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Complementary Medicine: A One Day Course

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Will eagerly refer patients to non invasive well studied therapies.

Students - teaching – students. Small group format is always more immediate and of mind-body,

It would have been nice to do more than one group.

Patient presentations of personal experiences using CAM.

with CAM ensured that each students heard about all of the modalities

MD’s relating to patients they cared for.

Breakout experiential sessions

Herbs/supplements included uses, side effects, drug interactions, pharmacology, and general precautions—discussed in a "Jeopardy" game format.

• Confidences in skills locating the best evidence, discussing CAM, and referring patients improved. Average of clustered items: pre=2.42, post=3.82, t44=-10.54; p<.01.

• 95% agreed this provided training “not obtained elsewhere in medical education.” Students valued the “Jeopardy” session and the hands-on learning.

CONFIDENTIALITY

The one-day 2003 Interclerkship course introduced CAM and was designed to enhance the knowledge, attitude, and skills of third year medical students.

Students experienced a wide array of CAM modalities, interacted with CAM practitioners and learned the state of the art of evidence based CAM.

The herb jeopardy was good as was the hands-on experiences of the therapies.

I would like to incorporate CAM when I practice medicine:

I believe that CAM should be integrated into the current health care system

CONFIDENCE IN SKILLS

• Half of the class (n=50) was included in this Interclerkship as a pilot group.

• Pre and post questionnaires assessed knowledge and confidence in skills on a 5-point Likert scale, and assessed attitude with three belief statements.

• Qualitative questions assessed personal CAM practices.

The University of Massachusetts Medical School

Student evaluations showed that more than 50% of students felt that their education in CAM was inadequate.

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OVERALL IMPACT

Overall, the third year students attending the Interclerkship showed significant improvements in knowledge about CAM, and reported increased confidence in their ability to communicate with patients using available CAM evidence. A majority of students agreed that this Interclerkship provided training “not obtained elsewhere in medical education.” They requested more personal experiences of CAM modalities.

FUTURE CONSIDERATIONS

Impact on the Interclerkship

• 2004 Interclerkship modifications:
  ◦ shorter didactic sessions
  ◦ two breakout group experiences of CAM modalities
  ◦ Most recent student feedback from the 2004 Interclerkship:
    ◦ “The hands-on approach and interactive learning was great! Thank You!”
    ◦ “Helped with introduction to a whole realm of new modalities for patients”
  ◦ For AY 2004-2005, we will plan to include the entire class of 100 students in the Interclerkship.

Current and Future CAM Curriculum in the Medical School

The University of Massachusetts is one of six pilot schools in the Educational Development of Complementary and Alternative Medicine Grant (NCC-CAM) integrating CAM into the full breadth of the medical school curriculum.

The NCCAM grant curricular initiative has allowed UMass to bring CAM topics into the core curriculum.

Anatomy – Experiential Anatomy through Head/Neck Massage

Pharmacology – Herbs and Supplements

Epistemology – Discussion of CAM journal articles

Patient Physician and Society course – Introduction of core CAM information

Further curricular enhancements planned in the Neurosciences, and Clinical Clerkship years

• A CAM link through our library website is now operational and will allow students and faculty to directly access CAM reference websites.

• More focused Faculty Development in CAM/Integrative medicine is planned for the coming years.

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