

# Funding sources for continuing medical education: A different perspective

Sir,

Venkataraman *et al.* have presented the results of a simple yet elegant study into funding sources for continuing medical education in an institution in India.<sup>[1]</sup> Their findings were somewhat reassuring—most healthcare professionals attending continuing medical education events either paid for themselves or received funding from their institution. There was significant industry sponsorship from the pharmaceutical sector, but perhaps not as much as might have been expected.

The subject of who pays for continuing medical education will always be thorny. Continuing medical education events are currently associated with significant costs, and someone will have to pay. However, the debate about who should pay could perhaps be reframed so that it is viewed from the perspective of value.<sup>[2]</sup> Value is ultimately a balance between cost and benefits. Does continuing medical education, as it is currently provided, need to be so costly? Much of the cost of continuing medical education is associated not with the education itself but with trappings that often accompany it; however, not all these trappings are truly necessary. For example continuing medical education events often involve the expenses of travel, accommodation and subsistence, and yet these might not be necessary. Physicians could attend events closer to home or in their actual workplace. Alternatively they could utilise more e-learning resources or attend virtual meetings. The events themselves (nonwithstanding the accommodation, travel and subsistence) could also be lower cost—physicians may learn more from a small group informal meeting with their peers than from the state of the art lecture from a distant tertiary care academic.

However, costs are only one side of the story—on the other side are benefits or outcomes.<sup>[3]</sup> If the physician is paying then, they will expect that their personal learning needs will be satisfied. If the physician’s employing institution is paying then that institution will expect that the physician will learn content that is relevant to the institution’s patients and that the physician will be able to put the learning into practice for the benefit of patients. However, if a pharmaceutical company is

paying for a physician to attend, then they will likely expect a commercial return.

Physicians would do well to balance these various factors that may influence their decisions to attend and to pay for continuing medical education events. The best outcome is probably that their institution should pay. If not, physicians would probably do best to pay a modest amount out of their own budget.

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