

# Person-first language (PFL) in medical communications: usage and awareness

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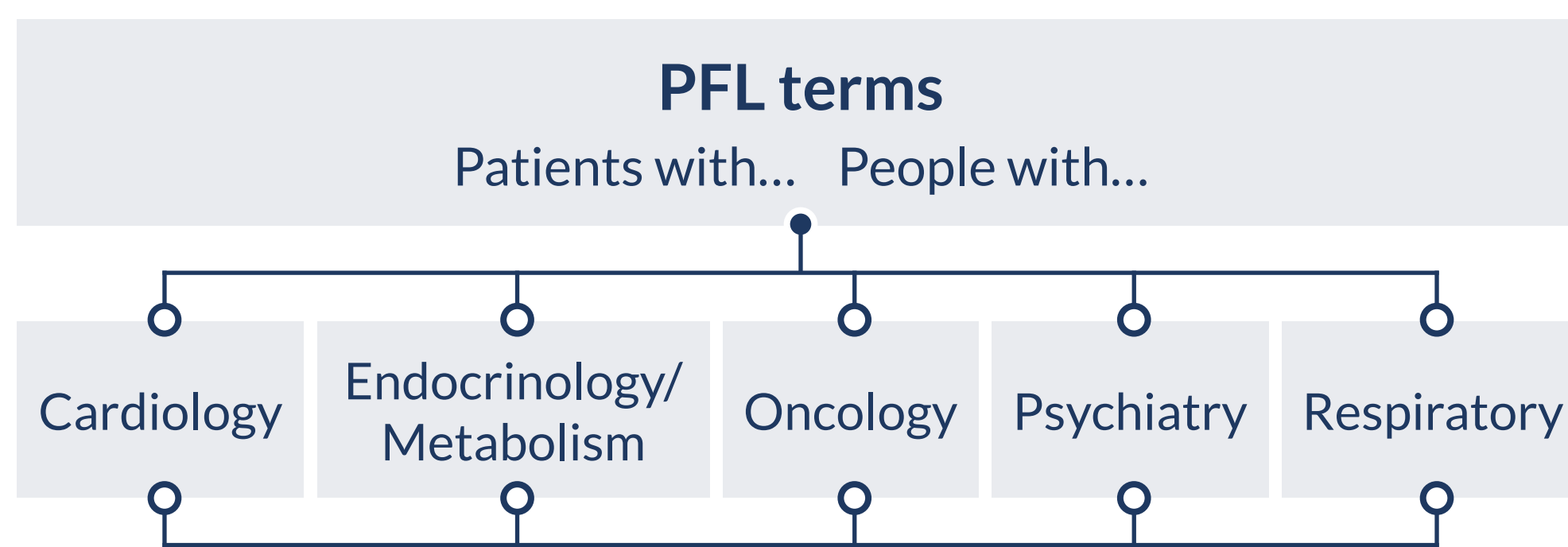
## BACKGROUND

- Language can have a profound impact on shaping attitudes, perceptions, and behavior toward patients. This, in turn, could influence the effectiveness of patient care.<sup>1-3</sup>
- Person-first language (PFL) is a style of communication that aims to avoid stigma by placing the focus on the *person* with the diagnosis rather than on the diagnosis itself.<sup>3-5</sup>
- With the increasing efforts to deliver patient-centered care, it is critical that health care professionals, medical researchers, and medical communications professionals all consciously avoid describing patients in a way that perpetuates stigma.

## METHODS

### 1 Literature evaluation (PubMed®)

9 medical conditions across 5 therapy areas



**Filters:** Publication date: October 2020-October 2022; language: English; article type: clinical trials, randomized clinical trials, reviews, systematic reviews, meta-analyses

### 2 Journal guidelines (PubsHub™ Journals & Congresses™)

5 journals for each medical condition<sup>a</sup>

- Identified using disease name as keyword
- Selected in descending order of impact factor
- Excluded general medicine and preclinical research journals

<sup>a</sup>If the same journal was found for multiple conditions, it was selected only for 1 condition.

Scanned for PFL guidelines

- Instructions for authors
- Editorial policies

### 3 Awareness/perspectives survey (SurveyMonkey®)

Online survey

- Targeted at medical communications professionals who write, review, or edit clinical research-related material
- 10 questions in multiple-choice format; option for free-text responses for some questions

Survey invitations posted (November 23-December 9, 2022)

- ISMPP LinkedIn and Connect forums
- Cactus Life Sciences internal forums
- Authors' professional networks

## CONCLUSIONS

- 1 Labeling of patients by their disease has declined in literature related to diabetes, schizophrenia, and heart failure but continues in literature related to hypertension, obesity, cancer, and asthma.
- 2 Specific guidance on the use of person-first language is mostly lacking in medical journals.
- 3 Medical communications professionals displayed high awareness of and belief in the use of person-first language.

## RESULTS

PFL vs non-PFL usage in medical literature

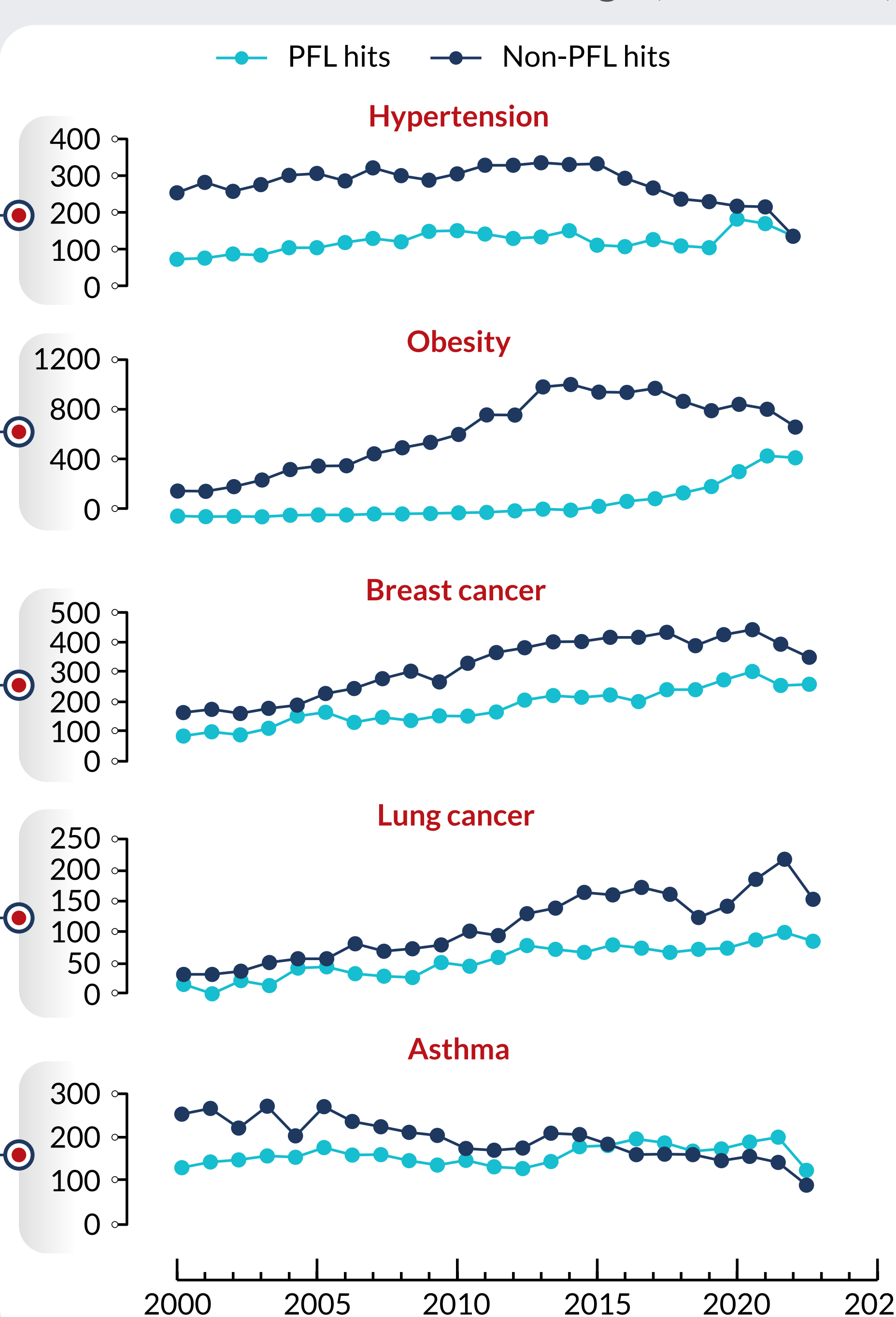
Therapy area	No. of hits <sup>a</sup>	
	PFL	Non-PFL
<b>Medical condition</b>		
Cardiology		
Heart failure	1103	614
Hypertension	369	420
Endocrinology/Metabolism		
Diabetes	3085	1748
Obesity	768	1228
Oncology		
Breast cancer	534	762
Lung cancer	205	376
Psychiatry		
Schizophrenia	424	46
Alcohol use disorder	0 <sup>b</sup>	30
Respiratory		
Asthma	334	264

<sup>a</sup>From October 1, 2020, to October 20, 2022.  
<sup>b</sup>PubMed had not indexed terms such as "patients with alcohol use disorder," so there were 0 hits. Searching with just "alcohol use disorder" returned 406 hits.

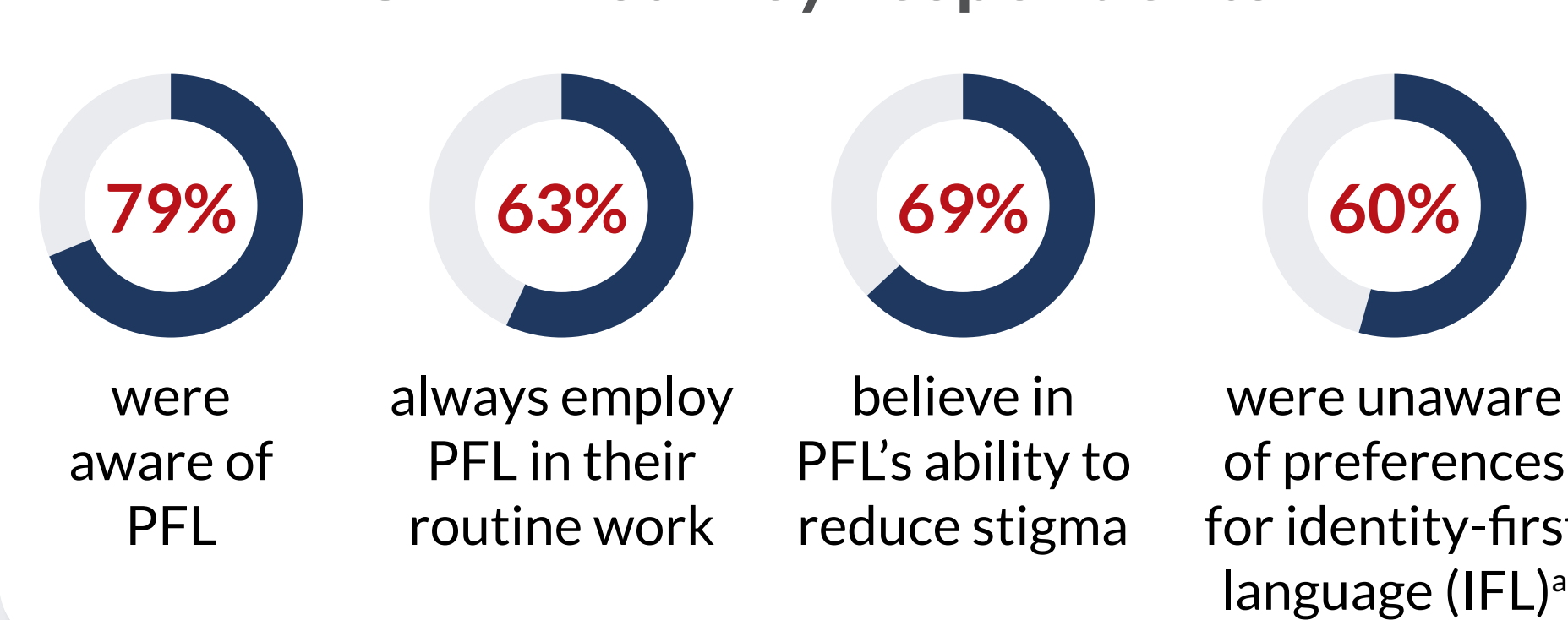
Of 45 journals evaluated



Trends in PFL vs non-PFL usage (2000-2022)



Of 121 survey respondents



<sup>a</sup>IFL integrates the patient's condition with their identity (eg, deaf person, not person with deafness).

Insights from survey respondents

Pro-PFL

“ A person-first approach goes a long way in separating the person from their disease. A person's disease should not become their identity ”

Anti-PFL

“ Being disabled is a big part of my identity. 'Disabled' is not a bad or dirty word. Avoidance of the word through using PFL creates mores [sic] stigma, not less. ”

Authority on terminology

“ I would like to have more information about which groups prefer to be called what. ”

Flexibility

“ I try not to be pedantic, and I try to be sensitive when writing wrt [sic] the latest understanding of PFL vs non PFL, when to use it, and when not to. ”

Limitations on usage

“ Clients...can prefer to refer to 'diabetic patients', for example ...sometimes a perception that this is better because it saves on word count. ”

Low compliance

“ I have noticed, as a [sic] editor of a peer-reviewed journal ...that it's not widely adopted in peer-reviewed literature. I would like to see more education and collaboration to foster the adoption of PFL across the board. ”

## FUTURE DIRECTIONS

- Some patient groups prefer IFL. Through patient surveys, professional organizations could glean preferences for PFL and IFL by condition and accordingly issue advisories.
- Specific guidance on preferred language by medical journals could help promote greater adoption among authors and medical writers.

### ACKNOWLEDGMENTS

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