



CAME-ACEM Voice/Voix

Dark ages and stewardship – Rachel H. Ellaway

You might be forgiven if you were to think of simulation and simulators as a recent addition to the field of medical education. The incorporation of new materials, robotics, and computers into simulation technologies has radically advanced the capabilities and forms of simulators available to medical educators. However, as simulation centres and programs spring up all over Canada it is worth remembering that simulators have been a part of medical education for thousands of years. For instance, the following is a blog post describing a 'Du Coudray' obstetric simulator from around 1900 that follows an eighteenth century design: <http://bit.ly/1ohMwNy>

Harry Owen's excellent 2012 paper on "Early use of simulation in medical education" (<http://bit.ly/1sCl7VQ>) described the diversity and sophistication of early medical simulators, noting that "much of the 20th century was a 'dark age' for simulation". As simulators were set aside students moved to practice on patients with the inevitable litany of harm and error. This prehistory and subsequent dark age would suggest that we are experiencing a renaissance of medical simulation, an acknowledgement of which suggests that we should look back as well as forward; having abandoned and forgotten it, we had to rediscover the contribution of simulation to patient safety.

The wider implication is that we are likely to have forgotten other things that we subsequently rediscover, often with much surprise and fanfare. Medical education practice erodes as well as grows; perhaps it needs to wax and wane. However, as much as we have a will to innovate and explore new areas, I would argue that we also have a responsibility to be stewards of what we already know and do in medical education. It is therefore worth us reflecting on what role CAME-ACEM might have in the stewardship and preservation of what is good in Canadian medical education as well as what is new and innovative.