COVID-19 and Medical Students

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Dear Editor,

We read with great interest the article by Taghrir et al1 identifying the level of COVID-19-related knowledge and self-reported preventative behaviors and risk perception of Iranian medical students. From experience as medical students at Imperial College London, we too share the anxiety and uncertainty that our colleagues have expressed. Our knowledge and understanding of the issues surrounding the pandemic has been through the university’s correspondence and the unremitting news reports we hear every day.2 As a final year medical student and a researcher, respectively, we have identified some important factors that may implicate the study’s validity which the authors may consider for future developments to this research.

Firstly, it is difficult to interpret the method for survey participants’ recruitment used in this paper and so, we infer that the questionnaire was sent out to all 5th-7th year medical students who were on clinical placements in hospitals. No grave detail was made about the distributing body who sent out these questionnaires, whether it be hospital administrators directly to clinical students or the medical school themselves, thus, limiting the conclusions that can be drawn about the sampling being free of bias, affecting the internal validity of the study. Similarly, the 3-day window used to collect the surveys may potentially add to the sampling bias. Perhaps the sampling selected students who were not working long shifts during the 3-day window when responses were collected, which is reflected in the responses of students from emergency room being only 15%.

Furthermore, the use of closed-ended questions, although easier for both participants and researchers, may implicate the results with bias,3 as the use of T/F and Y/N questions allows participants a 50% probability to guess the correct answer than indicating an “I do not know”, possibly confounding the results. Based on our clinical experience, using an open-ended question style is effective in gathering the most information. The use of a control sample may have been valuable in distinguishing the variances in knowledge between medical students and a comparable cohort in the general population, as the accessibility to knowledge and information related to COVID-19 is limitless and most people are well-informed on this matter. The authors refer to the questionnaire being based upon a similar study conducted on the Middle Eastern Respiratory Syndrome (MERS) with healthcare workers.4 While sharing some similarity in symptoms and etiology, there are distinct differences between MERS and COVID-19, which may poorly inform on actual COVID-19 specific related knowledge.

The study is an excellent exploration into the understanding of COVID-19 from the perspective of medical students working on the front-line of health systems and the results are pertinent for advocating support and safety for those students. In the UK, most medical schools have cancelled clinical placements, but measures have been implemented for early provisional registration to final year students.5 It is especially during such unprecedented times, when there has been an astounding response from medical students wanting to support the National Health Service (NHS), through volunteering at hospitals to facilitating researchers. To echo the authors in their final statement, it is imperative to ensure medical student well-being, by addressing concerns regarding their self-protective behaviors.1

Authors’ Contribution
RU: Drafting the letter and subsequent revisions. SSO: Analysis and review of original research.

Conflict of Interest Disclosures
None declared.

Ethical Statement
Not applicable.

References


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