Elements: in this month’s issue

Medicine Masterclass – primary ciliary dyskinesia

We continue our Sir William Osler Medicine Masterclass Series with a state-of-the-art review by Lobo et al. from the University of North Carolina on the diagnosis and management of primary ciliary dyskinesia (PCD). This Medicine Masterclass Series features an international authority providing an invited overview of a selected disease. The selected diseases are often multi-system in nature and would not have had recent clinical reviews published elsewhere in medical journals. The QJM launched the series earlier this year with a comprehensive review of Leishmaniasis by colleagues from Ohio State University.1 Future topics for invited reviews include α-1 anti-trypsin deficiency and sarcoidosis. As the Journal of the Association of Physicians of Great Britain & Ireland, I invite members to consider writing such an authoritative review on the diagnosis and management of a selected disease.

Undergraduate research experience and graduate entry medical students

Graduate entry has been the mainstay of medical student education within the USA. It is only in more recent years that it is has become a more significant option for medical student education in Europe. In a paper by Duggan and colleagues, a comparison is drawn from the performance of direct-entry (DEM) versus graduate-entry (GEM) medical students with regard to their performance in the research-based module.

The importance of undergraduate research experience for medical students is well recognized by academia. It is also recognized that there has been a significant decline in the uptake of academic medical careers. It is in this context that the findings by the authors that GEM students do significantly better in their research modules compared to DEM students, are of interest. The precise reasons for this finding are not clear and will require further study. The authors highlight that if it is the case that GEM students demonstrate increased motivation and commitment to pursuing research, then how can this be nurtured within a future attractive academic training structure?

Clinical Pictures in the QJM – a valuable educational resource

The clinical pictures section has been an integral part of the QJM over many years. It has highlighted typical and atypical features of disease, clinical signs of drug side effects and classical radiological features of selected disorders.2–6 It is a valuable historical educational resource.

In more recent times the Journal has tended to publish as clinical pictures the rare and atypical presentations of disease. To redress this balance we are seeking authors to consider submitting classical signs of disease, be they clinical, radiological or biochemical, as clinical pictures. Our aim is to build up an educational repository of the classical and not so classical signs of disease which we will make available to both undergraduate and postgraduate medical students via our QJM website in the not too distant future.

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References