Lefter to the Editor

A response to "Changes in undergraduate medical education due to COVID-19: a systematic review" – A medical student perspective

Dear Editor,

We read with great interest the article by Lee et al¹ regarding the changes to undergraduate medical education (UME) following the COVID-19 pandemic. The review highlighted the shift from face-to-face (F2F) teaching to virtual delivery of the medical curriculum with teleconferencing and videoconferencing substituting F2F clerkships.

As final year medical students, we have experienced multiple approaches to ensure continuity of UME during our penultimate year of medical school. However, we feel that the authors did not address the impact COVID-19 has had on international elective placements. Electives allow medical students to explore clinical medicine outside of their country of study. Previous research has shown that international placements benefit medical students and host countries through building cross-cultural awareness, expanding individuals' clinical knowledge and skills and also developing global partnerships².

Unfortunately, the COVID-19 pandemic resulted in the cancellation of international elective placements. At a time when international alliances within the scientific and medical community are being challenged, it is essential that we work together to tackle the pandemic and its aftermath³. Many countries have struggled during the pandemic, with healthcare facilities overwhelmed and high mortality rates⁴. Although overlooked, medical students could contribute to the healthcare task force, especially as elective placements occur towards the end of medical school, where students become more competent and independent.

We agree with the authors' recommendations for a robust online curriculum. However, we also urge institutions to consider the benefits of reinstating international elective placements. We recognise the safety implications and restrictions in place for people who want to travel abroad. Instead, virtual global elective placements which are environmentally sustainable are an alternative, as evidenced by Bowen et al⁵. However, despite alternatives to overcome travel restrictions, we recommend medical schools to re-evaluate their approach to supporting students wishing to undertake an international placement.

Conflict of interest

The Authors declare that they have no conflict of interests.

References

- 1) Lee IR, Kim HW, Lee Y, Koyanagi A, Jacob L, An S, Shin JI, Smith L. Changes in undergraduate medical education due to COVID-19: a systematic review. Eur Rev Med Pharmacol Sci 2021; 25: 4426-4434.
- 2) Johnson O, Bailey SL, Willott C, Crocker-Buque T, Jessop V, Birch M, Ward H, Yudkin JS, Global health Learning Outcomes Working Group. Global health learning outcomes for medical students in the UK. Lancet 2012; 379: 2033-2035.
- 3) Perrella A, Carannante N, Berretta M, Rinaldi M, Maturo N, Rinaldi L. Novel Coronavirus 2019 (Sars-CoV2): a global emergency that needs new approaches? Eur Rev Med Pharmacol Sci 2020; 24: 2162-2164
- 4) Pifarré I Arolas H, Acosta E, López-Casasnovas G, Lo A, Nicodemo C, Riffe T, Myrskylä M. Years of life lost to COVID-19 in 81 countries. Sci Rep 2021 Feb 18; 11: 3504.
- Bowen K, Barry M, Jowell A, Maddah D, Alami NH. Virtual Exchange in Global Health: an innovative educational approach to foster socially responsible overseas collaboration. International Journal of Educational Technology in Higher Education 2021; 18: 32.

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