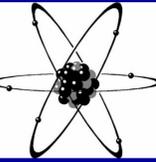


Back to Basics: Does focusing on the fundamentals of Energy Medicine increase receptivity?



Authors: Elizabeth A. Artrip, MD and Neela W. Sandal, MD

Introduction

Energy medicine (EM) is a fascinating and substantial area of study under the integrative medicine umbrella and the one most often met with resistance among resident physicians. Current literature highlights strategies for initiating attitudinal changes towards complementary and alternative medicine by increasing learner engagement and developing conceptual frameworks as well as experiential education.^{1, 2} Literature is lacking regarding resident receptivity and whether scientific framework is as, or more, effective than conceptual framework alone. This project hypothesizes that providing education of scientific mechanisms and foundation theory rather than standard exposure to clinical technique, practice, and outcomes increases physician receptivity to Energy Medicine modalities.

Methods

19 family medicine residents of all years from UofA program with access to the Integrative Medicine in Residency (IMR) modules and exposure to EM at baseline were assessed for receptivity of Energy Medicine with a survey developed from existing validated surveys³. Survey questions related to perceptions of EM understanding, utility, efficacy, and state of current education. Independent validity was not achievable within the scope of this project. To prevent answer recall bias the educational lecture and repeat survey were given 1 month later. Data was analyzed using two tailed z testing.

Results

Across all three resident years no category showed negative changes, 2 categories showed no change (sufficient education and EM efficacy), and all others showed positive change. The largest increases were noted in understanding of indications, desire to learn more, and that EM is science based. The 3rd year class showed the most change in receptivity. Due to small sample size data was not significant and power was not achieved.

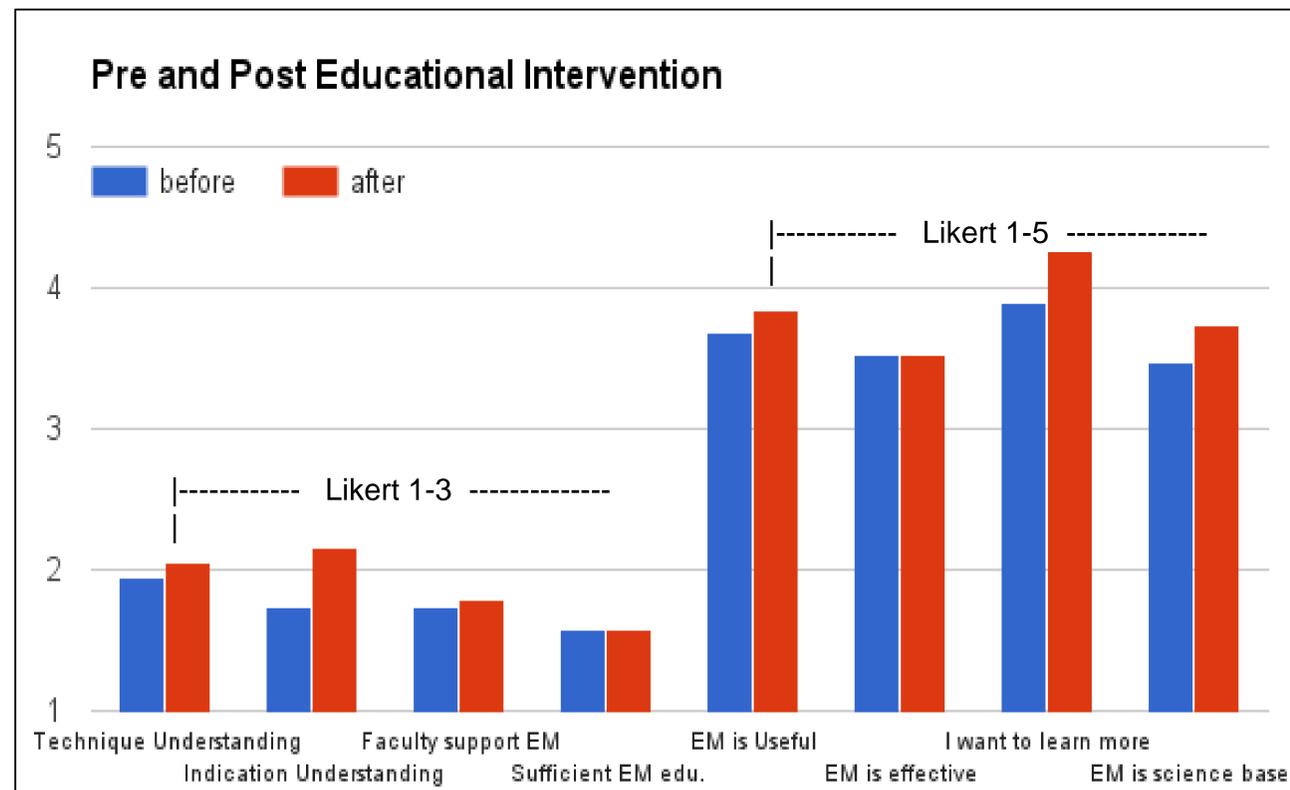


Fig 1: Combined PGY1-3 Likert scale data

Acknowledgments

This project was mentored by Patricia Lebensohn, MD, whose help is acknowledged with great appreciation.

Conclusions

This preliminary study indicates that providing a scientific education increases resident receptivity to EM. The lack of significant pretest differences among class years indicates that residency largely does not affect EM knowledge or receptivity despite the IMR. Due to the small scale of the study statistical significance was not achieved. However, trends clearly emerged as positive – an important guiding step in the development of overall Integrative Medicine (IM) teaching. Perhaps most important is the increased desire to learn more post-intervention. Future study must expand to other physicians across the range of education, specialty, and prior exposure. The growth of IM as valuable patient care requires the strongest scientific minds of the medical community, and this study indicates that teaching the scientific underpinnings of IM may be critical in achieving true understanding and thus gaining widespread acceptance.

References

1. Witt CM, Withers SR, *Research training in IM: how can we make teaching and learning in research methods more sustainable and engaging?*, *Explore*, 9(5), 279-285 (2013).
2. Hewson MG, et al, *Integrative Medicine: implementation and evaluation of a professional development program using experiential learning and conceptual change teaching approaches*, *Patient Educ Couns*, 62(1), 5-12 (2006).
3. John Chi-Kin Lee, *Teacher receptivity to curriculum change in the implementation stage*, *J Curriculum Studies*, 32, 95-115 (2000).