Postgraduate Education

Lifelong learning is a responsibility and a challenge for all practicing physicians.

BY LOUIS B. CANTOR, MD

s in other specialties, medical knowledge about glaucoma is growing, and therapeutic approaches are rapidly changing. In order to continue to provide current, evidence-based care, we physicians must constantly strive to keep abreast of the advances in our field. A common statement during medical school and residency training is that, within 10 years, 50% of what we believe we know today will be either proven incorrect or superseded by new data and technology. It is therefore essential that we all strive to incorporate new information into our care of patients.

Fortunately, many opportunities are available to us to update our knowledge, learn about new findings, and become proficient in the latest diagnostic technologies and medical, laser, and surgical approaches to managing glaucoma.

OURSELVES

We are our first and most important resource. We must maintain our curiosity and habits for learning new information and eschew complacency. Catching up is harder than remaining current.

LOCAL RESOURCES

Within our practices, we can discuss new techniques with our colleagues. In addition, our local communities or departments of ophthalmology often offer lectures and other continuing medical education courses. We can also attend our state societies' annual meetings for updates on our field and skills transfer. Journals and other scientific publications delivered to our mailboxes and available online provide another source of information.

NATIONAL RESOURCES

The American Academy of Ophthalmology (AAO) and our subspecialty societies also offer opportunities for educational engagement. Those of us who are members of the American Glaucoma Society (AGS) can learn

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about new findings and approaches to glaucoma care through discussions with our colleagues, not just at the society's annual meeting, but year round through the AGS-Net listserve. In recent years, surgical approaches to the management of glaucoma have received greater emphasis at the AGS Annual Meeting.

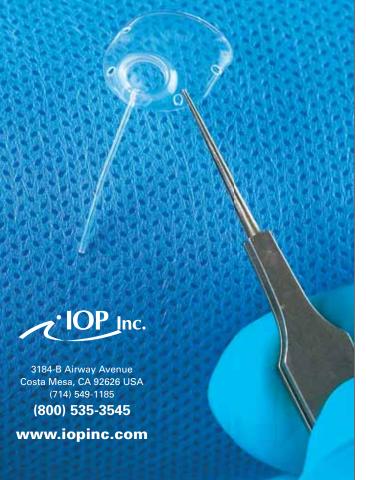
Some of the AAO's educational efforts are broadly directed at maintenance of certification, but each of us can create an individualized learning plan through the ONE Network to addresses our particular needs. We can update our knowledge of glaucoma as well as comprehensive ophthalmology by obtaining the most recent volumes of the AAO's Basic and Clinical Science Course, subscribing to Focal Points, participating in the society's ProVision series, and using the AAO's self-assessments. ProVision 4 contains nearly 500 illustrated questions and discussions of various topics, including glaucoma. It is available in print or as an online product. Focal Points modules discuss specific topics of interest to the practicing ophthalmologist. Many of these subjects involve aspects of glaucoma diagnosis and management. The selfassessment questions and programs provide a series of examinations through which to evaluate our knowledge.

The AAO's Practicing Ophthalmologists Learning System is a comprehensive, online, lifelong learning program available to all Academy members. Each of us can create a learning plan and quickly choose among a vast array of topics. We can access at our leisure our individual areas of practice emphasis, including glaucoma. Self-



Double plate performance

Single quadrant simplicity



COVER STORY

"Acquiring new surgical skills requires special diligence. ... We all must be willing to change what we do, or we risk not being able to offer our patients the best possible care."

assessment questions are provided, and continuing medical education credit is available.

New algorithms for assessing visual field abnormalities or the structural changes in glaucoma are being developed. We also have a duty to ensure we are using advances in diagnostic technologies to assess our patients more accurately and provide them with the best information possible for making decisions on treatment.

Acquiring new surgical skills requires special diligence. Some of us may be early adopters, whereas others of us are more comfortable using new surgical approaches once they become established. Either way, we all must be willing to change what we do, or we risk not being able to offer our patients the best possible care. In order to remain current, we must read about new surgical procedures and devices in peer-reviewed journals and professional publications such as Glaucoma Today. We can also learn from our colleagues through informal discussion and presentations at meetings. When new surgery involves a novel device, the manufacturer often offers wet laboratories or the assistance of surgical representatives in our ORs. Moreover, the AAO will frequently plan instructional or skills transfer courses. Visiting our colleagues in their offices and ORs affords us another direct opportunity to learn new surgical techniques. In addition, Eyetube.net allows us to access educational videos online.

CONCLUSION

Our professional standards require that we each assume the responsibility to be lifelong learners. Various tools and resources are available to assist us in this important task. The ultimate goal is to ensure that we are providing the best and most current care to our patients. \square

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