

Neurophobia Unveiled Exploring Trainees' Perceptions and Challenges in Neurology Education

Arica Reecy*

Department of Medicine, University of British Columbia, Vancouver, Canada

Abstract

Neurophobia a term describing the fear and anxiety trainees experience towards neurology has been recognized as a significant barrier in medical education. Despite the critical role of neurology in clinical practice, many trainees report difficulty understanding neurological concepts and lack confidence in diagnosing neurological disorders. This study aims to explore the factors contributing to neurophobia among medical trainees, identify gaps in neurology education, and propose potential solutions to enhance the learning experience. A cross-sectional survey was conducted among medical students, residents, and fellows in various specialties. The survey assessed their perceptions of neurology, levels of confidence in diagnosing neurological conditions, perceived complexity, and overall interest in the field. Focus group discussions and interviews were conducted to gather qualitative insights into educational challenges. The findings revealed a significant prevalence of neurophobia among medical trainees, driven by perceptions of neurology as overly complex and difficult to apply clinically. Key challenges identified included inadequate teaching time, lack of interactive learning, and insufficient exposure to practical neurological cases. Participants expressed a desire for more hands-on neurology training, early clinical exposure, and simplified teaching methods. Neurophobia remains a prevalent issue in medical education, hindering trainees' engagement with neurology. Addressing this challenge requires a multifaceted approach that includes curriculum reform, increased practical training, and supportive learning environments.

Keywords: Neurophobia; Neurology education; Medical trainees; Clinical training; Curriculum reform; Learning challenges

Introduction

Neurophobia, a term coined in the late 1990s, refers to the fear and anxiety experienced by medical students and trainees when learning neurology. Despite its significance in medical practice, neurology is often perceived as one of the most difficult subjects to master, leading to low confidence and disengagement among learners [1]. This aversion to neurology poses a risk, as trainees may avoid the specialty or struggle with the diagnosis and management of neurological conditions in general practice [2]. The complex nature of neurological disorders, the abstract nature of concepts like neuroanatomy and neurophysiology, and the perceived lack of clinical relevance contribute to this issue. The purpose of this study is to explore the underlying factors that contribute to neurophobia among medical trainees, identify educational gaps, and propose solutions to improve neurology education and trainee confidence.

Methodology

This is a mixed-methods study comprising a cross-sectional survey and qualitative interviews. The study was conducted over a six-month period among medical trainees across different levels of education and specialties. Participants included medical students in their clinical years, residents, and fellows from various institutions [3]. Trainees from fields such as internal medicine, emergency medicine, and neurology were targeted to assess perceptions across a range of specialties.

Data Collection

Qualitative interviews and focus groups: In-depth interviews and focus group discussions were conducted with a subset of participants to explore personal experiences with neurology education and gather suggestions for improvement.

Data Analysis

Quantitative data from the survey were analyzed using descriptive

statistics and correlation tests to assess factors contributing to neurophobia [4]. Qualitative data from interviews were transcribed and analyzed thematically to identify key challenges and potential solutions in neurology education.

Results and Discussion

Quantitative Results

Prevalence of Neurophobia: The survey results indicated that 68% of participants reported feeling anxious or overwhelmed when learning neurology. This was particularly evident among medical students and residents in non-neurology specialties [5, 6]. Perceptions of complexity neurology was consistently rated as the most complex specialty, with 74% of trainees indicating that they found neuroanatomy and neurophysiology difficult to understand.

Confidence Levels: Only 35% of participants felt confident diagnosing neurological conditions, and even fewer (28%) felt comfortable managing these cases in clinical settings. Curriculum gaps a significant portion (82%) of respondents believed that neurology teaching in their curriculum was insufficient, citing a lack of practical, hands-on learning and inadequate exposure to neurological cases [7, 8].

Qualitative Insights

Lack of Early Clinical Exposure: Many trainees reported limited

*Corresponding author: Arica Reecy, Department of Medicine, University of British Columbia, Vancouver, Canada, E-mail: reecyarica41@gmail.com

Received: 03-Sep-2024, Manuscript No: nctj-24-148522, Editor assigned: 05-Sep-2024, Pre QC No: nctj-24-148522 (PQ), Reviewed: 19-Sep-2024, QC No: nctj-24-148522, Revised: 25-Sep-2024, Manuscript No: nctj-24-148522 (R) Published: 30-Sep-2024, DOI: 10.4172/nctj.1000222

Citation: Arica R (2024) Neurophobia Unveiled Exploring Trainees' Perceptions and Challenges in Neurology Education. Neurol Clin Therapeut J 8: 222.

Copyright: © 2024 Arica R. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Citation: Arica R (2024) Neurophobia Unveiled Exploring Trainees' Perceptions and Challenges in Neurology Education. Neurol Clin Therapeut J 8: 222.

exposure to neurology cases early in their medical education, which contributed to anxiety when encountering neurological conditions later in training. Teaching methodology participants expressed dissatisfaction with traditional lecture-based teaching, which they felt did not adequately prepare them for clinical practice [9]. They emphasized the need for more interactive and case-based learning. Trainees consistently highlighted the gap between theoretical knowledge and clinical application, particularly when diagnosing complex neurological conditions.

Discussion

The findings confirm that neurophobia is a widespread issue among medical trainees, influenced by both educational gaps and the perceived complexity of neurology. The lack of hands-on experience and insufficient teaching time dedicated to neurology exacerbates this issue [10]. To counter neurophobia, neurology education needs a shift towards more practical, case-based learning that emphasizes early exposure to clinical neurology. Additionally, simplified teaching of foundational concepts like neuroanatomy and structured, supportive learning environments can help demystify the subject for trainees.

Conclusion

Neurophobia continues to be a significant barrier in neurology education, affecting trainee confidence and interest in the field. The study highlights the need for reform in neurology curricula, with a focus on increasing clinical exposure, integrating interactive teaching methods, and offering more practical training opportunities. Addressing these challenges can help reduce the fear associated with neurology and better prepare medical trainees for real-world clinical practice. Future studies should evaluate the effectiveness of educational interventions designed to combat neurophobia and improve long-term outcomes for neurology education.

Acknowledgement

None

Conflict of Interest

None

References

- Jędrzejczak J, Kopytek-Beuzen M, Gawłowicz J, Stanosz-Sankowska J, Majkowska-Zwolińska B, et al. (2020) Knowledge of pregnancy and procreation in women with epilepsy of childbearing age: A 16-year comparative study in Poland. Epilepsy Res 164: 106372.
- Riibe SR, Heitmann K, Schjøtt J, Riedel B (2023) Identifying safety concerns related to antiseizure medication use in breastfeeding women with epilepsy by reviewing questions to the Norwegian drug information and pharmacovigilance centres. Neurotoxicol Teratol 98: 107220.
- Roberts JI, Metcalfe A, Abdulla F, Wiebe S, Hanson A, et al. (2011) Neurologists' and neurology residents' knowledge of issues related to pregnancy for women with epilepsy. Epilepsy Behav 22: 358-63.
- Shawahna R, Zaid L (2022) Caring for women with epilepsy: Qualitative exploration of key challenges and future directions in a resource poor healthcare system. Epilepsy Behav 129: 108622.
- Cooper PJ, Murray L, Stein A (1993) Psychosocial factors associated with the early termination of breast-feeding. J Psychosom Res 37: 171-176.
- Elnaeim AK, Elnaeim MK, Babiker IBA (2018) Knowledge of women issues and epilepsy among doctors in Sudan. Epilepsy Behav 84: 79-82.
- Llorens, Tzovara A, Bellier L (2021) Gender bias in academia: A lifetime problem that needs solutions. Neuron Elsevier 10: 1016.
- Castillo C (2019) Exploring skin color and black-white differences in trust in physicians in a cross sectional study of U.S. adults. J Natl Med Assoc Elsevier 111: 393-406.
- Rad AE, Donald MDM, Kallmes FK (2010) The H-index in academic radiology. Acad Radiol. Elsevier 18: 1337-1340.
- Lopez J, Calotta BAN (2015) The Association of the H-index and academic rank among full-time academic hand surgeons affiliated with fellowship programs. J Hand Surg Am Elsevier 40: 1434-14.