

LETTER

Improving education on transfusion medicine in medical school: A perspective from students

We read with great interest the article by Al-Riyami et al. which highlighted an inadequacy in transfusion medicine (TM) education in the global medical curricula.¹ With approximately one in 20 patients falling victim to preventable harm,² often from the medications that healthcare professionals themselves provide, we agree that it is paramount that education on transfusions and their associated risks is improved.

Al-Riyami et al. comment on lectures and seminars being the most widely used education modalities within their sample, while simulations occur far less frequently.¹ These findings resonate with us as current medical students in the United Kingdom where transfusion teaching has similarly been approached largely with academic lectures. The focus is primarily on the indications for various transfusion products and what they constitute, rather than gaining confidence and experience safely transfusing a patient. Despite its importance, this runs the risk of underemphasizing the very real and severe clinical implications of incorrectly transfused medications and blood products.


We think that in light of Al-Riyami et al.'s findings, there is an opportunity to further explore the perceptions of transfusion-associated harm in medical students relative to the mediums with which they were taught. When simulated scenarios have been cited to increase emotional engagement and enhance learning experiences,³ we find it surprising that there appear to be few medical schools that choose to focus on communicating the risks and responsibilities involved in transfusion with this teaching approach.

With many healthcare professionals transfusing their patients in busy hospital environments, it is imperative that medical students feel confident in their knowledge when in these stressful settings and are consequently able to fully grasp their responsibility as clinicians in keeping

patients safe and avoiding harm. We believe that further opportunities to practice and learn transfusion in safe and controlled simulated settings where stressful environments can be mimicked, will better equip medical students as junior doctors.

CONFLICT OF INTEREST

The authors have no conflicts of interest to declare

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REFERENCES

1. Al-Riyami AZ, Louw VJ, Indrikovs AJ, Nedelcu E, Bakhtary S, Eichbaum QG, et al. Global survey of transfusion medicine curricula in medical schools: Challenges and opportunities. *Transfusion*. 2021;61(2):617–26.
2. Panagioti M, Khan K, Keers RN, Abuzour A, Phipps D, Kontopantelis E, et al. Prevalence, severity, and nature of preventable patient harm across medical care settings: Systematic review and meta-analysis. *BMJ*. 2019;366:l4185.
3. Al-Elq AH. Simulation-based medical teaching and learning. *J Fam Community Med*. 2010;17(1):35–40.