



"I JORNADA VIRTUAL NACIONAL E INTERNACIONAL DE EDUCACIÓN E INVESTIGACIÓN EN CIENCIAS MORFOLÓGICAS",

10 al 30 Noviembre 2012

Sitio web: histologiavirtual.com.ar

Auspician: Facultad de Ciencias Médicas de la Universidad Nacional de Córdoba, Argentina (RHCD 301/12), Asociación Argentina de Anatomistas (Miembro de la Asociación Panamericana de Anatomía), Fundación Facultad de Ciencias Médicas, Córdoba, Argentina y Sociedad de Medicina Interna de Córdoba, Argentina.

ANATOMY TRAINING FOR CLINICAL POSTGRADUATES IN THE UNITED KINGDOM

Hickman RA¹, Anderson WJ².

¹School of Medicine, University of St. Andrews, Medical and Biological Sciences Building, North Haugh, St. Andrews, KY16 9TF, UK; e-mail: rah24@st-andrews.ac.uk

²John Radcliffe Hospital, Headington, Oxford, UK; email: w.anderson@doctors.org.uk

Introduction

There has been a significant reduction in the overall teaching time and content of anatomy in UK undergraduate medical courses overall [1, 2]. Unfortunately, this steady decline in anatomy education has been associated with worsening knowledge of anatomy in postgraduates [1, 3], necessitating anatomy teaching in postgraduate education. Several schemes have been introduced to rectify this lack of anatomy training for postgraduates.

A progressive decline in anatomy teaching and its impact

One eminent anatomist once stated that medical students should spend no less than 300 hours in the dissecting room [4]. Nowadays, many UK medical undergraduates do not have exposure to dissection, and have significantly less anatomical teaching in the curriculum [2]. This decline in anatomy teaching was in part a response to curriculum reform after the introduction of Tomorrow's Doctors document which argued the need for a more balanced and holistic teaching programme that incorporated social sciences.

Actions to remedy

There has been an argument that trainees can learn anatomy whilst in the operating room. However, one cannot learn anatomy that is deep to the operative field nor that which lies outside the confines of the operative field. Teaching of anatomy during laparoscopy is potentially even more problematic because of the loss of depth perception when a 2-D image is presented on the screen.

External anatomy courses and e-learning modules are also available which can provide a concise overview to human anatomy relevant to medical practice. Formal teaching is now being provided by several postgraduate schools in anatomy to rectify the deficit in anatomy teaching.

Conclusion

Although anatomy education has been reduced, postgraduate anatomy education for clinicians is gaining momentum. With further instruction and awareness of anatomy, the trainees' confidence in clinical practice should improve, as should patient care.

References

1. Raftery AT. Anatomy training in the UK. *Surgery* 25;1:1-2.
2. Pryde FR, Black SM. Scottish anatomy departments: adapting to change. *Scott Med J*. 2006; 51(2):16-20.
3. Ellis H. Medico-legal litigation and its links with surgical anatomy. *Surgery*. 2002; 20(8): i-ii.
4. Zuckerman S. *A New System of Anatomy*. 1961; Oxford University Press, Oxford.
5. Waterston SJ, Stewart IJ. Survey of clinicians' attitudes to the anatomical teaching and knowledge of medical students. *Clin Anatomy* 2005; 18:380-384.