

TEACHING CLINICAL PHARMACOLOGY TO OUR MEDICAL STUDENTS: A POINT OF VIEW

Pages with reference to book, From 80 To 80

Sir,

With the number of powerful and toxic drugs increasing, rational drug therapy is assuming more importance. Medicine as long accepted a systematic approach to diagnosis yet the notion, that course of therapy is a routine consequence of the diagnosis, has recently been questioned. Clinical application of basic pharmacology in medical curricula for undergraduates and postgraduates is now getting more attention with educators now realising that therapeutics should be approached with diligence². The medical students should receive some formal instruction in clinical pharmacology, to enable identification of its certain 'core' principles. General principles of clinical pharmacology can be identified as drug-drug interaction, drug therapy in renal and hepatic insufficiency, pregnancy, nursing mother and infant, drug usage in geriatric medicine, management of overdose and intoxicated patients, etc. Besides learning core principles, the student must learn skills, such as finding appropriate texts, reading scientific papers, searching the literature for recent primary clinical studies and solving pharmacokinetics problems. These skills are necessary not only to practice therapeutics now, but also enable the students to modify his/her therapeutic approach as new drugs are introduced⁴. Teaching clinical pharmacology embodies an attempt to integrate the knowledge of basic pharmacology with an understanding of diseases, in order to develop a maximally effective and minimally toxic therapy. As the drug armamentarium is expanding, it becomes and minimises toxicity, Students must learn to approach traditional drug therapy in a manner valid for the future drugs in all specialities and subspecialities^{5,6}. No teaching course can compass all therapeutics and current information would become outdated as new drugs replace the old ones. Clinical pharmacology has brought two broad themes into mainstreams of medicine today, the reliance on scientific data to make rational therapeutic decisions and the attempts to individualise drug therapy. Both of these are ideally translated into the practice of medicine.

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