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FACULTY OF MEDICINE STUDY PROGRAM 0912.1 MEDICINE

NICOLAE TESTEMITANU CHAIR OF SOCIAL MEDICINE AND HEALTH MANAGEMENT

APPROVED

at the meeting of the Commission for Quality Assurance and Evaluation of the Curriculum faculty <u>Medicine</u>

Minutes No. 5 of 13.01, 2020

APROBATĂ at the Council meeting of the Faculty Medicine 2

Minutes No. 3 of 25.02.2020

Chairman dr.hab.st.med., prof. universitar

SUMAN SERGHEI____

Dean of Faculty dr.st.med., confouniversitar

BETIU MIRCEA

APPROVED

at the meeting of the Nicolae Testemitanu Chair of Social Medicine and Health Management

Minutes <u>nr. 1</u> din <u>30.08.2019</u>

Head of chair dr. hab.st.med., conf. universitar

RAEVSCHI ELENA

SYLLABUS

DISCIPLINE THE HISTORY OF MEDICINE

Integrated studies/ Cycle I, License

Type of course: Optional course

Chisinau, 2019



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I. INTRODUCTION

• General presentation of the discipline: place and role of the discipline in the formation of the specific competences of the professional / specialty training program

The history of medicine is an area of study that focuses both on the evolution of medicine as a science and on the various personalities that have contributed to its development. The history of medicine, as an element of general and professional culture, contributes to the professional and intellectual training of the physician. Understanding the historical path of medical practice and research provides a key to integrating students into the current and proactively positioning them towards the challenge of the future medicine. The knowledge of great personalities in the history of medicine and their achievements provides a key to motivating students on a professional level and deciding them for the highest deontological values. The content of the course is correlated with students' level of education, similar to other European universities with up-to-date information, and represents the necessary baggage of knowledge in order to know the history of medicine at international level.

- Mission of the curriculum (aim) in professional training:
 Knowledge and understanding of the origins and evolution of medical practice and science from a historical perspective. Acquiring the basics of medical culture: the stages of universal medicine development, biomedical doctrines, their personalities and contributions.
- Language (s) of the course: Romanian, Russian, English.
- Beneficiaries: students of the I year, faculty Medicine I and II.

II. MANAGEMENT OF THE DISCIPLINE

Code of discipline		G.01.A.009.4	
Name of the discipline		The History of Medicine	
Person(s) in charge of the discipline		Grossu Iu., Badan V., Penina O.	
Year I		Semester/Semesters	I
Total number of hou	rs, including:		30
Lectures	10	Practical/laboratory hours	10
Seminars		Self-training	10
Clinical internship			
Form of assessment	CD	Number of credits	1

III. TRAINING AIMS WITHIN THE DISCIPLINE

At the end of the discipline study the student will be able to:

- at the level of knowledge and understanding:
- 1. Prerequisites and stages of development of human medicine from origins to the present;
- 2. The most important milestones in the history of various preclinical, medical and surgical specialties;
- 3. Principles of the development of medicine in different time periods;



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- 4. The particularities of the development of each age and its significance in the evolution and progress of medicine.
- 5. Scientific medical science schools, their conceptions and role in the development of medicine;
- 6. Achievements of renowned scholars in correlation with the evolution of medical sciences.
- at the application level:
- 1. Development of skills in the elaboration of scientific papers on the evolution of medical conceptions, disciplines and events;
- 2. Development of verbal and written communication skills by drawing up and presenting reports on the life and activity of outstanding personalities in the field;
- 3. Create a PowerPoint presentation on the history of medicine and its public support.
- at the integration level:
- 1. To integrate knowledge in the history of medicine with the clinical ones;
- 2. To apply the knowledge acquired for the realization of the personal scientific researches within the bachelor's thesis, the University Days and as a future doctor-clinician and young researcher.

IV. PROVISIONAL TERMS AND CONDITIONS

- 1. Language requirements (intermediary level);
- 2. Basic computer skills (MS Office Word, EXCEL, PowerPoint);
- 3. Ability to work in a team;
- 4. Non-work related activities are strictly forbidden, disconnected mobile phones;
- 5. Lateness is not tolerated.

V. THEMES AND ESTIMATE ALLOCATION OF HOURS

Lectures, practical hours/laboratory hours/seminars and self-training

Nr.	NT ₁		Number of hours	
d/o	THEME	Lectures	Practical	Self-
u/O		Lectures	hours	training
1	The place of history of medicine between medical sciences and its role in	2	2	2
1.	the professional and intellectual training of the doctor.	2	2	2
2.	Prehistoric and Ancient Medicine. Medical Sciences in Greece and	2	2	2.
۷.	Ancient Rome.	2	2	2
3.	Medieval medicine. The Medicine of Rebirth and Enlightenment.	2	2	2
4.	Modern medicine.	2	2	2
_	Postmodern medicine. Main Trends and Challenges Facing Medicine	2.	2.	2
5.	in the Postmodern Age.	2	2	2
Tota	al	10	10	10

VI. REFERENCE OBJECTIVES OF CONTENT UNITS

Objectives	Content units
Theme (chapter) 1. Medicine before 1	800: primitive medicine, ancient, medieval medicine of rebirth
and enlightenment	



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	OU	jecuve	S			
fine	the	main	stages	of	the	1.

- To def evolution of science and medical practice from a historical perspective.
- To know the most outstanding personalities and their contributions to ancient, medieval, renaissance and enlightenment medicine;
- *To demonstrate* the knowledge of the most important discoveries in the medical sciences in the Renaissance and Enlightenment era
- To apply knowledge in the field of medical development up to 1800 to understand basic concepts in medicine;
- To integrate advances in medical practice and science with public health and today's medicine.

Content units

- Introduction. Methods of approach in the study of medicine history. Methods of study.
- 2. Archaic and primitive medicine;
- 3. Ancient Medicine: Egypt, Mesopotamia, India, China;
- 4. Greek Ancient Medicine. Hippocratic medicine. Hellenic medicine. Alexandrina School;
- 5. Medicine in the Roman Empire. Galen;
- 6. Middle Age Medicine: Medicine in the Christian World; medicine in the Arab-Muslim world:
- 7. Medicine in the Renaissance (XIV-XVII). Historical and cultural conditions. Developing medical sciences. Anatomists. Major epidemics;
- 8. Medicine in the Age of Enlightenment (XVIII).

Theme (chapter) 2. Developing medical sciences in the XIXth century (modern medicine)

- *To define* the particularities of the development of medicine in the sec. XIX:
- *To know* the most important discoveries in the era of modern medicine:
- *To demonstrate* the knowledge of the most outstanding personalities of the modern medicine era and their contribution to the progress of medicine;
- To apply modern medical knowledge in research and clinical activity;
- *To integrate* progress in the medical practice and science of the sec. XIX with the current public health and medical challenges.

- 1. The beginnings of experimental medicine. The foundation and development of physiology. Creating the concept of "Cell Pathology";
- 2. Fundamental discoveries in the world of microorganisms. Development of Microbiology. Verification of germ theory. Pioneers of bacteriology.
- 3. Important advances in the diagnosis and treatment of diseases. Introduction of narcosis and anesthesia. Introducing the stethoscope. Discover X-rays and radios:
- 4. Major discoveries at the end of the nineteenth century: the foundation of parasitology, preventive medicine, psychiatry.

Theme (chapter) 3. Medicine and surgery in the 20th and early 21st century (postmodern medicine)

- *To define* the premises and peculiarities of the development of medicine in the sec. XX;
- *To know* the most outstanding personalities and scientific medical schools in the postmodern medicine era:
- To demonstrate the understanding of the correlation between the progress of XXth century medicine and the
- 1. Infectious diseases and chemotherapy. Ehrlich arsphenamine. Sulphonamide. Detection of antibiotics: penicillin, antituberculous preparations, other antibiotics. The problem of antibiotic resistance in contemporary medicine. Development of tropical medicine (malaria, yellow fever, leprosy);
- 2. Immunology. Historical chronology of vaccination against infections caused by bacteria and viruses. Spanish influenza from 1918-1919. Construction of an electronic microscope;
- 3. Development of cell biology. New discoveries in physiology and biochemistry. Biomedical engineering.



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Objectives	Content units
evolution of demographic processes in	4. Endocrinology. Discovery of insulin and cortisone. Sex
the world;	hormones and contraceptive pills. Nutrition and vitamins.
- <i>To apply</i> the knowledge in the field	5. Progressions in the diagnosis and treatment of neoplasms.
of postmodern medicine history in	Development of chemotherapy, radiotherapy, understanding of risk
research and clinical activity;	factors (eg smoking risks, etc.);
- To integrate advances in medical	6. Developing Surgery in the Twentieth Century:
practice and science with current	- until the First World War;
health challenges in the population.	- First World War;
	- between the two world wars;
	- Second World War and post-war period;
	7. Progressions in disease diagnosis: introduction of computed
	tomography, nuclear magnetic resonance tomography and
	ultrasound examinations;
	8. Evolutions and revolutions in public health. Current trends and
	challenges in practice and medical research.
	9. The history of medicine development in Moldova.

VII. PROFESSIONAL (SPECIFIC (SC)) AND TRANSVERSAL (TC) COMPETENCES AND STUDY OUTCOMES

✓ Professional (specific) (SC) competences

Not the case

✓ Transversal competences (TC)

Not the case

✓ Study outcomes

The student at the end of the course will be capabill:

- 1. To identify the main stages in the evolution of medicine and the defining characteristics of the respective stages;
- 2. To appoint the most prominent medical figures for each age in the history of medicine and to identify the major contribution of these personalities;
- 3. To know the therapeutic remedies and medical practices throughout the history;
- 4. To identify the philosophical concepts and historical events that have shaped the concept and medical practice from the beginning to the present;
- 5. To identify the main challenges faced by medicine in the postmodern era and their possible influences on medical practice;
- 6. Developing skills to study the history of medicine;
- 7. To be open to lifelong learning.

Note. Study outcomes (are deduced from the professional competencies and formative valences of the informational content of the discipline).

VIII. STUDENT'S SELF-TRAINING

terms		No.	Expected product	Implementation strategies	Assessment criteria	Implementation terms
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1.	Working with	Reading the material from	Ability to extract the	During the
	information	the textbook on the topic.	essentials, interpretation	semester
	sources	Reading the issues, which	skills, the volume of	
		requires a reflection on the	work.	
		subject. To select		
		additional sources of		
		information on the topic.		
		To be acquainted with the		
		additional information		
		sources on the topic.		
		Formulation of		
		generalizations and		
		conclusions regarding the		
		topic.		
2	G. 1		TD1 1 C 1 1	D : 1
3.	Students' project	Selecting the theme,	The volume of work, the	During the
	presentations	establishing the research	degree of penetration in	semester
		plan and terms of the	the essence of the	
		achievement. Establishing	researched project, the	
		the components of the	quality of the conclusions,	
		PowerPoint presentation -	the elements of creativity,	
		topic, aim, results,	the formation of the	
		conclusions, bibliography.	personal attitude, the	
		Peer reviews. Professor	coherence of the exposure	
		reviews.	and the scientific	
			correctness, the	
			presentation method.	

IX. METHODOLOGICAL SUGGESTIONS FOR TEACHING-LEARNING-ASSESSMENT

• Teaching and learning methods used

For more effective learning in the course "Biostatistics. Methodology of Scientific Research", both traditional methods (exposure, conversation, exercise) and those considered today to be more effective for university education (active based learning based learning, case study, project method, modeling) are used. Practical methods use frontal methods, individual activity methods, group activity methods. Practical training within the course uses computer-assisted training / self-training (MS Office EXCEL, PowerPoint).

• Applied teaching strategies / technologies (specific to the discipline)

Communication Technologies such as PowerPoint presentations are used during the theoretical lectures and practical seminars.

• *Methods of assessment* (including the method of final mark calculation)

Current: During the semester, the current assessment includes a midterm test (theoretical part) and Power Point presentation of the research project (practical part) that in fact represents the assessment of the applied skills.



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Theoretical part of the current assessment:

Midterm test (test-grid)

Practical part of the current assessment:

Power Point project presentation + lecture participation

The mark for the practical part of the current assessment is complex and consists of two parts: the mark for the project presentation (coefficient is 0.9) and the mark for the attendance of the theoretical lectures (coefficient is 0.1).

The semester mark is calculated as the average of the mark for the midterm test and the project presentation mark.

Final: differentiated colloquium.

Those students who have the semester mark less than 5.0 and / or did not recover their absence(s) for the practical seminars (no absences are admitted for the practical seminars) are not admitted to the differentiated colloquium by the Department.

The differentiated colloquium represents the test-grid test which includes 30 random questions from each of the studied themes. The test-grid covers 40% single-choice questions and 60% multiple-choice questions. The student has at his/her disposal 30 minutes to answer to the grid-test.

The **final mark** is calculated as the average of the semester mark and the mark for the test-grid obtained at the differentiated colloquium.

Method of mark rounding at different assessment stages

8		8
Intermediate marks scale (annual	National	ECTS
average, marks from the examination	Assessment	Equivalent
stages)	System	
1,00-3,00	2	F
3,01-4,99	4	FX
5,00	5	E
5,01-5,50	5,5	
5,51-6,0	6	
6,01-6,50	6,5	D
6,51-7,00	7	
7,01-7,50	7,5	C
7,51-8,00	8	
8,01-8,50	8,5	В
8,51-8,00	9	
9,01-9,50	9,5	A



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9,51-10,0	10	

The average annual mark and the marks of all stages of final examination (computer assisted, test, oral) - are expressed in numbers according to the mark scale (according to the table), and the final mark obtained is expressed in number with two decimals, which is transferred to student's record-book. Absence on examination without good reason is recorded as "absent" and is equivalent to 0 (zero). The student has the right to have two re-examinations.

X. RECOMMENDED LITERATURE:

A. Compulsory:

1. **Douglas James Guthrie**, **Philip Rhodes**, et al., 2017, "History of medicine", *Encyclopedia Britannica*. https://www.britannica.com/science/history-of-medicine

B. Additional

- 1. **Bynum** William, 2008, *The History of Medicine: A Very Short Introduction*, 1 edition, Oxford; New York, Oxford University Press, 184 p.
- 2. **Jackson** Mark, 2013, *The Oxford Handbook of the History of Medicine*, Reprint edition, Oxford, United Kingdom, Oxford University Press, 696 p.
- 3. **Porter** Roy (ed.), 2001, *The Cambridge Illustrated History of Medicine*, Cambridge; New York, Cambridge University Press, 400 p.