

DIGITAL DISTRIBUTION OF MEDICAL EDUCATION

Online learning may be the direction of travel for medical education but it is by no means a straight road. Two tipping points in particular suggest the old order is giving way to a new, digitally-engaged world that is affecting the role of medical society conferences.

One tipping point is that there are now more physicians wanting to study online than don't. This was recently confirmed within the cardiology community in a survey by M3 Europe where the average figure for wanting more online learning across the five top EU markets was 51 per cent.

This brings us to the second tipping point, which is a change in how physicians choose to attend medical conferences. This was illustrated at the 2014 European Society of Cardiology (ESC) congress in Barcelona, where for the first time the number of virtual attendees exceeded those who were physically present. Official stats show 24,622 healthcare practitioners (HCPs) actually attended the event and 25,178 used the official ESC 365 website over the five days. In 2013 there were 17,567 virtual attendees, showing a year-on-year rise of 30 per cent.

Cardiology is by no means a particularly online-savvy area of medicine and the trends outlined above can be seen across all therapeutic areas. And while they have been discussed at length for years, the effect of having a majority or critical mass of what I call 'digital native' physicians is proving more disruptive than many of us imagined. Such physicians not only expect more and better online learning but they also want to help shape conference programmes. They are more selective about the conferences they attend and tend to see them as 365-day interactive conversations rather than events that take place at a fixed place and time.

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Perhaps most significantly, they are ushering in the hybrid medical conference, catering to the demands of both physical and virtual attendees, and prompting major upheavals in how medical conferences are organised, as well as questions about their purpose. A market research survey conducted by the ESC after its 2014 congress provides some clues as to how this landscape is evolving when it asked its members why they had attended. Their reasons are no longer primarily to find out what's new, the latest research findings and the most exciting science. Now, it is much more about networking and meeting up with colleagues.

This is not to say that physicians don't appreciate the medical societies as a source of education. The M3 Europe survey of 155 cardiologists from, in equal numbers, the UK, France, Germany, Italy and Spain, found an overwhelming preference for medical society conferences when asked what forms of education they value most. But given that the content of meetings is now widely disseminated via digital channels and social platforms, there is no longer the same need to attend in person to keep up with the latest advances in their area of medicine.

Indeed, the rise in social media use at medical conferences has been nothing short of explosive. There were 2,600 unique Facebook and Twitter users at the 2013 ESC congress, for example. That figure rose by 762 per cent to 22,400 at the 2014 event. Interactions on these two platforms, meanwhile, increased by 253 per cent from 12,248 at the 2013 meeting to 43,196 in 2014.

REGIONAL VARIATIONS

These trends in how medical knowledge is disseminated stem from attitudes to online learning, which in turn stem from general levels of proficiency in using the internet. And these are not evenly distributed across the EU5 markets. The M3 Europe survey found, for example, that while 51 per cent of EU5 cardiologists want more online continuing medical education (CME), there are significant regional variations, with 73 per cent of Italians calling for this and only 10 per cent of Germans.

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The reasons Germany lags so far behind other European countries include slow connection speeds, low-quality online CME and a general reluctance to use digital tools, originating from excessive societal concerns on data protection and privacy. These factors also explain why 84 per cent of German cardiologists remain in favour of traditional face-to-face educational methods, far higher than the EU5 average figure of 45 per cent.

As far as the quality of CME programmes is concerned, the recent eyeforpharma meeting in Barcelona found a general consensus in favour of greater flexibility in the learning chunks. Many modules insist that physicians study in blocks of 45 minutes to an hour, which, according to the M3 Europe survey, instantly rules out significant numbers. This found, for example, that anything over an hour is only going to appeal to 16 per cent of target audiences, a figure which rises to 18 per cent in Italy and falls to zero in France.

VENERABLE TO VULNERABLE

These regional variations in the propensity of cardiologists to study online, interesting as they are, don't affect the deeper paradigm shifts occurring in medical education stemming from the extraordinary rise in digital channels for disseminating medical knowledge from conferences. The disruptive effects of this on the venerable academic institutions that host them is compounded by the fall in revenues they can expect from pharma in terms of fewer sponsored physicians, exhibition stands and other facilities they have traditionally funded. How the effects of this will pan out is unclear but the process of change and adaptation has certainly started.

This article is in response to the M3 Europe report '*Optimising patient outcomes through physician education*', published on 26 March 2015. [Access the full report >](#)

ABOUT THE AUTHOR

Len Starnes is a digital healthcare consultant with over 20 years of experience in directing digital strategies in the pharmaceutical industry. Positions held include head of digital marketing & sales for Bayer Healthcare Pharma and head of European e-Business for Schering AG. His geographical areas of responsibility have embraced the European, North American, Asia Pacific and Latin American regions.

Len's specialities include the impact of physicians' social networks on pharma marketing, the implications of collaborative healthcare on drug discovery, digital opportunities in emerging markets, and participatory medicine.

Len is an ePatient with a fervent interest in stroke, thrombosis and atrial fibrillation.

He is also a regular speaker, chairperson, moderator and expert panel member at digital healthcare conferences in Europe, the US, the Middle East, and the Asia Pacific region.