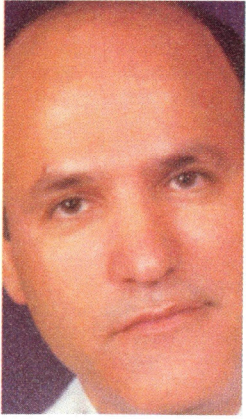


OPINION

Time to accept a new order

VIEW
IN MY



Medical schools should embrace new technology in teaching — or risk universities in other countries taking the lead, argues Mr Ahmed Assaf

Recent giant leaps in technology have completely changed how the business world works. So it is only a matter of time before medical education will be transformed by Internet communication-based systems.

There are essentially two main aspects to medical training — medical knowledge and clinical experience. Both are well suited to the medium of the Internet-communication-multimedia triad (ICM).

Gone will be the dull books with an occasional illustration. In addition, ICM will significantly enhance the clinical experience gained by a student through a hospital attachment.

ICM technology will immensely expand the scope of learning. In many ways, remote learning and telemedicine will enhance medical learning and reduce its cost.

There will be no need for medical students to sit for hours in the classroom listening to lectures or in a laboratory dissecting anatomy or studying a skeleton.

Case histories of disease

processes can be viewed at a flick of a button. Electronic books, interactive live connection with authorities in various medical fields and Internet access using sound and pictures are very powerful new tools to enhance learning.

Traditional way

And yet, despite the revolutionary opportunities offered by this type of learning, the Government has clearly shown that it supports the traditional way of teaching medicine by choosing to establish two new medical schools.

It is my belief that the Open University bid to enter the medical education did not receive the attention it deserved.

In my communication with the NHS Executive in 1997, I suggested that the Open University be part of the new medical student expansion. A meeting followed with a chancellor of the university, who expressed the willingness of the institution to enter the sphere of medical education.

Subsequently, the Open

University submitted its bid for the intake of medical students.

The decision not to grant the university a major role in this expansion in my judgement represents a lack of forward thinking and does not take into account the impact of new technology, such as the Internet, on medical education.

Yet again, the Government has been caught napping. If the UK does not use new technology as a means of helping medical students learn, at least on a pioneering and experimental basis, then universities in other parts of the world will take the lead.

New technology

Today's powerful medical schools should learn a cautionary lesson from the world of banking, where old, established methods of banking are being seriously eroded by new technology, notably Internet banking.

Internet methods of learning and education will eventually supercede the established ways of gaining medical knowledge. But before ICM learning can

take off, the problems of patient safety and confidentiality have to be effectively addressed.

Once these are at least as good as the current practice, then the door will be open for the Internet to play a major role in medical practice as well. Following this, the roles of physician and surgeons (as well as other health professionals) will have to be redefined.

In 50 years' time, the role of the medical school, and of health professionals, will have been completely transformed.

Besides being a focus for social gatherings and granting degrees, the medical school could become a centre for medical knowledge production, for maintaining standards, as well as adopting various imaginative learning methods of ICM.

The old order will be dead. Long live the new medical school.

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