

**Title:** Videos to introduce clinical materials to preclinical students

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**Context and setting:** Students study Anatomy, Biochemistry and Physiology during the preclinical phase in the Faculty of Medicine at the University of Ruhuna. Preclinical students do not have access to patients in this traditional discipline based curriculum.

**Why the idea or change was necessary:** Interpersonal relationships between patients and doctors are one important contributor to an optimal clinical outcome and empathy is central to the development of a meaningful doctor-patient relationship. Early exposure to clinical material during medical education has been suggested by previous researchers as a precursor to the development of empathy later in training.

**What was done:** Two videos related to thalasaemia and haemophilia were produced with the participation of two pediatric patients. In the videos, patients and their relatives described the diseases and related problems in response to questions put to them. They talked about health, social, and economic problems related to the diseases.

These videos were shown on two occasions in the blood module which ran for three weeks. While watching the videos, students were asked to identify the problems faced by patients and relatives. Each video was followed by a discussion of the problems identified by students. This was conducted as buzz group discussions (in which small groups were formed in the lecture hall). Students carried out the discussion and several staff members facilitated the process. The process concluded with a wrap up session led by a staff member. Medical, social, and economic problems faced by patients and relatives were emphasized during this post-video discussion. The blood module consisted of lectures and tutorials. The two videos used in this study were the main clinical material introduction in blood module.

Before and after the blood module, students' empathy was assessed using Jefferson Scale of Empathy (JSE). JSE is a widely used scale to assess physicians' and medical students' empathy.

**Evaluation of the results or impact:** Responses of 144 students with adequate data who participated in both pre- and post activity empathy assessments were used for analysis. Among them, 69 were male and 75 were female. Mean empathy score of pre-activity was 108.47 (SD 10.89) and 109.42 (SD 15.07) and that of post-activity was 107.81 (SD 16.46) and 113.94 (SD 16.37) for males and females respectively.

Differences between males and females score was not significant in pre-activity while post-activity score was high in females (independent sample t-test  $p < 0.05$ ). Post-activity scores were significantly higher than pre-activity score in females using paired t-test ( $p < 0.05$ ). This study indicated that in a traditional medical school where preclinical training does not provide access to patients, video presentation of clinical material could be used to improve empathy. It is also important to explore other activities which could enhance empathy of male students.