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Complementary Medicine: A One Day Course

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BACKGROUND

• A landmark survey by David Eisenberg found over 40% of Americans utilize Complementary and Alternative Medicine (CAM) but more than 60% of these patients do not disclose this to their doctors.
• The lack of inquiry about CAM use by physicians diminishes the quality of patient care, reduces patient trust and compliance, and in some rare cases may lead to severe side effects and dangerous interactions.
• The 2001 AAMC graduation questionnaire showed that more than 50% of students felt that their education in CAM was inadequate.

GOAL

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.

METHODOLOGY

• A course evaluation assessed programmatic quality and relevance.
• 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.

RESULTS

• Pre/post test matched analysis of 90% of sample (n=45).
• Course evaluation response rate of 76% (n=38).
• Students reported increased understanding of all knowledge topics (e.g. herbs, acupuncture). Average of clustered items: pre=2.69, post=3.82, p=10.54; p<.01.
• Confidence in skills locating the best evidence, discussing CAM, and referring patients improved. Average of clustered items: pre=2.42, post=3.77, t=44=-13.38; p<.01.
• 95% agreed this provided training “not obtained elsewhere in medical education.” Students valued the “Jeopardy” session and the hands-on learning.

SAMPLE ITEMS

Knowledge

• Herbs – uses, side effects, drug interactions
• Benefits from acupuncture, mind-body techniques
• Legal issues when referring patients to CAM providers
• The term Integrative Medicine

Confidence in Skills

• Locating the best evidence about CAM therapies
• Referring patients to appropriate CAM providers
• Discussing CAM with patients

Attitude Statements

• I do not believe that CAM should play any role in our current health care system
• I think that CAM providers have a role to play independent of the conventional bio medical practice of medicine
• I believe that CAM should be integrated into the current health care system

Sample Comments

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

“I think that CAM providers have a role to play independent of the conventional bio medical practice of medicine.”

“Students teaching – students. Small group format is always more immediate and effective.”

“I do not believe that CAM should play any role in our current health care system, however I do believe that CAM should be part of our current health care system.”

“I would like to incorporate CAM when I practice medicine:

“Reason patients that have not been helped through conventional medicine might be helped or feel relief through CAM.”

“Mind-Body — Hypnotherapy — meditation — stress reduction — yoga.”

“I think it is important and the field is growing.”

“I would like to learn more regarding this practice, as it would be helpful in my career as an anesthesiologist.”

“I will probably refer patients to non verified well-studied therapies.”

“Refer, maybe do some myself.”

I would like to incorporate CAM when I practice medicine:

“Reason patients that have not been helped through conventional medicine might be helped or feel relief through CAM.”

“Mind-Body — Hypnotherapy — meditation — stress reduction — yoga.”

“I think it is important and the field is growing.”

“Integrative – I would like to learn more regarding this practice, as it would be helpful in my career as an anesthesiologist.”

“I will probably refer patients to non verified well-studied therapies.”

“Refer, maybe do some myself.”

FUTURE CONSIDERATIONS

Impact on the Interclerkship

• 2004 Interclerkship modifications:
  ◦ shorter didactic sections
  ◦ 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 (NCCAM) 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 – Experimental Anatomy through Head/Neck Massage
• Pharmacology – Herbs and Supplements
• Epidemiology – Discussion of CAM journal articles
• Patient Physician and Society course – Introduction of core CAM information
• Further curricular enhancements planned in the Neuroscience, 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 as planned for the coming years.