.D., and Gideon Lack, M.B., B.Ch., for the LEAP Study Team


Comments open through March 4, 2015

The prevalence of peanut allergy among children in Western countries has doubled in the past 10 years, reaching rates of 1.4 to 3.0%,1-3 and peanut allergy is becoming apparent in Africa and Asia.4,5 This allergy is the leading cause of anaphylaxis and death due to food allergy and imposes substantial psychosocial and economic burdens on patients and their families.6

Peanut allergy develops early in life and is rarely outgrown.7-9 Clinical practice guidelines from the United Kingdom in 19988 and from the United States in 200010 recommended the exclusion of allergenic foods from the diets of infants at high risk for allergy and from the diets of their mothers.
Types of coverage

➔ Proactive and reactive

➔ Single study stories (mostly embargoed)
➔ Hard news (new CDC guidelines, FDA drug approvals, NIH grant announcement, more cases of Zika)
➔ Analyses and explainers (Robin Williams and Lewy body dementia, why no one agrees on mammography guidelines)
➔ Features (patient/physician profiles, trends, controversies)

*Scientific American - How the FDA Manipulates the Media*
Problem #1 We Have Short Attention Spans

➔ Pitches and story ideas look similar
➔ Pitches may seem too narrow
➔ Pitches seem too specialized
➔ Deadlines, deadlines
➔ Fickle editors
Tips

➔ Know the publication’s lead time

➔ Don’t pitch too far in advance unless it’s a monthly (especially for online publications)

➔ Issue gentle reminders

➔ Ask when to follow up

➔ Try to find a news hook

➔ Anticipate when journalists need experts

➔ Try to establish relationships with journalists
Problem #2 We Move on Quickly

➔ Relentless news cycle
➔ Reporters and editors get story fatigue
➔ Once a study is covered it may be over
➔ Publication’s priorities change

(Studies on the Mediterranean diet smell after three days.)
Tips

➔ Strike while the iron is hot
➔ Know about embargoes ahead of time
➔ Remind journalists you have a useful expert for ongoing news
➔ Offer to help build a narrative
➔ Explain why it matters by providing more background information
➔ Don’t make promises you can’t keep
➔ Just check in
Problem #3 We’re Not Great at Math

➔ Questionable statistical significance (or data that should be questioned)

➔ Inconsistent data

➔ Limited time for number-crunching

➔ A single study’s data doesn’t exist in a vacuum

(Not feeling so confident about those confidence intervals.)
Tips

➔ Contextualize findings of new study (does it reinforce other research findings?)

➔ Explain why the numbers matter

➔ Provide data in an easily digestible way

➔ Offer up researcher to explain the data (perhaps by email?)
Problem #4 Clicks and Pageviews Matter

➔ Publication’s style and editorial voice may favor hyperbole

➔ Keywords often determine copy

➔ A need to stand apart from competition

➔ Need to win the Google News race

➔ Need to get the story out quickly

➔ Placement doesn’t drive a story’s success; SEO and social media does

(You’re not going to like this headline.)
Tips

➔ Produce press materials that reflect the way journalists write headlines
➔ Know that every nuance won’t make it into coverage
➔ Anticipate the possible errors journalists may make
➔ Offer to share story on social media
➔ Encourage your experts to be on social media
➔ Keep an eye on Google News
➔ Prioritize ahead of time what is worth being angry about
ENDIT

(Journalist-speak for I’m all done! Thank you.)