

# Combating Fake News

**P**roviding effective clinical oncology care these days includes practicing in an environment abundant with fake news, emanating from what some might otherwise consider an alternate universe. So-called facts are out there—after being twisted, manipulated, and/or just plain made up—and they create a slurry of misinformation, disinformation, or a lack of information.

How does fake news infiltrate your practice? A prime example is the Google search results brought to you by your patients (or their caregivers), heralding the latest cure for their disease. Another example is the claims of so-called cancer authorities (sometimes known as “lifestyle gurus”) who urge your very ill patients to abandon proven cancer treatments and fly off to exotic locales for organic cleanses, herbal treatment boosts, and the ultimate spiritual transformational cure.

In addition, a more timely example of fake news is speculation about the origin, spread, and containment—or lack thereof—concerning coronavirus (COVID-19). In this unprecedented health crisis, erroneous information flourishes while the World Health Organization (WHO, 2020) and the Centers for Disease Control and Prevention (2020) struggle to clarify what is really happening with the virus.

Comprehensive counteracting strategies are needed to combat fake news. As applied to the *Clinical Journal of Oncology Nursing (CJON)*, a key strategy is to publish extensive clinical experience and expert insights from *CJON*'s authors. In this issue, you can review reputable information about breast cancer in young women, assess the effect of applying a cool washcloth to lessen treatment-related nausea, gain an understanding about

the merits of the Mediterranean diet, process information about bone pain from supportive care treatments, review details of the Genetic Information Nondiscrimination Act, learn how to deal with opioid misuse in those affected by cancer pain, and explore the efficacy of art therapy for patients with cancer.

assured that *CJON* content has gone through comprehensive, multiple-point filters to counteract fake news. Because of this, you can rely on *CJON* as an accurate source of information in your discussions with patients, their caregivers, and your colleagues. Efforts like these made by authors, reviewers, and the production team

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To give additional insight into how the process works, all manuscripts considered by *CJON* are subjected to a double-blind, peer-review process, calling on extensive clinical and academic expertise from a roster of 246 dedicated *CJON* peer reviewers. Our production team, which includes copy editors with many years of scholarly journal copyediting experience, thoroughly check *CJON* content and verify any questionable claims. (The team also checks the content in our sister journal, the *Oncology Nursing Forum*.)

In addition to the production team, the *CJON* editorial board also provides direction for the journal and an additional layer of oversight. The editorial board includes nine *CJON* associate editors and in-house clinical experts—fellow oncology nursing educators and clinicians practicing at the top of their professional game. These individuals, as well as *CJON*'s production team, keep up to date about advanced, ethical editing with their enrollment in formal degree programs, continuing education courses, and certificate programs.

Therefore, in 2020—the Year of the Nurse and Midwife (WHO, 2019)—rest

contribute to the public's continued confidence that nursing, for the 18th year in a row, is one of the most trusted professions (Gallup, 2020).



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## KEYWORDS

communication; nurse education; peer review; ethics; misinformation; patients and caregivers

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