

On The State Of Medical Education

SYDNEY G. GRANT, '67

Are all the years that a student spends preparing for the practice of medicine really necessary?

Along with this question one might also ask, is there not a lot of time wasted in the training years that could be put to better use?

There are justified reasons for asking both these questions. Many in the profession and those training for the profession have asked these more than once. It cannot be disputed that one of the major factors operating in the lack of desire of young men to enter medicine is that so many years must be spent in training. More new blood is needed in the other professions but the need is not nearly so great as it is in medicine. This need is increasing and must be met.

To many, a degree in medicine seems attractive, and many more would attempt to achieve it if it were not for the seemingly insurmountable barrier of time and expense needed for its attainment. This barrier could be made a little less immense if the system of medical education were reconstructed so as to exclude everything but that which is necessary. Since this includes a great deal of material, besides allowing for a decrease in the length of the training period, it would also allow more time to teach many important aspects of medicine that are now crowded out. As it is now, to achieve the medical degree, one spends nine years as a university student after high school. It can be done in eight but most medical schools now prefer the incoming student to have a Bachelor of Arts or a Bachelor of Science degree, which requires four years. Five years are spent in medical school and if one has enough time and is willing to accept further hardships of delayed gratification, he may continue in a four year residency. Many are content to take on the role of general practitioner. Some do it by choice; others because of circumstances. But this is the day of increasing specialization in every field and medicine is no exception. The four to six years in a residency are necessary years. The amount of knowledge in each branch of medicine is great and much time must be spent in learning it. Some exceptional men enter a sub-specialty usually because of an intense interest in a certain field. The number of years then, before one can practice, may run from nine to thirteen and up to sixteen years. What other profession demands such a period of preparation?

Extra years in school mean extra expense—expense as regards to fees and books board and lodging, and expense as regards to money not earned that could be earned in the training years if some other path had been chosen. As it is now, the financial assistance given to Canadian medical students by their respective provinces (except Newfoundland) is negligible. If the education period were decreased, the expense would be lower, and the burden generally would be lightened. Medicine then might not appear so formidable to the youth deciding his future.

How, one might ask, can we decrease the education period and at the same time find time to teach all that must be learned? To answer the first part of this question, let us have a look at the pre-med years. Many—in fact most people—still consider a knowledge of history, English and a handful of social sciences vital in the making of the complete physician. These courses are included in all pre-medical curricular. One cannot deny that they are an advantage to anyone in any chosen field. But are they vital in medicine? Why shouldn't the physician be allowed to make up his own mind

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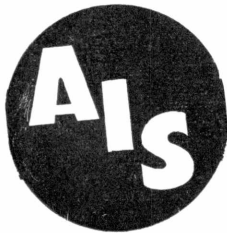
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concerning his need for a knowledge of the arts and humanities? The importance of a good background in psychology cannot be disputed. But one fails to see just where a knowledge of English, History, Economics, Classics, and Mathematics can play a part in the general practice of medicine. At one time in our history, the doctor was expected to be a veritable Voltaire in the community—a man whose judgement, wisdom and knowledge were beyond compare. That day is over. Most physicians now have little time for anything else but their practice—it dominates their whole lives. They have little time for cultural chit-chat or wise prophecy. The doctor can no longer afford the time to be the community jack-of-all-trades. He must be the master of one. It is sad that this is so but the increasing complexities and demands of medicine have brought it to pass. A compromise must be made. If our educators feel that a man is not ready to practice medicine eight or nine years after high school, then better that the time spent in teaching these courses be used by adding an extra year in medical school and more teaching done in the clinical sciences. The engineer, the physicist, the architect are not expected to have a grounding in every course under the sun. These men are specialists, as is the historian, the English teacher, the sociologist, and so is the physician.

Several science courses must be taken as prerequisites to medical school. Needless to say, much in these courses is necessary but more is extraneous and merely academic. A good deal of organic and inorganic chemistry is used in medical school but it is just a small proportion of that taught in the pre-med years. Perhaps it would be better to give a special one-year course in chemistry which would contain the vital essentials for the pre-med student.

Biology is important and necessary. One doubts though, if a course (zoology) dealing with the features of the dog-fish, shark, turtle, cat and whatever weird and exotic creatures the comparative anatomists can come up with, is essential to the learning and practicing of medicine. The course is relevant—but is it vital? In the same vein, a consideration of the necessity of physics and mathematics might be in order.

So many medical schools are now stressing the need for a degree in the arts or sciences. This involves an extra year in undergraduate school and taking courses of more questionable importance than those cited. Rather than stress more years and more courses, perhaps a reappraisal of the pre-requisite courses now existing is in order. The three or four pre-med years could be shortened to two. The dropping of some courses and the restructuring of others like biology, chemistry, physics and math could make this possible. This reconstruction would involve the complete exclusion of much material and the abbreviating of other material which is considered essential. The writing of special textbooks for pre-med students would not be an impossible task either. It would be almost impossible to learn all there is to be learned in medicine in less than five years. As it is, one just begins learning a portion of it in this time. Thus, if the long years of training are to be made fewer in number, it must be done in the pre-med. years.

Medicine as a science has moved ahead at a phenomenal rate over the past fifty years. The rate of acquisition of new knowledge in medicine has progressed geometrically. The burden of learning and the amount to be learned are much greater than they were twenty to forty years ago. Although much progress has been made in medicine, very little has been done in the organization and planning of a medical education. Twenty years ago one could learn a good proportion of what there was to know in medicine and could learn it well. Today, the proportion learned and learned well is

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much smaller. This proportion could, and should, be increased. In medical school there is much that is taught that is unnecessary, and much that is necessary is not taught nor emphasized enough. Here we have a solution to the problem, and an obvious one. The deletion of courses, labs, and lectures that are not absolutely pertinent to modern medicine, and the inclusion and emphasizing of only the vital facts and techniques that go to make up the practice of good general medicine, would do much to improve the situation. Many important things are taught now that are not emphasized enough simply because of a lack of time.

The purpose of the five years in medical school is to train young men and women to be general practitioners. As it is now the laboratory training program, especially in first year, is geared to make technicians or research scientists out of the medical student. Many, many hours are spent in the lab doing things that can be learned from a textbook in a matter of minutes. Ancient and archaic methods and apparatus are used in those labs that would never be tolerated now in the modern clinical laboratories. The technicians today learn new and modern techniques that cut the time in half. If the teaching of laboratory procedure is deemed necessary, and goodness knows why it should be, why can it not be geared more to modern methods and techniques. This writer thinks that a complete reappraisal of the entire laboratory teaching system is necessary. There is a great disproportion between what is learned from these labs and the amount of time and work spent on them.

In the same light, one can think of lectures, indeed of entire sections of courses, that are filled with all kinds of relevant but merely academic and, as far as the general practice of medicine is concerned, useless information.

More consideration must be given to the allotment of time and the importance of subject matter if medical education is to keep pace with medical achievement. The basic sciences will have to become a little more basic and once important, but now outmoded, subject matter in the clinical sciences will have to be disregarded. There is time to learn but that time must not be wasted.

The appointment of Royal Commissions has become quite popular in the last decade, and education, and especially higher education, has come under study. Perhaps it is time that some such commission or special committee were set up by our government in Canada to look into the state of medical education. It is time that all those who plan the teaching of medicine began to do some research and a little reformulating. If this were done, the number of training years could be decreased, and the amount of vital information imparted increased. Advances have been made everywhere in medicine—everywhere except in the training of men to practice it. The time has come for advances to be made here.

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