Teaching clinical medicine, which begins with preclinical courses for undergraduate medical students, aims to develop medical interviewing and physical examination skills in future doctors. The students attend placements in various healthcare settings and interact with patients and other healthcare professionals to learn the practical application of their theoretical knowledge in a clinical setting. The goal is to prepare doctors who are good clinicians with a sound understanding of the basic sciences and practical and interpersonal skills.

Bedside teaching is the most effective method for teaching clinical and communication skills. However, there is a concern about a sharp decline in trainees’ clinical skills. There is a scope for improving the educational approach to teaching content knowledge and clinical reasoning skills.¹,²
The cause-and-effect relationship helps make sense of the world’s events, actions or situations, natural phenomena, and human behavior. During primary education itself, students are taught to develop an understanding of the cause-and-effect in everyday life. It is necessary to encourage medical students to use cause-and-effect thinking while conducting clinical history-taking and physical examinations.

Complex cause-and-effect relationships result in various clinical events, with a condition being a cause of one and a result of another. A clinician must consider the cause-and-effect relationships within complex clinical events for problem-solving. With proper reasoning and associating the consequences, a clinician needs to think flexibly to analyze difficult clinical situations. Therefore, for successful physicians, developing this cognitive ability to think about cause-and-effect in clinical cases allows them to anticipate possible positive and negative consequences and create clinical problem-solving skills.

For analysis of the cause-and-effect relationship, one would start with an event and then reason backwards for cause and forward for effect. It is essential to develop cause-effect thinking in medical students. Cause-effect thinking means considering how one thing leads to another. The clinician should look for the cause-and-effect in clinical evaluation whenever a clinical sign is detected. For example, finding anemia in a subject, one would think about why it happened to discover causes and to see effects; one will think about the impact of anemia on the body. Thus, the student could draw a cause-and-effect thinking map. This approach will help students learn better to apply the knowledge about the subject in clinical practice. Therefore, there is a necessity to emphasize cause-and-effect thinking in clinical medicine.

References