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Book Review

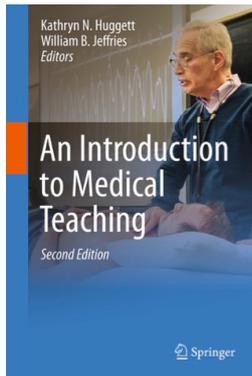
An Introduction to Medical Teaching

by Kathryn N Huggett and William B Jeffries

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Given that most professionals imparting knowledge in various spheres of medicine and health care have had no formal training as teachers, it is both fortuitous and fortunate that overall we seem to be doing a good job. Ironically, while the root *docere* is Latin for 'to teach', most doctors in

academe are, at best, accidental teachers.

Traditionally medical students, as apprentices, were expected to absorb medical lore and skills osmotically, learning by accretion and example, in unquestioning Hippocratic fashion. However, with the current shift towards evidence based medicine built on algorithms and protocols that leave little place for opinionated decisions and personal experience bias, the training imparted to students has to be more structured, defined and ordered. Moreover, with the ever-increasing volume of knowledge it is becoming imperative for students to learn how to access and implement information efficiently, in preference to rote recollection, and how to teach themselves. Hence the worldwide paradigm-shift from 'sage on stage' and 'chalk and talk' towards learner-centricity, self-directed learning, andragogy, problem-based learning, flipped classrooms, small-group teaching, and other buzzwords that attempt to classify modern medical teaching. Curriculum delivery is as important as content and, in a world where data is literally at our fingertips, *how* we teach is increasingly as relevant as *what* we teach.

An Introduction to Medical Teaching, edited by Kathryn N Huggett, and William B. Jeffries, is the best DIY manual I know for the medical teacher. In its second edition (always a good sign) it is, I believe, a bible, a cheat-sheet and a how-to AIO that no rookie faculty should enter medical school without. While scholarly works on medical education theory weigh down library shelves, this handy compilation blends epistemology with common sense, and readability with practicality,

such that my first edition copy is always close at hand, bookmarked, when not borrowed by a colleague. It is the kind of book where the reader is sure to have moments of warm agreement and flashes of equally strong dissent because it cuts so much closer to what we do in our day-to-day teaching than many a grim authoritative tome. It helps us critically introspect on our teaching and assessment practices, and sparks ideas for optimization and improvement.

The second edition of a book faces the discomfiture of being compared not only with its shelf-mates, but also with its predecessor, which, by design, it is an improved, updated and costlier version of. In addition to the old chapters on: *Facilitating Student Learning, Teaching Large Groups, Teaching in Small Groups, Problem-Based Learning, Team-Based Learning, Teaching Clinical Skills, Teaching with Simulation, Teaching with Practicals and Labs, Teaching with Technological Tools, Designing a Course, Assessing Student Performance, Documenting the Trajectory of Your Teaching* and *Teaching as Scholarship*, there are new chapters on: *Flipping the Classroom, Teaching to Develop Scientific Engagement in Medical Students, Establishing and Teaching Elective Courses* and *Designing Global Health Experiences*. The new chapters do not really deal with core material (or else they would be in the first edition too). This is not to say that they are afterthoughts: they are meaningful and integrate well with the rest of the material. One outstanding new chapter, however, fills a gap in the old edition I didn't realize existed, the one on '*the flipped classroom*'. Written jointly by the editors, it is an exemplar of the fusion of comprehensiveness and comprehensibility that characterizes this book and makes it both compelling and impelling.

However, most chapters are carried over from the previous edition with little more than cosmetic changes. For example, the new 'abstract' that begins many chapters is merely a rehash of the introductory paragraphs and is redundant, awkward, and mildly irritating. There are also some colour photographs of teachers and students, more yearbook than textbook, which replace the monochrome classroom shots that dated the

previous edition, and this surely adds unconscionably to the cost.

I picked a chapter at random -never mind which-but one with a new co-author, and compared it with the same chapter in the first edition. Apart from the 'abstract' introductory paragraph grafted at the head, the body text read, paragraph by paragraph, exactly the same. The list of references too was ditto. One unfortunate outcome of the 'update' was that the chapter numbers referenced in the text remained erroneously unchanged while, because of the additions, most chapters have moved on down the line. This hair-splitting comparison may seem an unkind way to review a book but I believe it makes my point: most of the original chapters were so well written that they really need no tampering with. On the other hand, two of the old chapters, on '*course designing*' and '*teaching with simulation*', have been replaced by new authors and give the book some freshness.

If you haven't read this book yet, I would either envy or pity you, depending on whether you planned on reading it or not. If however, like me, you already have the first edition, surely a frayed dog-eared *vade mecum* by now, what do you do? I shall not suggest 'upgrading' by buying the new chapters individually as pdf downloads, because it

doesn't make sense when the entire e-book costs less than three chapters, and the hardcover tree-book only a little more.

Are four new chapters, 65 more pages, and a colourful splash of photographs, worth buying a new edition for? I would think so, especially as, I expect that your old copy, like mine, is falling apart from frequent use and unauthorized borrowings. Despite MOOCs and tablets, nothing fundamental has changed in the field of medical education since 2010, surely nothing that outdates the first edition. Either edition will be valid and useful even a decade hence, and therefore I recommend that anyone looking for a solid grounding in medical education methodology should read this book, and anyone intending to become a better medical teacher should assimilate its precepts. And, as this accessible and instructive book could well become a career-long guide, I suggest that medical teachers (my colleagues included) get one of their own.

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