

Surgery and the internet

A cirurgia e a internet

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The internet, a few years ago, has become the initial tool for search of update or review articles. Initially used only as a bibliographic reference, it required a subsequent excursion to the libraries in search of the physical journals for reading. More recently, however, most journals, including the Journal of the Brazilian College of Surgeons (Revista do Colégio Brasileiro de Cirurgiões), make their content available online and thus reach an even larger number of readers, not only in the health area.

Our daily medical practices, such as work, study, and even the physician-patient relationship, have been influenced by the internet. It is common for patients to arrive in the clinic with a list of questions, generated after research on their disease. Also on the internet, many patients seek out the professionals who best fit their profile, without the traditional indications of another doctor, of other patients or of acquaintances.

On the other hand, in the search for patients, some doctors turn their lives into reality shows and post every step of their activities carried out throughout the day, with emphasis on classes, congresses, courses and other activities related to their clinical practice. At times, they go beyond common sense and expose situations capable of generating false hopes to the public, with unattainable promises or success results that are not usual for certain diseases. It was in this sense that the Federal Medical Council issued the resolution number 1974/2011 to guide and avoid abuses of medical dissemination in the various media¹. Interestingly, however, the patients themselves organize into discussion groups of clinical cases or blogs specific for certain diseases. And the interesting thing is that some of these blogs are run by patients who discuss the “best” medical conducts for the cases

in question, based on personal experiences and, of course, the information on the internet.

Videolaparoscopy, on its turn, brought not only the inherent benefit of the method to the patient, but also the ease of reliably recording the performed surgery. Initially this record was made in VHS tapes that, besides occupying great physical space, had a laborious and delayed edition. Perhaps because of this editing difficulty, there were a limited number of recorded procedures, and these were displayed in the crowded video exhibition rooms of the surgery congresses. Continuously, the evolution of computers and video editing software took place, which resulted in the simplification of the processes, with even better results for the viewer. At the same time, access to high-speed internet and video-sharing platforms became popular and allowed doctors to exchange experiences from the visualization of their procedures, also granting patients access to these surgical videos.

It is in this context that the relation of the surgeon with the internet became even more integrated, since besides the academic articles research, the surgeon was able to update his expertise with videos of the surgeries he intends to perform. And this practice became commonplace not only by the resident before operating his first cholecystectomy, tutored by his preceptor, but also by experienced surgeons, to refine some technical detail of their practice. It is no wonder that several papers on the subject are being published in different journals, in which they seek to analyze the influence of the Internet, not only on already trained surgeons, but also on training ones^{2,3}.

No matter how detailed the description of a surgical technique is, it does not compare with video recording. As highlighted by O’Leary et al in their

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singular article, the use of the internet as a teaching tool provides easy access, good cost-effectiveness and the possibility of independent learning⁴. Also in this article, they reviewed the YouTube and iTunes releases of their institution's Surgery Department sessions, which garnered a considerable number of views, distributed globally.

Video posting sites can be viewed by countless people who directly post their comments. Unfortunately, even in the restricted access groups, there is eventually a certain lack of commitment to reality, both for the comments and for the videos themselves, stimulated perhaps by the impersonality

created by the internet. The ease of these postings also allows releasing of materials without scientific rigor, often incorrectly disseminated to the public.

The use of the internet cannot be ignored by the surgeon, who has the opportunity to improve with this tool. It is in this scenario that the Brazilian College of Surgeons and other specialized societies promote actions to provide their members with resources that really aim at technical and scientific improvement. And it is with this intention that I hope, more and more, that the seals of the Specialty Societies are stamped on sites that truly have commitment with ethics and with continued medical education.

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