Academic leagues consultation in patients’ view

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Academic leagues are extracurricular activities organized by students who want to deepen studies in one specific topic. It is where students gain practical care training and knowledge for their careers. Among possible options of activities, some leagues provide ambulatory consultations: the student initially sees patients and then the appropriate treatment is discussed with the supervisor doctor. Patients are constantly being informed of the league work process. They have the possibility to quit the project and return anytime they wish to. Using this model, for at least thirty years, leagues have been importantly contributing to medical student training¹,²,³. However, in literature most articles focus on student-patient relationship at hospital wards activities⁴,⁵, which have a very different proposal from what is seen in academic leagues.

Therefore, the primary objective of this study was to verify patients’ view on academic leagues care and to compare it with the students’ one. Moreover, we also aimed to determine the leagues learning quality according to students’ opinions.

The chosen method for reaching the study’s objectives was a prospective research. Patients and students from three academic leagues of the Faculty of Medicine of the University of São Paulo answered a portuguese version of “Consultation Questionnaire Satisfaction”⁶, with eighteen questions assessing four major areas: general satisfaction, professional aspects, duration of the meeting and student-patient relationship. Semiology learning was analyzed with seven extra questions in students’ questionnaire.

The participation of 73 patients and 53 students in the study leaded us to very interesting findings. The general consultation satisfaction had a high average in both groups. However, when compared, the groups presented a relevant statistical difference: students had overall lower levels of satisfaction with their own consultation (72,1 vs 80,1; p<0,05). On the other hand, collected data revealed that patients not only had a good consultation rating but also found an improvement in their own health evaluation after being attended in leagues (grade for own health, from 0 to 10: 6,3 vs 9,3; p<0,05).

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And despite lesser consultation satisfaction, students positively evaluated the learning aspects of academic leagues. Most students believed that improved their skills on: history taking (100%), semiology (94%), doctor-patient relationship (98%) and clinical reasoning (96%). Interestingly, Pearson correlation showed an inverse correlation between student’s and patient’s satisfaction with the same consultation (r=0.31; p=0.04).

In conclusion, our study shows that students and patients are, indeed, satisfied with the treatment seen in academic leagues. In comparison to previous treatments, patients do feel a better care in these academic spaces. And we found something quite surprising: students are less satisfied than patients. We believe this topic deserves further investigation. For sure, academic leagues are an important place to gain practice skills and they need to be better explored as a source of education and research.

REFERENCES


