1-ES1-4 Pharmacology Educational Symposium

Horizontal relay lecture among anatomy, pathology and pharmacology: experience and problems

Naohiko Anzai¹, Atsushi Yamaguchi², Yuzuru Ikehara³

¹Dept. Pharmacol., Grad. Sch. Med., Chiba Univ., ²Dept. Func. Anat., Grad. Sch. Med., Chiba Univ., ³Dept. Oncol. Pathol., Grad. Sch. Med., Chiba Univ.

Currently, medical schools in Japan are under pressure to reform the curriculum to respond to field-specific certification, which is the quality assurance system of medical education. Among the criteria required by field certification, the curriculum of many medical schools in Japan is one of the points to overcome is curriculum integration. "Integration" here means "to relate learning matters taught in different academic systems or departments to each other, unite and organize". There are two types of "integration" required for the curriculum: "horizontal integration" and "vertical integration". "Horizontal integration" means that by integrating individual scientific systems among basic medicine or among clinical medicine, "Vertical integration" refers to the longitudinal integration of basic medicine and clinical medicine.

Looking at the curriculum integration of nine universities that have published external evaluation results out of universities that have undergone external trial by FY 2015 according to JACME (The Japan Accreditation Council for Medical Education and Evaluation Organization) standards. Although both the horizontal integration and the vertical integration have been partially accomplished at many universities, there are not many universities that have achieved complete integration, which is said to be a future task.

Here, I report on the experience that I gave a lecture on digestive system relays by three departments of anatomy, pathology, pharmacology, to the third grade of medical school.