

Introduction

In order to reduce tobacco related morbidity and mortality, doctors must play an active role in tobacco cessation. In India's medical colleges, little attention is currently paid to the systemic harm of tobacco on organ systems and disease processes, and the negative impact of tobacco use on treatment effectiveness. This clearly needs to change. Baseline surveys in 5 Indian medical schools participating in Project Quit Tobacco International (QTI) found that faculty and students are interested in learning more about the harms of tobacco and to gain tobacco cessation counseling skills as part of doctor's professional role. A fully integrated tobacco curriculum was developed, pretested and piloted by QTI introduced in 5 Medical schools in Kerala and Karnataka. The curriculum is flexible and introduced across the nine semesters of undergraduate medical education. It provides students with the knowledge to tailor cessation advice to patient's health problems, models best practice communication skills, and includes hands-on practical training as a means to build student confidence in being able to carry out cessation as a routine part of medical care.

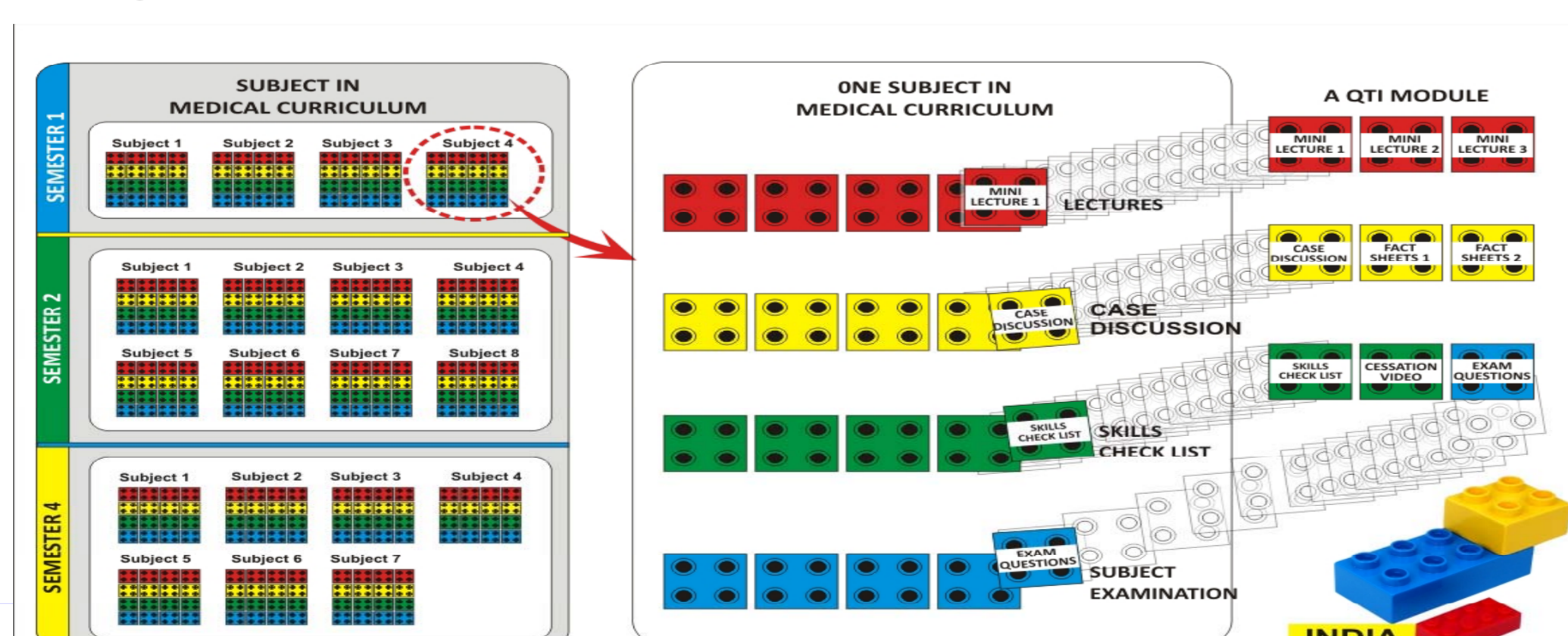
Objectives

- To educate medical students on the impact of tobacco on all organ system and disease processes.
- To provide skills on how to conduct brief tobacco cessation interventions.

Data presented in this poster details Project QTI educational modules and how to access materials and training videos on our website.

Methods-Curriculum Development

- Curriculum mapping was conducted to identify when in the nine semesters different tobacco related subjects could be introduced.
- Tobacco modules were developed which provide information on tobacco epidemiology, tobacco-related diseases, tobacco dependence and brief cessation skills.
- Each module has power point presentations(2-5 mini lectures) with speaker notes, fact sheets for bedside teaching, sample examination questions and case scenarios illustrating cessation counseling of patients.
- Disease-specific clinical videos were developed to model cessation skills to be used as teaching aids.
- Modules and clinical videos were pilot tested and revised.
- Faculty from all schools received training on module implementation and cessation skills, and took a basic cessation skills competency exam.
- Medical students underwent training in brief intervention skills for tobacco cessation.
- After completing 5 BI logs, students skills were assessed.



The modules were designed to be flexible and adaptable to the needs of the lecturer. This modular approach was conceived as a lego or 'building blocks' approach.

A pre-implementation meeting on the contents and how to implement a module in a regular class was demonstrated.

Modules have been distributed to the concerned faculty by the Departments of Community Medicine.

Each mini lecture was evaluated by the faculty and a student representative

Results

- Most faculty and students found the contents of the mini lectures to be very relevant.
- The speaker notes and references allowed the faculty to lecture with confidence.
- The clinical videos were found to be very informative and practical in giving guidance to students on how to help support patients at different stages of readiness in the quitting process. The disease-specific advice provided serves as a model for how to discuss cessation with patients.

Discussion

In the QTI curriculum cessation training is directly tied to modules

- In counseling patients, the doctor needs to establish relevance by tying smoking to patient's immediate health problems and to their long term health risks
- Providing advice requires knowing specific facts about tobacco & its impact on organ systems and its effects on medication efficacy.
- Doctors require training in how to communicate to patients in a culturally sensitive manner and to use examples they can understand.

Training of students

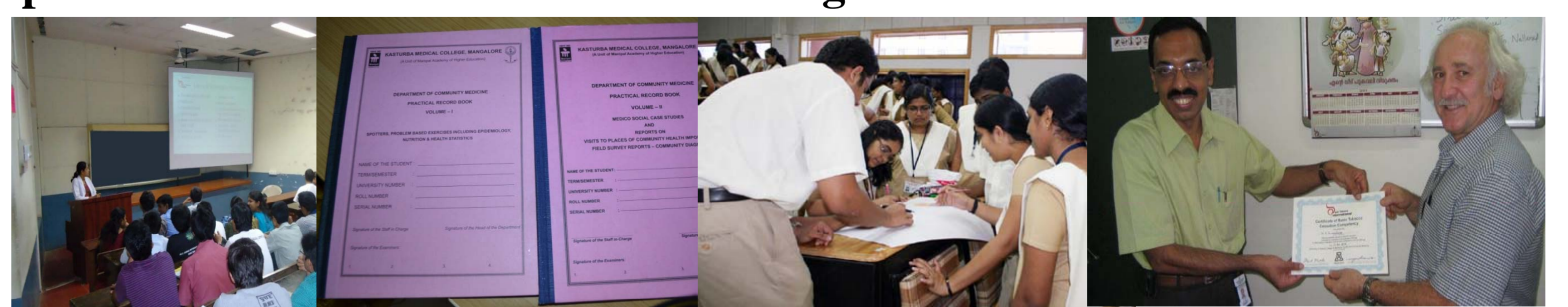
- 5 A's introduced to first semester medical students in 2-3 modules.
- Module implementation and exposure to 14 BI videos modeling cessation counseling with patients having specific health problems for next 4 years (I-VIII Semester) making cessation normative practice
- III-IV Semester- student to practice the BI on 5 patients and fill in the BI logs integrated into the Community Medicine Record books
- VII Semester
 - Student exposed to 5As and 5Rs
 - Trained using a long in-depth video on brief interventions
 - Can view the 14 clinical videos on website as they wish
 - Will have a skills assessment
- Students interested can complete 15 BI logs and take a cessation certification examination and receive certificate from University of Arizona.

Challenges

- To design easy to use mini lectures and demonstration videos for faculty, given high turnover of faculty.
- To have a flexible design anticipating changes in curriculum in keeping with new models of medical education and tailored to needs of each school,
- To adapt to college specific teaching schedules.
- To keep faculty motivated and classes lively.

Conclusion

- We have demonstrated that a fully integrated tobacco curriculum can be introduced in undergraduate medical training in India.
- The curriculum has been well received.
- This is the first example of an integrated tobacco curriculum where students are provided the knowledge to tailor cessation advice to specific patient illness as a means of establishing relevance.



Module implementation BI logs in record books OSCE examination for students Certification as BI Trainer

Acknowledgement

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