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Anatomy: An Essential Course for Future Surgeons

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Editorial

Globally, students with top cognitive performance and high intellectual capacity usually have as their main goal to study medicine. However, once students get enrolled in Medical Schools, their academic performance varies widely [1]. Some scholars believe that this is due to educational programs. Students usually perceive anatomy as a more challenging subject than other. Thus, the resulting anxiety surrounding this perception may have a significant contribution towards a poor performance in anatomy course. Although teaching personnel has the perception of a normal balance between teaching and learning, reality testifies that performance grades in pregraduate courses are often low [2]. Medicine evolves with giant steps towards a new era and anatomy tries to cope with new challenges. Although engagement with technology-enhanced learning programs in anatomy seems to provide clear evidence of better learning resources, there is a failing gab when it comes to provide comprehensive causative evidence [3]. However, it is not only technology which provokes the need for anatomy to be evolved. New teaching approaches endeavour to cherish anatomy into the spotlight. Thus, new medical terms arose in that purpose and "Clinical anatomy", "Surgical anatomy", and "Descriptive anatomy" were born. As those terms emerged, anatomy theoretically regained its cardinal position in pre-clinical courses. On the other had, students faced new psychic barriers trying to acquire new knowledge which always have been taken as difficult to be acquired. The integration of different learning approaches, new technologies, online teaching and course activities which could be combined with traditional face-to-face teaching methodology, may advance educational experience [4]. Anatomy has always been a leading basic medical course, the foundation for a physician to be completed as a health scientist. Studies suggested that anatomy demonstrator programmes provide prevocational physicians with unique opportunities to improve their anatomical knowledge, to develop surgical skills and competencies in a non-clinical setting, and to ameliorate teaching skills and scholarly activity [5]. Blended education programs allied to bedside teaching, incorporating multimedia, e-learning, web material, simulators, multidisciplinary approaches, pre-prepared materials for case based discussion

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and lectures and tutor notes, are implemented for trainee and specialized surgeons [6]. Apart from the fact that the whole cluster of educational interventions are based upon anatomy, an anatomy workshop itself as a supplementary education with an emphasis on the basics may further improve performance [7]. All medical disciplines, from primary health service to surgery, are based upon a keystone... "anatomy". Despite the fact that technology infiltrated medicine to replace human skills, learning experience from the old school anatomy to clinical anatomy and from microanatomy to 3D anatomy, it all comes to macro/ micro forms, structures, shapes, sizes and locations. Modern era anatomy will have to succeed in teaching challenges if it is for physicians and especially future surgeons to achieve higher level of treatment success. Surgeons should above all be skilful anatomists, as in-depth knowledge of anatomy and surgery are complementary to each other both in class rooms and operating rooms [8]. Medical students positively evaluated a Surgical Anatomy Course as useful and beneficial regarding the understanding of various anatomical structures, a necessary addition for further surgical education [9]. Furthermore, studies indicate that anatomy demonstrating delivers important benefits to early surgical trainees. New teaching strategies should always be considered for trainees' anxiety and poor performance to be avoided. Knowledge of clinical anatomy as a basic core subject is fundamental for all surgeons and as hard as it may be, learning of both basic anatomy and surgical anatomy is paramount.

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