

## From the editor • Van die redakteur

## **Medical Education**

The process of Medical Education and its effect on medical students and the practice of medicine, is getting increasing attention. Every system and phase in history is based on its own presuppositions. These are in constant need of revision and adaptation to grow away from unforeseen complications and inadequacies of previous sets of assumptions. Those things we take for granted.

The Flexnor report of 1910 brought us great growth and advance in medical education and practice. Today we are commencing a process to balance the unbridled growth of science and technology that resulted from that era. Not to undo these advances but to place them in a wider context. To place them in cohabitation and equality with the humane and greater ecological balance.

We are also in an era in which there is renewed interest in the process of education. Not only *what* is taught, influences our future ability to practice successfully and with fulfilment, but also *how* we are taught.

Sometimes all of us experience unease with our ability to manage a subject or problem in practice. Kriel et al<sup>1</sup> point out in this issue that this does not necessarily mean we are stupid or ignorant. We might have gone through a constipating process in which our hard-earned knowledge is locked up in an impractical format.

To achieve the necessary changes in Medical Education in which "science" in its traditional sense gets out of the solo driving seat and in which educators reflect on long practised educational practices and traditions, is very difficult.

Medical professional education is a very conservative business which gives us many safeguards against rapid and rash changes. We as Family Practitioners are often very impatient to see the changes we believe are necessary. Perhaps we will be less agitated if we kept in mind that medical culture and the educating of persons into that culture, as a rule changes like all cultures over decades rather than in a matter of years. In the interim it is important for us to debate and try out the new ideas that come as we face the unforeseen difficulties that the presuppositions of the past have donated to the present.

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**Reference** Kriel JR. Teaching medicine upside down, *S Afr Fam Pract* 1988; **9:** 41-48.

