

LETTER TO THE EDITOR

Analysis of immediate student outcomes following a change in gross anatomy laboratory teaching methodology

To the Editor:

We read the publication by Afsharpour and colleagues with great interest. The authors concluded that "Students utilizing virtual dissection tables scored higher on laboratory examinations than students having models or cadavers. However, they displayed a similar testing competency in lecture examinations, suggesting a possible change in laboratory examination difficulty between the cohorts but a similar knowledge base." The use of new method for teaching gross anatomy is very interesting.

The virtual table might reduce the problem of having insufficient cadavers, which is common in several settings. In a recent report, students who passed a virtual dissection program usually approved of the technique. Nevertheless, an important concern regarding the use of a virtual dissection table without an actual cadaver is the lack of real experience in "touching" a real human body, which we feel is a necessary part in promotion of future clinical skills. Finally, the investment of a virtual dissection table might be a problem in poor countries. In our experience in a developing country with limited resources, textbook learning, drawing sessions, and anatomy museum visits are classical methods that are still effective if it is extremely hard to find real cadavers for dissection.

Beuy Joob Sanitation 1 Medical Academic Center, Bangkok, Thailand Viroj Wiwanitkit Dr DY Patil University, Pune, India References

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- 2. Deng X, Zhou G, Xiao B, Zhao Z, He Y, Chen C. Effectiveness evaluation of digital virtual simulation application in teaching of gross anatomy [published online ahead of print April 18, 2018]. *Ann Anat*. doi: 10. 1016/j.aanat.2018.02.014.

In Reply:

We believe that we discussed the matter of our results. Our case study shows the results of changes in gross anatomy lab teaching methods in a chiropractic program. As it has been discussed, using virtual dissection tables at institutions that have the resources to afford them may lead to better lab scores. It goes without saying that besides the advantages of virtual dissection (among which are the 3D details of body structures, no fumes, no damaged structures, no required dissecting skills, a quick approach to any structure at the tip of the finger), there are disadvantages to this method, one of which may be the lack of touching and feeling the textures of real human body structures. Therefore, we feel it is advantageous to have state-of-theart prosected cadavers available, besides the table, for students in related health fields to observe and feel the texture of body structures, as we do at our institution.

> Salman Afsharpour, PhD Life University College of Chiropractic Marietta, GA

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