From the Editor's Desk

WHO WILL TEACH?

Medical education and training is under scrutiny. Questions are being asked as to whether course curricula meet the needs of modern societies and their health care services. Recently these questions were explored at two conferences focusing on Australian medical education and training — *Rescuing medical education* and *Medical education towards 2010: shared visions and common goals*.

Themes that emerged included the tensions between the priorities of medical education and health care services; the inflexibility of postgraduate pathways and the time required to reach independent practice; the balance between soft and hard sciences and between didactic teaching and problem-based learning; and the increasing imbalance between the student and patient or teacher ratios and the current resource capacity to accommodate present and future student numbers. But above all is the question of whether a 100-year-old educational system is appropriate for the health requirements of the new millennium with its burdens of chronic diseases and ageing.

Attention was also drawn to the disappearance of the clinical teacher. This is attributed to many factors — academia's ambivalence towards the value of teaching, waning interest in clinical academia, and the time-poor world of clinicians caught between meeting service demands and teaching responsibilities. Last, but not least, is the loss of professional kudos of appointments to teaching hospitals.

Does any of this matter?

It depends on how important we think teaching by clinicians is for the survival of the medical profession. Our profession has long been sustained by renewal through teaching and nurturing the next generation. Walk away from this commitment and the insidious pressures to deprofessionalise medicine can only succeed.

The question is clear. If doctors will not teach, who will? And at what cost?

Martin B Van Der Weyden

LETTERS