Promoting and Teaching the History of Medicine in an Undergraduate Medical Curriculum

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Introduction

• Presentation Goals
  – Describe the Galter Library’s history of medicine seminar
  – Report on the course’s evaluation over time
  – Discuss the impact of the course
  – Describe planning ideas for future changes
• The Northwestern MD curriculum
  – Includes Patient, Physician and Society course
    • “Discuss the social, cultural and ethical aspects of medicine …”
    • “Demonstrate a base of communication skills …”
  – Offered in Years 1 and 2
  – Contains Seminars in Medical Humanities component
    • Required, choose from 20+ seminars
    • Five weeks duration

• History of medicine seminar in place since 2005
Background

- Medical humanities, a curriculum strength
- Discussed many options to participate in curriculum.
- Consulted with Humanities faculty.
- Defined the Galter seminar as student driven, personal exploration, group activity.
• Seminar Objectives
  – “The primary goal of the History of Medicine seminar is to introduce students to the history of their profession through the examination and review of primary texts.”

• Driving theme: what do we learn from history? How does learning from the past inform today’s understanding of medicine?
Seminar Content

• The assignment – Students pick a disease (e.g., general surgery, orthopedics, mental illness/insanity) or health condition (e.g., sanitation) and trace the topic back in time using the Galter collections.
  – 21st/20th c, 19th c, 18th c, 17th c, 16th c or older
  – Summary: what they learned.

• After students select seminar, they report their topic.

• First session: discuss why they chose the topic and what they know about it from 21st century lit.
Seminar Content, cont.

- Make weekly reports to the seminar. For disease, discuss the etiology, treatment, prognosis. For health conditions, discuss problem, social context, outcomes.
- Use Doody book review method.
- Instruction method: drive open discussion, not more lecture.
- Seminars are meant to promote self- and group learning.
Seminar Content, cont.

• Maximum 6 students per seminar
• Have 10-15 minutes for reports, questions, discussion
• Topics:
  – The usual: surgery, orthopedics, cancer …
  – The unusual: Hansen’s Disease, hospital architecture
Seminar Content, cont.

• Added content from Ron Sims, ‘show and tell’ portion of each session:
  – Printing and bookbinding
  – Instrumentation, using the Galter instrument collection
  – History of the medical school – founders, buildings, noted figures (lots of photographs)
  – Special Collection ‘treasures’ – incunabula, most important books in medicine
Seminar Content, cont.

- Unwritten lessons
  - Care and appreciation of rare books:
    - White gloves
    - Pencil, no pens; laptops; phone cameras
    - Role of the library in their education and profession
  - Presentation skills
    - Most presentations use laptop, flat screen display
    - Last presentation must be in PPT format.
  - Personal contact with librarians – here to serve you
Evaluation

• Course evaluation:
  -- Evaluation criteria: attendance (mandatory), participation, knowledge, attitude, completion of assignments
  -- Pass/fail grade
    – Good things about the seminar
    – Usefulness, relevance to rest of med education, to your life as a physician
    – Things that could be changed
Evaluation, cont.

• Uniformly positive comments, suggestions:
  – Concentrate on handling more rare books.
  – Limit workload.
  – Do tour, intro before class to aid picking a topic.
  – Divide historical time better than one week per century; add one extra week to the seminar.
  – Add more social context to medical topics.
  – Explore non-Western medical traditions.
  – Consider more than one topic per student and divide topics over time periods.
  – Don’t change anything.
Evaluation, cont.

• Student evaluation
  – Most students are ‘into’ history and are self-motivated.
  – Most students respect self-learning; they know what to do to succeed in class; they want to learn.
  – Most students extremely bright: smart, articulate, perceptive.
  – Most students extremely talented and skilled re: technology; very creative PPT presentations.
  – Students expect faculty to be prepared.
Lessons Learned

• Students like the rare books part. Many are fascinated with the history of their profession. Want to explore humanities not addressed in undergrad years.

• Students choose the same topics.
  – Some topics are personal – self or family conditions; potential practice areas.

• Librarians relate to humanities.

• Another librarian contribution to the curriculum.
Lessons Learned, cont.

• Issue: book in hand vs. online; seminar could be taught without actual rare books … plenty of content is easily available online.
  – Is there any value gained by handling a rare book vs. reading/seeing content online?
  – Similar to gross anatomy vs. online simulation
  – Touch is valuable to forming perspective.
Potential Changes

• Identify readings in history of medicine – everyone read the same article and discuss it. Relate article to rare book.

• Similar as above: pick topics from major advances in medicine; relate to actual book, artifact.

• Collaborate/teach with faculty: a book person and a science person... add another, more ‘scientific’ perspective to discussion.

• Maintain status quo.
Conclusion

• Librarians make another worthwhile contribution to the curriculum.

• Promote the library’s collections, especially rare books, and the role of the librarian as scholar, ‘historian’.

• Demonstrate value of history in modern medicine.