# Tools and methodology for training on the management of Inflammatory Bowel Disease [IBD] in Hybrid platform

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#### **Abstract**

The objective of the proposed medical education program is to train young gastroenterologists with comprehensive expertise in the diagnosis and treatment of inflammatory bowel disease (IBD). Through a multidisciplinary approach, hands-on experience with advanced diagnostic techniques, exposure to emerging treatment modalities, and collaborative case discussions on a hybrid platform, the program aims to equip participants with the necessary skills to effectively manage IBD cases. The program is designed to span one year, consisting of seven modules, each focused on a specific aspect of IBD management. Module 1 covers IBD foundations including disease introduction, epidemiology, pathophysiology, diagnostic tools, and treatment algorithms. Module 2 emphasizes multidisciplinary IBD management and collaborative decision-making. Module 3 focuses on ultrasonography for IBD diagnosis. Module 4 delves into emerging treatments like biologics, inhibitors, and monitoring. Module 5 enhances critical thinking with case-based learning. Module 6 emphasizes practical skills, including endoscopy and imaging interpretation. Module 7 explores IBD research and evidence-based practice. Assessment and evaluation should be conducted through regular quizzes, assignments, case presentations, online discussions, and group activities. The program will culminate in a final project or research paper related to IBD, ensuring participants apply their knowledge in a practical context. The program's delivery will utilize webinars, online lectures, interactive video sessions, virtual case discussions, and recorded procedural demonstrations. An online platform will facilitate collaborative learning, allowing participants to engage with peers and experts, access resources, and share experiences. The proposed team conducting the program comprises various experts, including the Program Coordinator responsible for overall coordination, experienced medical gastroenterologists ,gastrointestinal surgeons contributing medical and surgical expertise, radiologists, nutritionists, pharmacologists, medical educators, technology specialists and guest speakers providing additional perspectives. The expected outcomes of the program are to address the complexity of IBD management, keep participants updated with advancements in diagnosis and treatment, emphasize a multidisciplinary approach, enhance critical thinking through challenging cases, promote evidence-based practice, provide continuous learning opportunities, improve patient- centered care, facilitate career growth, and foster networking and collaboration.

**Keywords:** Inflammatory bowel disease [IBD]; Multidisciplinary approach; Advanced diagnostic techniques; Hybrid platform; Hands-on experience

# Introduction

Inflammatory bowel disease (IBD), encompassing ulcerative colitis (UC) and Crohn's disease (CD), poses significant clinical challenges due to its complex pathophysiology and the need for advanced management strategies (Turner et al., 2020). As the prevalence of IBD continues to rise globally, including in India, there is an increasing demand for specialized training for young gastroenterologists (Singh et al., 2016). This proposed medical education program is designed to address this need by providing comprehensive training in the diagnosis and treatment of IBD through a multidisciplinary and hands-on approach (D'Haens et al., 2017). The program is structured to span one year and includes seven modules, each focusing on different aspects of IBD management. This includes foundational knowledge, advanced diagnostic techniques, emerging treatments, and practical skills (Peyrin-Biroulet et al., 2018). The objective is to enhance the expertise of young gastroenterologists, enabling them to manage IBD cases more effectively and stay abreast of the latest advancements in the field (Lichtenstein et al., 2021). Effective management of IBD necessitates a deep understanding of both the disease itself and the treatment options available. Recent literature highlights the critical need for specialized training to close existing knowledge gaps and improve clinical outcomes (Turner et al., 2020). Ananthakrishnan et al.(2015) emphasize the importance of advanced training in improving diagnostic accuracy and treatment efficacy for IBD patients (Ananthakrishnan et al., 2015). The incorporation of novel diagnostic techniques and therapies into clinical practice underscores the need for continuous education for gastroenterologists (Mowat et al., 2011). Peyrin-Biroulet et al. (2018) advocate for the inclusion of practical skills, such as endoscopy and imaging interpretation, in training programs to enhance patient care (Lichtenstein et al., 2020). Lichtenstein et al. (2020) further support this by highlighting the importance of multidisciplinary approaches in IBD management (Lichtenstein et al., 2017). The use of hybrid learning platforms, which combine online and interactive formats, has proven effective in supporting ongoing professional development (Lichtenstein et al., 2020). Studies by Lichtenstein and colleagues (2017) show that these educational formats offer flexibility and comprehensive resources, which are crucial for keeping up with advancements in IBD management (Turner et al., 2020). Inflammatory bowel disease (IBD) is a chronic inflammatory disease of the gastrointestinal tract and is divided into Crohn's disease and ulcerative colitis. It occurs in genetically susceptible individuals after an exaggerated immune response to a normal stimulus such as food and intestinal flora.

Gastroenterologists play a pivotal role in the comprehensive management of inflammatory bowel disease (IBD). As specialized medical professionals, they are responsible for accurately diagnosing IBD through thorough assessments, including endoscopic procedures and imaging techniques. Gastroenterologists formulate and oversee tailored treatment plans, considering the severity of the disease, patient history, and emerging therapeutic options such as biologics and immunomodulators. They monitor disease activity, adjust treatment regimens, and provide ongoing patient education and support. Inexperienced gastroenterologists handling IBD cases can lead to potential consequences, including delayed or misdiagnosis, improper treatment selection, inadequate monitoring of disease progression, and suboptimal patient outcomes. Given the complex nature of IBD and the rapid advancements in its management, the role of skilled and experienced gastroenterologists is essential in providing effective care, minimizing complications, and improving the quality of life for patients living with IBD.

In the study titled "Identifying IBD Providers' Knowledge Gaps Using a Prospective Web- based Survey" conducted in 2020 by Malter et al., the objective was to assess the knowledge gaps of inflammatory bowel disease (IBD) providers in the United States regarding the diagnosis and treatment of IBD (Malter et al., 2020). The researchers employed a web-based survey to gather data from 197 healthcare IBD providers. The survey aimed to identify areas where providers lacked comprehensive understanding, thus highlighting potential areas for improvement in education and training. The survey results revealed several prominent knowledge gaps among IBD providers. These gaps encompassed various aspects of IBD management, including both medical and patient- related considerations. Among the most common gaps were issues such as the utilization of medical cannabis for pain management in IBD patients, the management of patients with a history of malignancy, effective approaches to handling pregnant patients and family planning, strategies for managing elderly patients with IBD, and critical therapy decisions. The therapy-related gaps involved aspects such as the use of JAK inhibitors, the concept of drug holidays, and the application of biosimilars in IBD treatment. In the study titled "Knowledge Gaps in the Management of Postoperative Crohn's Disease: A US National Survey," conducted by Nguyen et al, aimed to identify knowledge gapsspecifically pertaining to the management of postoperative Crohn's disease [CD] among IBD providers in the United States (Nguyen et al., 2018). The study involved surveying 189 IBD healthcare providers to gauge their understanding of postoperative CD management. The outcomes of this study identified significant knowledge gaps related to the management of postoperative CD. These gaps included understanding the definition and diagnosis of postoperative recurrence of CD, effectively addressing perianal fistulas in patients with CD, making informed decisions about the use of biologics and immunomodulators in patients with postoperative CD, and appropriately considering the role of surgery in the management of this condition. Moreover, the study "Assessing the Educational Needs of Canadian Gastroenterologists and Gastroenterology Nurses: Challenges to Optimal Care in Crohn's Disease" conducted by Dupuis et al, focused on identifying the educational needs of Canadian gastroenterologists and gastroenterology nurses involved in the care of patients with Crohn's disease (Dupuis et al., 2009). The researchers administered a survey to 100 participants to assess their understanding of various aspects of Crohn's disease management. This study revealed prevalent educational needs within the Canadian healthcare community when it comes to Crohn's disease management. These needs encompassed topics such as managing perianal complications associated with Crohn's disease, addressing extra intestinal manifestations of the disease, comprehending the use of biologics as part of Crohn's disease treatment, understanding the role of surgical interventions in managing Crohn's disease, and acknowledging the psychological and social dimensions of living with this condition. The survey results illuminated prevalent educational needs among Canadian healthcare professionals engaged in Crohn's disease care. These needs encompassed several critical areas. Participants expressed a desire for enhanced knowledge in managing perianal complications associated with Crohn's disease, as well as understanding and effectively addressing extraintestinal manifestations of the disease. Moreover, the study revealed a need for greater comprehension of the use of biologics as a treatment modality for Crohn's disease. Understanding the role of surgical interventions in managing Crohn's disease emerged as another vital area for education. The participants highlighted the importance of addressing the psychological and social dimensions of living with Crohn's disease to provide comprehensive care. In conclusion, the aforementioned studies collectively emphasize the existence of knowledge gaps among gastroenterologists and healthcare professionals concerning the diagnosis and treatment of inflammatory bowel disease. Recognizing these gaps underscores the need for continuous medical education and training to ensure that IBD providers remain up-todate with the latest research findings and evidence-based guidelines. Staying informed is crucial for providing the best possible care for patients living with IBD.

The identification of knowledge gaps highlights the importance of continuous education, specialized training, and targeted interventions to bridge these gaps. By addressing these gaps, healthcare providers can enhance their ability to provide the highest quality care for patients with inflammatory bowel disease, ensuring optimal patient outcomes and overall well-being. This study underscores the necessity of tailored educational efforts that encompass these specific areas of educational need, equipping healthcare professionals to deliver well- rounded care to patients with Crohn's disease.

#### Need assessment for the program

Rising Incidence of IBD: The prevalence of IBD, including Crohn's disease and ulcerative colitis, is increasing globally. As a result, there is a growing demand for skilled gastroenterologists who can effectively diagnose, treat, and manage IBD patients.

Lack of Comprehensive Training: Traditional medical education may not comprehensively cover the intricate aspects of IBD management. Specialized programs (like a proposed one) fill this gap by offering in-depth, focused education tailored to the specific needs of gastroenterologists. The need to conduct a training program for young gastroenterologists in IBD management arises from the increasing complexity of the field, the demand for specialized expertise, advancements in diagnosis and treatment, and the necessity for continuous learning to ensure optimal patient care.

Training gastroenterologists is of paramount importance in the management of inflammatory bowel disease (IBD) due to several critical reasons:

Accurate Diagnosis: IBD can present with diverse clinical manifestations and mimic other gastrointestinal disorders. Proper training equips gastroenterologists with the skills to differentiate between IBD and other conditions, leading to timely and accurate diagnoses.

Complexity of Disease: IBD is multifaceted, involving intricate pathophysiology and varying disease presentations. Well-trained gastroenterologists can understand the nuances of disease activity, complications, and treatment response, enabling more effective management.

Evolving Treatment Landscape: The landscape of IBD treatment is rapidly changing with the advent of biologics, immunomodulators, and other advanced therapies. Gastroenterologists need training to stay updated on the latest treatment options and techniques for personalized patient care.

Personalized Treatment Plans: Effective IBD management requires personalized treatment plans tailored to each patient's disease severity, medical history, and preferences. Trained gastroenterologists can formulate evidence-based, individualized treatment strategies. Minimizing Complications: IBD can lead to complications such as strictures, fistulas, and malignancies. Proper training enables gastroenterologists to identify and manage these complications promptly, improving patient outcomes.

Multidisciplinary Collaboration: Treating IBD often involves collaboration with other medical specialties like surgery, radiology, and nutrition. Gastroenterologists need training to work seamlessly within multidisciplinary teams for comprehensive patient care.

Advanced Diagnostic Techniques: Gastroenterologists require training in the use of advanced diagnostic techniques like ultrasonography and imaging modalities to accurately assess disease activity, progression, and response to treatment.

Challenging Cases: Some IBD cases can be particularly complex, requiring a deep understanding of disease mechanisms and treatment strategies. Well-trained gastroenterologists can navigate these challenging cases more effectively.

Patient-Centered Approach: IBD management extends beyond medical treatment to encompass patient education, communication, and support. Training helps gastroenterologists develop effective patient-centered care approaches.

Research and Evidence-Based Practice: Continuous training encourages gastroenterologists to stay informed about the

latest research findings, clinical trials, and evidence-based guidelines, fostering a culture of research-driven practice.

Quality of Life Improvement: Effective IBD management not only aims to control symptoms but also enhances patients' quality of life. Well-trained gastroenterologists can address patients' physical and emotional needs comprehensively.

Continuity of Care: IBD often requires long-term management. Well-trained gastroenterologists can build lasting relationships with their patients, ensuring continuity of care and ongoing support.

The objective of the medical education program is to train young gastroenterologists with comprehensive expertise in diagnosing and treating inflammatory bowel disease [IBD], through a multidisciplinary approach, hands-on experience with advanced diagnostic techniques, exposure to emerging treatment modalities, and collaborative case discussions on a digital platform.

#### **Target Audience**

The primary audience targeted for this medical education program on inflammatory bowel disease [IBD] includes young gastroenterologists who are either in their early career stages or are pursuing further specialization in gastroenterology. These individuals would have completed their medical education and are either in residency, fellowship, or have recently started practicing gastroenterology. Their willingness to participate, their dedication to undergo in the training program should be assessed by assessing the aptitute to participate in the training prior to the enrollment. They possess a foundational understanding of medical concepts but require comprehensive training in IBD diagnosis and treatment to become adept practitioners in this specialized field. Informed consent should be obtained from the participants and the study should be commenced only after obtaining IEC clearance.

#### **Project Design and methods**

Program Duration: 1 year

Program Overview:

#### Module 1: Foundations of IBD Diagnosis and Treatment (2 months)-16 hrs

Introduction to IBD: Crohn's disease and ulcerative colitis

Epidemiology, etiology, and pathophysiology

Clinical manifestations and differential diagnosis

Diagnostic tools and techniques (endoscopy, imaging, laboratory tests)

Developing a treatment algorithm for IBD

End module assessment

# Module 2: Multidisciplinary Approach to IBD Management (2 months)-16 hrs

Role of gastroenterologists, surgeons, radiologists, and nutritionists

Case discussions with other specialists

Collaborative decision-making in complex cases

Patient-centered care and communication

End module assessment

#### Module 3: Advances in IBD Diagnosis (2 months)-16 hrs

Role of ultrasonography (USG) in IBD diagnosis

Hands-on training in performing and interpreting USG for IBD

Comparison with other imaging techniques (MRI, CT)

Identifying disease activity, complications, and treatment response using USG

End module assessment

# Module 4: Emerging Treatment Options (2months)-24 hrs

Conventional vs. biologic therapies

Personalized treatment plans based on disease severity and patient factors

Newer biologics and small molecule inhibitors

Immunomodulators, steroids, and combination therapies

Monitoring treatment response and adjusting therapy

End module assessment

#### Module 5: Case-based Learning and Challenging Cases (2 months)-16hrs

Review of challenging IBD cases

Group discussions on management strategies

Ethical considerations in complex cases

Sharing experiences and insights from clinical practice

End module assessment

#### Module 6: Practical Skills and Hands-on Training (1 month)-16hrs

Workshops on endoscopic techniques

Simulation-based training for procedures (e.g., endoscopy, biopsies)

Interpreting imaging results

Building practical skills for daily clinical practice

End module assessment

#### Module 7: Research and Future Directions in IBD (1 month)-8hrs

Current research trends and clinical trials

Exploring potential breakthroughs in IBD treatment

Engaging in evidence-based practice

Developing research skills and critical appraisal

End module assessment

#### **Assessment and Evaluation mode:**

In built Regular quizzes, assignments, and case presentations

Participation in online discussions and group activities

Case-based assessments to evaluate clinical reasoning and decision-making in each modules

#### Total-112 hrs

#### **Course Delivery Methods:**

Webinars, online lectures, and interactive video sessions

Virtual case discussions and journal clubs

Recorded procedural demonstrations and technique workshops

Online platform for collaborative learning and resource sharing

# Team conducting the medical education program

Program Coordinator-Principal investigator

Responsible for overall program coordination, content development, and quality assurance.

Clinical Gastroenterologists: Experienced gastroenterologists of Justice KS Hegde Charitable hospital and external experts who will provide in-depth insights into IBD diagnosis, treatment, and patient management.

Will lead lectures, case discussions, and provide real-world clinical perspectives.

Gastrointestinal Surgeons: Specialized surgeons of Justice KS Hegde Charitable hospital with expertise in IBD-related surgical interventions. Will contribute to discussions on surgical options and the role of surgery in IBD management.

Radiologists: Radiology specialists of Justice KS Hegde Charitable hospital who can provide guidance on interpreting imaging results and the role of imaging in assessing IBD and experts in the field.

Pathologists: Experts in the diagnosing, stagiong of IBD would help the gastroenterologists to rigoursly manage IBD. Nutritionists/Dietitians: Experts in nutritional management of IBD, offering insights into dietary considerations and their impact on patient outcomes.

Pharmacologist: Co-Principal investigator of the program. Expert in pharmacology and therapeutics of Justice KS Hegde Charitable hospital, providing a deep understanding of IBD medications, their mechanisms, and potential side effects.

Medical Educators/Instructional Designers: Professionals experienced in curriculum design and adult learning principles. Collaborate on structuring the program, creating engaging content, and ensuring effective delivery.

Technology and IT Specialists of Nitte Deemed to be University: Experts in learning management systems, online platforms, and technical support. Ensure seamless delivery of the program on digital platforms.

Administrative Support: Administrative professionals of Nitte Deemed to be University who handle logistics, scheduling, participant communication, and documentation.

Innovation

The medical education program designed for young gastroenterologists on IBD management introduces a range of innovative elements that collectively redefine conventional medicaleducation. These innovations encompass both content delivery and the approach to fostering comprehensive expertise in IBD management.

Holistic Curriculum Integration: The program integrates various aspects of IBD management, from iagnosis and treatment to practical skills, communication, and leadership. This holistic approach ensures that participants not only acquire specialized medical knowledge but also develop a well-rounded skill set essential for effective patient care.

Multidisciplinary Learning: Unlike traditional medical education, which often focuses on individual specialties, this program pioneers a multidisciplinary approach. Participants engage with experts from various fields, such as surgeons, radiologists, nutritionists, and pharmacologists. This fosters a comprehensive understanding of IBD management and encourages collaborative decision-making, mirroring real-world healthcare scenarios.

Active Learning Strategies: The program leverages active learning methodologies, including case-based discussions, workshops, and simulations. These strategies encourage participants to engage actively with the content, apply theoretical knowledge to practical scenarios, and refine their critical thinking and problem-solving abilities.

Hands-On Experience: A standout innovation lies in providing participants with hands-on experience in advanced diagnostic techniques, particularly ultrasonography for IBD assessment. This immersive learning approach enhances participants' confidence and proficiency in utilizing diagnostic tools in clinical practice.

Adaptive Teaching Formats: The use of webinars, online lectures, video sessions, and collaborative platforms caters to different learning preferences and enhances accessibility. By embracing digital tools, the program offers flexibility for participants to engage with the content at their own pace, overcoming geographical barriers.

Challenging Cases and Ethical Considerations: The program uniquely addresses ethical dilemmas and challenging cases in IBD management. By encouraging participants to analyze and discuss complex scenarios, the program cultivates ethical decision-making skills and prepares them to handle diverse patient scenarios.

Future-Focused Learning: The incorporation of a module dedicated to research and future directions in IBD management underscores the program's forward-looking approach. Participants are exposed to the latest research

trends, potential breakthroughs, and evidence-based practices, ensuring their preparedness for the evolving landscape of IBD care.

Networking and Collaboration: The program leverages digital platforms to foster networking and collaboration among participants, allowing them to connect with peers, mentors, and experts beyond the confines of physical locations. This encourages ongoing knowledge exchange and support Open-Access Resources: The creation of comprehensive teaching materials, including lectures, case studies, and procedural guides, as open-access resources, extends the program's impact beyond its initial timeframe. These resources offer a continuous learning opportunity for a broader medical audience.

Professional Development Emphasis: The program's incorporation of modules focused on practical skills, leadership, communication, and professional growth emphasizes a comprehensive approach to medical education that extends beyond clinical knowledge. Collectively, these innovations redefine medical education by fostering a dynamic, engaging, and future-oriented learning experience that equips young gastroenterologists with the multidisciplinary skills and knowledge needed to excel in IBD management and patient care.

#### Evaluation

To evaluate the effectiveness and impact of the upcoming medical education program for young gastroenterologists on IBD management, a comprehensive evaluation approach should be implemented, encompassing both quantitative and qualitative methods. The program's success and areas for improvement should be identified through the following strategies:

Participant Feedback and Surveys: After the program concludes, participants should be invited to provide feedback through post-program surveys. Questions will assess the relevance of the content, effectiveness of teaching methods, clarity of materials, and overall satisfaction with the program. The qualitative feedback collected will offer insights into strengths and areas for enhancement.

Pre- and Post-Knowledge Assessment: A pre-program knowledge assessment should be administered to gauge participants' baseline understanding of IBD management. Following the program, a post-program assessment will measure knowledge improvement. This quantitative data will indicate the extent to which participants' knowledge has increased.

Case-Based Assessments: Participants' ability to apply their knowledge to real-world scenarios should be evaluated through case-based assessments. These assessments will gauge participants' clinical reasoning, decision-making, and problem-solving skills in IBD management.

Practical Skill Assessments: Practical assessments or simulations should be conducted to evaluate participants' hands-on skills acquired during workshops, such as endoscopic techniques and interpreting imaging results. These assessments will determine the program's effectiveness in imparting practical skills.

Long-Term Follow-Up: A follow-up assessment should be conducted after a specific period to ascertain the program's lasting impact on participants' clinical practice. This will reveal whether the knowledge and skills acquired during the program were effectively integrated into their patient care routines.

Participant Engagement and Participation: Throughout the program, the level of participant engagement in webinars, discussions, assignments, and group activities should be monitored. High levels of participation will indicate active involvement and interest in the program.

Faculty Feedback: Feedback from faculty members should be collected, assessing the program's structure, content, and delivery. Their insights will provide perspectives on the effectiveness of teaching methods and the relevance of the curriculum.

Comparative Analysis: Participants' performance in the program's assessments should be compared with their baseline knowledge levels. This comparison will quantify the program's impact on knowledge enhancement.

Anecdotal Evidence: Anecdotes, success stories, or testimonials from participants should be collected to highlight how the program positively impacted their clinical practice, patient care, and career development.

Program Goals Achievement: The program's success in achieving its intended objectives, such as improved understanding of IBD management, enhanced multidisciplinary collaboration, and increased awareness of emerging treatments, should be evaluated.

By employing these evaluation methods, a comprehensive understanding of the program's strengths, weaknesses, and overall effectiveness should be obtained. This data should be invaluable for refining future iterations of the program and ensuring its continued alignment with the needs of young gastroenterologists seeking to excel in IBD management.

# **Program Benefits**

Comprehensive understanding of IBD diagnosis and management

Hands-on experience with advanced diagnostic tools

Knowledge of the latest treatment options and research trends

Improved clinical decision-making skills through case-based learning

Networking opportunities and collaboration with peers and experts

The participants should be issued the certificate after successful completion of the module

#### **Expected outcome**

Conducting a specialized training program for young gastroenterologists in the field of inflammatory bowel disease (IBD) management addresses several crucial needs:

Complexity of IBD: IBD is a complex and multifaceted condition that requires a deep understanding of its pathophysiology, diagnostic techniques, and evolving treatment options. A dedicated training program helps bridge the knowledge gap and ensures accurate and up-to-date management. Advancements in Diagnosis and Treatment: The field of IBD management is rapidly evolving, with new diagnostic techniques (such as ultrasonography) and emerging treatment options (biologics, small molecules) continually being developed. Training programs ensure that gastroenterologists are equipped to utilize these advancements effectively.

Multidisciplinary Approach: Successful IBD management often requires collaboration among gastro- enterologists, surgeons, radiologists, nutritionists, and other specialists. A training program that emphasizes a multidisciplinary approach prepares participants to work effectively within these teams.

Challenging Cases: IBD presents a wide range of challenging cases, from diagnosing subtle presentations to managing complications and treatment-resistant cases. A program focusing on challenging cases helps participants develop critical thinking skills and problem-solving abilities.

Evidence-Based Practice: The dynamic nature of IBD management demands a strong foundation in evidence-based practice. Training programs provide participants with the skills to critically evaluate research, clinical trials, and guidelines to inform their decisions.

Continuous Learning: The medical field is ever-evolving, and keeping up with the latest developments is essential. A dedicated training program provides young gastroenterologists with the opportunity for continuous learning and skill enhancement.

Patient-Centered Care: IBD management involves not only medical treatment but also effective communication with patients and addressing their unique needs. Training in patient-centered care improves the overall quality of patient interactions.

Career Growth: A well-structured training program enhances the expertise and professional skills of young gastroenterologists. This not only benefits patient outcomes but also contributes to their career advancement and recognition within the medical community.

Networking and Collaboration: The training program facilitates networking among participants, enabling them to connect with peers, mentors, and experts in the field. This collaboration fosters knowledge sharing and support throughout their careers.

#### **Dissemination Plan**

The medical education program for young gastroenterologists on IBD management holds the potential for extended benefits beyond the grant period, enriching the medical community and healthcare practice. The teaching materials developed for the program should be structured to facilitate future use by educators, medical institutions, and professionals seeking to enhance their understanding of IBD. These materials, including lecture slides, case studies, procedural videos, and assessment tools, should be compiled into a comprehensive resource package that can be made accessible to a wider audience.

Beyond the initial project, tools and resources created during the program should be made publicly available to contribute to the advancement of IBD education. This could include the development of an online platform where interested individuals can access educational modules, recorded webinars, and practical guides on IBD diagnosis, treatment, and management. Such open-access resources will foster continuous learning and skill development within the medical community, benefiting healthcare professionals across different regions and settings.

To ensure the broad dissemination of project outcomes, a multi-faceted approach should be adopted. Research papers summarizing the program's design, methodologies, and outcomes should be submitted to relevant medical journals and conferences. These publications will share insights on effective medical education strategies, potentially influencing future curriculum development in gastroenterology and other specialized fields.

Additionally, the project's outcomes, including best practices, lesson plans, and case studies, may be presented in conferences, seminars, and workshops, reaching a diverse audience of medical educators, practitioners, and researchers. Digital repositories and medical education platforms will also be utilized to host and distribute program materials, fostering a global network of professionals engaged in IBD management.

Furthermore, collaborations with medical associations and institutions should be sought to integrate elements of the program into existing training curricula, ensuring a sustained impact on the education and skill development of young gastroenterologists. By leveraging these dissemination strategies, the project's outcomes will extend well beyond the grant period, contributing to the advancement of IBD management practices, elevating patient care, and enriching the broader medical landscape.

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