

After lunch hour formalin sessions or virtual reality?

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Regardless of the medical faculty, it is widely accepted that a dissection hall is a place where medical students make most of their memories in preclinical life; with another popular saying describing it as a place where many find their life partners. I – though not belonging to that luckier lot – can equally testify that many of my treasured memories from the first two years come from anatomy practicals. Some joyous, some melancholic, and some downright terrifying.

Dissecting the lower limb taking extra care to go layer by layer so we could see the great saphenous vein, only to realize we had *dissected* the very thing we were trying to salvage; having our cadaver's brain stolen after spending the entire previous session sowing off the cranium; realizing that we had disregarded the pituitary to be an unimportant tissue bit – *surely pituitary cannot be that small?*; braving out spending alone time with hand specimens – as a preventive measure from failing spot tests – only to jump out of the skin when an elderly person clad head to toe in white called out for me; and most of all after all of these utter failures still believing that we could one day be proficient enough to be trusted with a scalpel near a live person, are some of the best ones in my memory vault.

With the start of the COVID-19 pandemic, having to resort to learning from home was a new experience for all of us. We had to make do with online presentations, referring study materials, and emailing lecturers whenever we would fall into trouble, to learn the content. Three-hour weekly dissection practicals turned into one-hour sessions at the end of two / three modules, with prosected specimens. Much of our second year was spent staying at home, turning to technology to learn anatomy: trying out various 3D anatomy apps and watching one YouTube video after the other, explaining what structure lies where.

Although the cadaver is often referred to as the first patient of a medical student; showcasing the importance of cadaveric dissections in medical education, the absolute necessity of it has been subjected to debate in the recent past. The difficulty of obtaining bodies, the high cost of maintenance and to top it all off, the color and texture of organs being different from that of live ones, have pushed medical faculties to search for alternatives to cadaveric dissections. As such, in many parts of the world, anatomy is taught nowadays with the help of advancing technology rather than old-school dissections with almost all others looking to make the switch.

I, on the other hand, having tasted both sides of the dish, would gladly opt for getting the scare of my life and later figuring out that he was just trying to inform me of the lab closing hours, over techy apps, as I only recalled the great saphenous pathway during second MB – after a year of no revising – thanks to the vivid memory of me destroying her saphenous, cutting unevenly two millimeters too deep.