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Peer Review

Review of: "Historical Turning Points in Medical Education"

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Review of the manuscript „Historical Turning Points in Medical Education“

Thanks for the opportunity to review the text „Historical Turning Points in Medical Education“! I find it surely is a worthwhile endeavour to write up the history of this discipline and to describe milestones in its history.

Please allow me to highlight some more specific critical points which I think could help to improve the paper:

General points

- Reading your manuscript, I remembered a paper by Olle Ten Cate which pursues a similar focus as your text: https://www.bzh.bayern.de/fileadmin/user_upload/Publikationen/Beitraege_zur_Hochschulforschung/2021/2021-4-ten_Cate.pdf

It might be helpful to provide explicit arguments for how the focus of your text differs from this earlier historically informed perspective on current medical education.

- Further, the mentioned paper reports more concepts which the author sees as disruptive innovations in medical education. Some of the turning points mentioned in your paper are also mentioned by Ten Cate, others aren’t. Please clarify in your analysis which criteria you have used to identify what you label as “turning points”.

Abstract and Introduction

- I was a bit puzzled by the first sentence of the paper’s abstract: „Understanding the historical turning points in medical education worldwide is essential for predicting the future of medical training“. This statement contains several assumptions that I find questionable:

- Prediction of the future is quite a risky game – and I am not sure whether this is really the purpose of this text. Sure, it is possible to describe current trends, like digitalization or artificial intelligence, and speculate about whether they will become more or less important in the future or about ways in which they will transform this discipline. However, to do so, it is not necessary to know about, e.g., the Greek origins of medical education.

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Sure, it is intellectually stimulating to end a review of historical turning points with an outlook into the future – but this cannot have the character of a "prediction".

- I find that the goal „understanding the historical turning points in medical education" is already a powerful and convincing argument in favour of the relevance of your analysis, simply to understand how certain elements of medical education that we take for granted today have evolved over time. I would just leave out the "prediction" aspect.

- The sections following the above-mentioned sentence nicely capture what is my view of the main point of the present analysis.
- Further on, however, the authors advance that many medical schools struggle to lose their identity. This, again, is a very strong and, in my view, exaggerated claim. Further, it is only formulated in the abstract and not elaborated upon further in the text. This is a promise not kept, and a strong one! I would suggest omitting this sentence.

Main section and discussion

- How did you define "turning points" in medical education for the sake of this analysis? And how did you select the turning points you report here? Were there events or concepts which you purposefully excluded for some reasons? To address such questions in your report is important, in my view, because it makes the decisions underlying your expertise more transparent and stimulating.
- There are some hallmarks of medical education, especially the use of simulation-based learning, which are not mentioned in the text. I find specifically the use of simulation very relevant for the history of medical education because it is a specifically relevant trait of this discipline that it has cultivated simulation-based learning to a degree far more advanced than many other university-based disciplines.
- The COVID-19 pandemic is labelled as a turning point in medical education. This event is not something which has emerged from inside this discipline, but is an external event which has urged medical educators to adapt the way they did their job. I wonder if there have been no other, historically more important, events, like for instance the big wars of the 20th century, which have impacted medical education in substantial ways, too.
- Other current trends, for instance the ones around professional identity formation (Cruess, Cruess and Steinert, 2019) or around the inclusion of real patients in medical education (Jha, Quinton, Bekker, Roberts, 2009), are not mentioned here at all. I really see the need for the authors to clarify their rationale for focusing on certain developments in the history of medical education and excluding others.
- Please add a reflection on what you think are the limitations of your analysis. I find it important to be self-critical as a researcher - and miss a respective section in your text.

Declarations

Potential competing interests: No potential competing interests to declare.