Reviewer's report

Title: Curriculum development: how important are medical students' opinions?

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Reviewer: Nisha Dogra

Reviewer's report:

This is an interesting and relevant paper to medical education generally and psychiatry more specifically.

I do not think that the title accurately reflects the contents of the paper which reports on student views of the contents of psychiatry education before and after clinical placements. The question the paper asks is not really whether medical student opinions are important with respect to curriculum development which is what the current title suggests.

Abstract

I am not sure that the paper did assess how much student opinion should influence curriculum development. There is a need to justify the final statement of the conclusion (as summarised in the abstract)

Background:

I am not sure psychiatry teaching is only relevant and useful to future doctors because most will not become psychiatrist. I think a better justification is required in terms of providing quality of care to all patients including those who have mental health problems. The authors also do not raise the potential limitations of a student centred or student led curriculum, e.g. how might negative attitudes towards psychiatry colour judgements about the content of psychiatric problems. How much of this is related on their own ability to manage things than concern them as opposed to managing patient concerns?

Methods and results

More information is required in this section as it is unclear how the questionnaire was devised. I also think it would be useful to include the questionnaire as an appendix to improve transparency. The timing of the questionnaire to 4th years also warrants justification (e.g. why not have preclinical students complete the questionnaire?).

A pedantic but potentially important point is that as I read it Year 5 were asked if they had found placements valuable (I am not sure how students may have viewed this term â## valuable for what purpose?). I thought the purpose of the paper was to see if the placement changed their views on what needed inclusion and whether career choices were altered. This needs clarification.

The placement may have been found to be less valuable because of the way it
was taught rather than what the contents were. I think it is too big a jump to assume why students did not find the placement useful.

Need to mention if ethics approval was sought and if not why not (e.g. may not have been required but warrants mention)

Discussion
I wondered what the expectations were of those students who did not find the placement valuable. Unrealistic expectations can colour the way students then view the actual placement.

In the discussion on pages 8-9, the authors talk about GPs teaching psychiatry. There are several limitations to this as GP attitudes are generally no more positive than the lay public (stigma literature from Australia and UK).

Whilst management of bipolar and schizophrenia may well be the remit of psychiatrists, other doctors will come across these patients and surely student views that they don’t need to know about these issues needs to be challenged.

Page 9 there is a discussion about problem based learning there needs to be some discussion about the limitations of this (there is some evidence that students focus on the biomedical aspects of problems and tend to underplay the socio-cultural factors what might be the relevance of that for the topic under discussion).

I was unsure as to how the house officer surveys relate to this paper needs to be clarified.

Page 11 it is unclear on what basis thee authors make the assertion that there are 3 principles.

Whilst I agree with the authors, I think it is important to justify why it is important for the undergraduate course to attract students to a career in psychiatry.

Page 12 - The authors state that only 46% of doctors who specialised in psychiatry had it as their first choice. This may have limited importance or relevance to undergraduate education as may relate to the possibly higher number of international medical graduates who enter psychiatry because of limited opportunities in other disciplines and job opportunities in psychiatry

Overall, I think this paper has something interesting to offer and with clarification of the above points, it would add more. I do not think there are any fundamental points that cannot be addressed.

1. Is the question posed by the authors new and well defined? Reasonably
2. Are the methods appropriate and well described, and are sufficient details provided to replicate the work? No see above
3. Are the data sound and well controlled? No control but data are sound
4. Does the manuscript adhere to the relevant standards for reporting and data deposition? Yes

5. Are the discussion and conclusions well balanced and adequately supported by the data? Partially â## see above

6. Do the title and abstract accurately convey what has been found? No â## see above

7. Is the writing acceptable? Yes

**What next?:** Accept after minor essential revisions

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

None