

KNOWLEDGE RETENTION AFTER A CONTINUING MEDICAL EDUCATION COURSE ON TOTAL MESORECTAL EXCISION FOR SURGEONS

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The purpose of this study was to determine whether knowledge gained (as determined by a formal course test) by surgeons in a continuing education course on total mesorectal excision and rectal cancer management is retained one year later.

A formal course test had been previously developed and validated. The test evaluated course contents including pelvic anatomy, surgical techniques, imaging, pathology, adjuvant therapies, and cancer and functional outcomes. Validation was determined by absence of change in pre- and post-test scores of the "expert" course instructors ($n=8$, $p=0.6$) and by a linear correlation in test scores with increasing level of general surgery resident training ($n=16$, $p=0.001$). Significant learning by the 58 surgeons taking the course had been demonstrated by improvement in test scores from before the course (mean score 19) to after the course (mean score 25.3, $p=0.001$), out of a possible 33 total mark. At one year after the course, those course participants ($n=44$, 76%) that had provided post-course contact information were asked to complete the course test again.

Responses were received from 18 surgeons (41% of those surveyed, 31% of the original course participants). Mean score on the test after one year was 23.8. Compared to the immediate post-test scores, there was no significant knowledge loss over the year ($p=0.09$).

We conclude that knowledge acquired during a continuing education course for surgeons on total mesorectal excision and rectal cancer management is retained one year later.