

1           **RECOMMENDATION D:**

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3           **Madam Speaker, your Reference Committee**  
4           **recommends that the title be changed of Resolution**  
5           **905 to read as follows:**

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7           **RESEARCH AND TRANSPARENCY OF INGREDIENTS**  
8           **IN MENSTRUAL HYGIENE PRODUCTS**

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10           **HOD ACTION: Resolution 905 be adopted as**  
11           **amended with a title change.**

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13           RESOLVED, that our American Medical Association support more comprehensive  
14           research on contaminants in menstrual hygiene products (MHP), including but not  
15           limited to tampons, other MHPs, and vaginal wipes, and the absorption of toxins into  
16           systemic circulation in an effort to better understand their effects on health (New HOD  
17           Policy); and be it further

18  
19           RESOLVED, that our AMA support regulations and legislation that mandate  
20           transparency, disclosure, and accurate labeling of contaminants in menstrual hygiene  
21           products. (New HOD Policy)

22  
23           Your Reference Committee heard testimony that it is important to more fully understand  
24           menstrual hygiene product ingredients and their risks. However, there was some  
25           concern about preemptively supporting regulation and legislation without peer-reviewed  
26           scientific evidence of harms of ingredients to support this work. Therefore, Madam  
27           Speaker, your Reference Committee recommends that Resolution 905 be adopted as  
28           amended and the title be changed to reflect the policy therein.

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30           **(17) RESOLUTION 912 - ASSURING REPRESENTATION OF**  
31           **OLDER AGE ADULTS IN CLINICAL TRIALS**

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33           **RECOMMENDATION A:**

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35           **Madam Speaker, your Reference Committee**  
36           **recommends that the first Resolve of Resolution 912**  
37           **be amended by addition and deletion to read as**  
38           **follows:**

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40           **RESOLVED, that our American Medical Association**  
41           **specifically advocate for inclusion of older patients**  
42           **(both men and women) by amending H-460.911 as**  
43           **follows:**

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45           **H-460.911 Increasing Minority, Female, and other**  
46           **Underrepresented Group Participation in Clinical**  
47           **Research of People Identifying with Minoritized and**  
48           **Marginalized Groups**

49  
50           **1. Our American Medical Association advocates that:**

1 a. The Food and Drug Administration (FDA) and  
2 National Institutes of Health (NIH) conduct annual  
3 surveillance of clinical trials by gender, race, age and  
4 ethnicity, including consideration of pediatric and  
5 elderly populations, and disability status to determine  
6 if proportionate representation of people identifying  
7 with minoritized and marginalized groups, including by  
8 sex, gender, race, ethnicity, and age, women and  
9 minorities including older adults and children if  
10 appropriate and disability status is maintained in  
11 terms of enrollment and retention. This surveillance  
12 effort should be modeled after National Institute of  
13 Health guidelines on the inclusion of women and  
14 minority populations.

15 b. The FDA have a page on its web site that details the  
16 prevalence of people identifying with minoritized and  
17 marginalized groups, including sex, gender, race,  
18 ethnicity, and age, minorities and women and older  
19 adults including those over age 75 and disability  
20 status in its clinical trials and its efforts to increase  
21 their enrollment and participation in this research.

22 c. Resources be provided to community level agencies  
23 that work with people identifying with minoritized and  
24 marginalized groups, including by sex, gender, race,  
25 ethnicity, and age, these minorities, females, older  
26 adults including those over age 75 and disability  
27 status and other underrepresented groups who are not  
28 proportionately represented in clinical trials to address  
29 issues of lack of access, distrust, and lack of patient  
30 awareness of the benefits of trials in healthcare. These  
31 ethnic groups may minorities include Black  
32 Individuals/African Americans, Hispanics or Latino,  
33 Asians/, Pacific Islanders/Native Hawaiians, Middle  
34 Eastern or Northern African, and American Indian or  
35 Alaskan Natives ~~Native Americans.~~

36  
37 **RECOMMENDATION B:**

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39 Madam Speaker, your Reference Committee  
40 recommends that the second Resolve of Resolution  
41 912 be deleted:

42  
43 **RESOLVED**, that our AMA ~~monitor the effectiveness of~~  
44 ~~H 460.911 on an annual basis (Directive to Take~~  
45 ~~Action); and be it further~~

1           **RECOMMENDATION C:**

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3           **Madam Speaker, your Reference Committee**  
4           **recommends that the third Resolve of Resolution 912**  
5           **be amended by addition and deletion to read as**  
6           **follows:**

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8           **RESOLVED, that our AMA collaborate with AHRQ,**  
9           **FDA, NIH and other ~~relevant stakeholders~~ interested**  
10           **parties to increase public and physician awareness**  
11           **and education on the topic of inclusivity in clinical trial**  
12           **participation (Directive to Take Action).**

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14           **RECOMMENDATION D:**

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16           **Madam Speaker, your Reference Committee**  
17           **recommends that the fourth Resolve of Resolution 912**  
18           **be deleted:**

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20           ~~**RESOLVED, that our AMA specifically submit**~~  
21           ~~**comments to the FDA on current proposed industry**~~  
22           ~~**guidelines for inclusion of underrepresented**~~  
23           ~~**populations in clinical trials<sup>4</sup> by September 2025.**~~

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25           **RECOMMENDATION E:**

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27           **Madam Speaker, your Reference Committee**  
28           **recommends that Resolution 912 be adopted as**  
29           **amended.**

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31           **HOD ACTION: Resolution 912 be adopted as**  
32           **amended.**

33  
34           **RESOLVED, that our American Medical Association specifically advocate for inclusion of**  
35           **older patients (both men and women) by amending H-460.911 as follows:**

- 36  
37           **1. Our American Medical Association advocates that:**  
38           **a. The Food and Drug Administration (FDA) and National Institutes of Health (NIH)**  
39           **conduct annual surveillance of clinical trials by gender, race, age and ethnicity, ~~including~~**  
40           ~~**consideration of pediatric and elderly populations,**~~ to determine if proportionate  
41           **representation of women and minorities including older adults and children if**  
42           **appropriate is maintained in terms of enrollment and retention. This surveillance effort**  
43           **should be modeled after National Institute of Health guidelines on the inclusion of**  
44           **women and minority populations.**  
45           **b. The FDA have a page on its web site that details the prevalence of minorities and**  
46           **women and older adults including those over age 75 in its clinical trials and its efforts to**  
47           **increase their enrollment and participation in this research.**  
48           **c. Resources be provided to community level agencies that work with those minorities,**  
49           **females, older adults including those over age 75 and other underrepresented groups**  
50           **who are not proportionately represented in clinical trials to address issues of lack of**

1 access, distrust, and lack of patient awareness of the benefits of trials in healthcare.  
2 These minorities include Black Individuals/African Americans, Hispanics, Asians/Pacific  
3 Islanders/Native Hawaiians, and Native Americans (Directive to Take Action); and be it  
4 further

5  
6 RESOLVED, that our AMA monitor the effectiveness of H-460.911 on an annual basis  
7 (Directive to Take Action); and be it further

8  
9 RESOLVED, that our AMA collaborate with AHRQ, FDA, NIH and other relevant  
10 stakeholders to increase public awareness and education on the topic of inclusivity in  
11 clinical trial participation (Directive to Take Action); and be it further

12  
13 RESOLVED, that our AMA specifically submit comments to the FDA on current  
14 proposed industry guidelines for inclusion of underrepresented populations in clinical  
15 trials<sup>1</sup> by September 2025. (Directive to Take Action)

16 Your Reference Committee heard supportive testimony on this item, with some  
17 discussion on amendments to refine implementation. Per AMA policies, your Reference  
18 Committee however proposes amendments to update policy towards person-first  
19 language, and to make ethnicity categories consistent with recommendations from the  
20 Office of Management and Budget. One amendment was proposed to strike an annual  
21 report on this issue, as enrollment by age group is disclosed by the National Institutes of  
22 Health ([here](#), hyperlink available in online report). Additionally, an amendment was  
23 proposed to strike reference to submitting comment on an FDA rule, as that docket has  
24 already been closed as of October 2024, however our AMA did submit comment that  
25 [can be found online](#) (hyperlink available in online report). Therefore, Madam Speaker,  
26 your Reference Committee recommends that Resolution 912 be adopted as amended.

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28 **(18) RESOLUTION 913 - SEXUALLY TRANSMITTED**  
29 **INFECTIONS ARE ON THE RISE IN THE SENIOR**  
30 **POPULATION**

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32 **RECOMMENDATION A:**

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34 **Madam Speaker, your Reference Committee**  
35 **recommends that the first Resolve of Resolution 913**  
36 **be amended by addition and deletion to read as**  
37 **follows:**

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39 **RESOLVED, that our American Medical Association**  
40 **advocate and promote the U.S. Preventive Services**  
41 **Task Force (USPSTF) recommendations for STI**  
42 **screening through interested senior older adult**  
43 **advocates ~~such as AARP~~, specifically targeting**  
44 **chlamydia, gonorrhea, human immunodeficiency virus**  
45 **(HIV), HPV and syphilis, for the senior older adult**  
46 **population who are not regularly screened (Directive**  
47 **to Take Action); and be it further**