FAMILY MEDICINE RESIDENTS’ ATTITUDES, KNOWLEDGE AND SELF-PERCEIVED COMPETENCY BEFORE AND AFTER IMPLEMENTING AN INTEGRATIVE MEDICINE CURRICULUM

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INTEGRATIVE MEDICINE (IM)

- All inclusive term for non-Western medical traditions & non-pharmacological treatments

- IM practitioners (ie naturopathy, homeopathy, chiropractors, massage therapists) are increasing in popularity & formal licensing
Patients are using integrative medicine

Patients “are looking for reliable information about complementary and alternative medicine (CAM) and how to apply it to their health care” (Marcus, 2001).
Physicians are not educated on IM modalities and practices during medical school to know and appropriately ask and engage in that conversation (Marcus, 2001).

“Physicians need to be well informed about… alternative therapies” (Marcus, 2001)
Studies have been done and are ongoing on

1) Methods to providing integrative medicine education at all levels of learning/practice
2) Barriers to receiving integrative medicine education
RESEARCH QUESTION: Does incorporating an Integrative Medicine curriculum into already scheduled didactic time change family medicine residents’ attitudes, clinical knowledge or competency in Integrative Medicine?

HYPOTHESIS: If residents are exposed to integrative medicine topics during scheduled didactic time in their medical residency training then their attitude and knowledge base of integrative medicine will improve. Indirectly, this will translate to increase use of integrative medicine in patient care.
RESEARCH OBJECTIVES

- Assess knowledge and attitudes of family medicine residents of various integrative medicine topics
- Present integrative medicine topics that are relevant to family medicine residents
- Determine impact of formal residency teaching of integrative medicine topics on attitudes and knowledge of family medicine residents
METHODOLOGY

- Where: UICOMP Family Medicine Residency Program
- When: July 2018-April 2019
- Demographic: FM Residents, Ages 25-60, Make up even amongst gender and MD to DO
Pre-Intervention Surveys - emailed
- Knowledge Survey of Integrative Medicine
- Attitudes Assessment- IMAQ: validated instrument (Abbott, et. al, 2011)
- Self-perceived competency survey

Intervention: Inclusion of IM information, didactics, and practices during four prescheduled, mandatory didactic sessions during the academic year

Post-Intervention Survey: same set of surveys after completion of the four didactic sessions
RESULTS
IMAQ (ATTITUDES) AVERAGE SCORE
ON A SCALE OF 1 (ABSOLUTELY DISAGREE) TO 7 (ABSOLUTELY AGREE)
Q28: IT IS ETHICAL FOR PHYSICIANS TO RECOMMEND THERAPIES TO PATIENTS THAT INVOLVE THE USE OF SUBTLE ENERGY FIELDS IN AND AROUND THE BODY FOR MEDICAL PURPOSES (I.E.. REIKI, HEALING TOUCH, THERAPEUTIC TOUCH, ETC.)
COMPETENCY SURVEY AVERAGE SCORE

Comfort Level ranked 1 (not comfortable) to 5 (very comfortable)

Self-perceived Competency Average Score
Q 14. OSTEOPATHIC MANIPULATIVE MEDICINE
## KNOWLEDGE SURVEY
(24 QUESTIONS TOTAL)

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CONCLUSION

- Residents have overall neutral to positive attitudes in accordance to CAIM values
  - Residents may become more selective as they learn more (Frenkel, Ben-Arye, Hermoni, 2004)
- Residents are most comfortable with meditation practices, yoga and OMM
  - Confounding factor: MDs learning more about OMM
- Less comfortable with energy medicine, homeopathy, naturopathy and Ayurveda
- Knowledge did not change
LIMITATIONS/ RECOMMENDATIONS

- Background Information
  - MD v DO
  - Year in Residency
  - Previous IM education/exposure

- Number of IM Didactic Sessions attended

- Length and Quantity of Surveys used

- Timeframe of Study
REFERENCES


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