

# Whither pathology in medical education?

## *Academic pathology needs to be reinvigorated*

FOR WELL OVER A CENTURY, pathology has played a pivotal role in our understanding of disease. Its principles underpin many of our teachings in medicine and surgery, for, as Rudolf Virchow — the eminent 19th century pathologist and founder of modern pathology — so aptly observed, “Through the application of its doctrines ... it helps to deepen biological knowledge, and to light up still further that region of the unknown which still envelops the intimate structure of living matter”.<sup>1</sup> In short, an understanding of pathology is an essential prerequisite to an understanding of medicine.

Against this background, it is of serious concern to the Royal College of Pathologists of Australasia that the role of pathology has been downgraded and marginalised with the ascendancy of problem-based learning in Australian medical schools.<sup>2,3</sup> It is true that medical curricula over the previous half century placed too much emphasis on the basic sciences at the expense of the social and communicative aspects of medicine. However, as so often happens when changes are made, the pendulum has now swung too far the other way, to the detriment of pathology and anatomy. As Sir John Lilleyman, past President of the Royal College of Pathologists (UK), recently observed, “Current students are taught everything about grieving, but little about the causes of death”.<sup>4</sup>

By its very nature, problem-based learning involves a multidisciplinary approach to clinical problems.<sup>2</sup> Sometimes the facilitator for problem-based learning sessions is not a medical graduate. Furthermore, pathologists in academia are now in such short supply that those remaining have limited time to participate in these sessions. (In one Australian university with a faculty of medicine, there is only one half-time academic in pathology, and another university no longer has an independent department of pathology.) The end result is reduced exposure of medical students to pathologists and loss of invaluable mentoring. Consequently, more and more teaching is falling on already overburdened hospital pathologists and registrars-in-training. Furthermore, pathologists in private practice are reducing their teaching commitments because of heavy workloads.

Anecdotal evidence suggests that the recruitment of medical graduates into a specialist discipline depends on a number of factors. These include the exposure to that discipline in the medical course and in postgraduate years 1 and 2, and the presence of role models in particular fields. Over the past half century, Australian pathology has been fortunate in having people of stature in academic positions.

A recent Australian Medical Association study<sup>5</sup> showed that lifestyle issues are becoming an increasingly important subject in career selection. With the currently decreasing staffing levels in academic departments of pathology and lack of formal rotations into pathology in the immediate postgraduate years, there is every likelihood that future recruitment of Australian graduates into pathology will be difficult. We are currently awaiting the report into the pathology workforce of the Australian Medical Workforce Advisory Committee. It will provide recommendations on the number of training positions needed in each State to satisfy future workforce requirements.

What can be done to reverse the decline in pathology, particularly in academia? Firstly, the profile of pathology needs to be raised in the pre-university, medical, and general communities. To this end, the College introduced “Pathology Week” in 2002. It involved laboratory tours for secondary-school students, meetings with medical students in some universities, and a dinner bringing together pathologists and leaders in the business community. This year, “Pathology Week” will be held on 10–16 March. Part of the purpose of the Week is to raise the profile of pathology in the wider community: very few Australians know what a pathologist does, despite millions of pathology tests being performed each year. The College has also produced educational material for members of the public and for students contemplating a career in pathology.

The Federal Government, through its Quality Use of Pathology Committee, is seriously considering providing financial support to create teaching modules for use in problem-based learning courses. The aim is to ensure that medical graduates of the future have some knowledge of the proper ordering of pathology tests in clinical practice. The Federal Government has also supported the production of a new edition of the *Manual of use and interpretation*

of pathology tests<sup>6</sup> for use by students and the profession. Both these initiatives, while most welcome, are unlikely to have medical graduates clamouring to choose a career in pathology.

The Academic Advisory Committee of the College has prepared a core curriculum for use in medical schools, although advice from various Deans suggest that a surplus of curriculum content already exists. At the end of the day, the “committee sitters” usually win out in such exercises.


Until such time as academic salaries in all branches of medicine become more realistic and aligned with other sectors in medicine, the future of academic pathology looks bleak. As New Zealand and the United Kingdom are experiencing similar shortages,<sup>4</sup> there is little likelihood that academics can be recruited from those countries. In exchanges of correspondence with various Deans of medical schools, one has suggested that the College should do more to assist in the recruitment of pathologists to our universities. Perhaps it is time for governments and the private

sector to put their support behind academic pathology, to help resurrect the field of pathology and ensure it receives due recognition in the curricula of our medical schools.

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