

A Master course
on Evidence-Based Medicine
and methodology
of health care research:
first year experience

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EBM teaching in Italy: still a missed opportunity

- Problem based approaches face substantial resistance in medical schools curricula in Italy
- Vertical transmission of information
- Separation between basic and clinical disciplines
- Easier to introduce EBM/EBHC teaching through post-graduate specialization courses

Some risks in EBM teaching

- students' expectations of EBM as “magic tool” providing clear cut answers (can “informed decisions” coexist with “explicit uncertainties”?)
- idea that EBM and expert-based sources cannot integrate each other
- creating stat-enthusiasts, “trick-hunting” experts (too much significance, too little relevance and applicability)
- creating Medline enthusiasts (“thorough” searchers of primary literature rather than focused searchers of high-quality systematic reviews)

A 6-weeks part-time program at the University of Modena and Reggio-Emilia

PROFESSIONAL TARGETS

- MDs
- Other graduates working in health care (hospital, GP and management settings)
- 19 participants (14 physicians (health care managers, psychiatrists, GPs, gastroenterologists), 3 pharmacists, 1 sociologist, 1 statistician)

PROGRAM OBJECTIVES

to make the recipients able to:

- find, understand and apply the best scientific evidence to take “informed decisions”
- use local/primary data to formulate hypotheses and make simple evaluations of health care delivery

Our approach: “old” EBM lessons (always good)

- problem-based learning
- a balanced mix of :
 - technical skills (epi, biostat, retrieval and management of information);
 - evaluation of primary and secondary literature;
 - contextualisation into daily professional activities
- small group and plenary theoretical sessions

Our approach (2): some new proposals

- highlighting the key questions: “*what this knowledge adds*” and how it may change practical approaches to health care (avoiding to stress technicalities and “trick-huntings”)
- course ice-breaking (1st day): the “treasure hunt” (given a clinical or organizational scenario, evaluate pros/cons and possibility of *integrating evidence-based and expert-based sources*)
- end-of-the-week seminars, hosting different opinions from field experts on a specific topic (confronting different opinions is always healthy)
- highlighting the importance of “making uncertainties explicit”

End-of-the-week seminars

All hats off to ALLHAT: a massive study with clear messages

John Chalmers

Journal of Hypertension 2003, 21:225-228

Conflict of interest: an editor's jaundiced view

Richard Smith
Editor, BMJ
March 2003

www.bmj.com/talks



The Public Release of Performance Data
What Do We Expect to Gain? A Review of the Evidence

Students' comments

Favourable ones

- relevance and applicability always sought and appreciated
- Small group sessions were generally appreciated, whereas long (> 1,5 hours) plenary presentations were not
- end-of-the-week seminars: useful to listen to different opinions

Room for improvement

- pre-course enquiries about students' expectations and about preferred topics for drawing examples
- clear day-by-day statements of learning objectives
- weekly assessments