

An Interview with the CRA's 2011 Teacher-Educator: Dr. Nader A. Khalidi

What do you believe are the qualities of a good Teacher-Educator?

A good Teacher-Educator needs to challenge trainees to achieve the highest standards and be open to all methods of teaching, as not all trainees are created equal.

What do you enjoy about teaching medical students and rheumatology trainees?

There are many things I enjoy about teaching, but the most important is that trainees and patients keep me humble with a variety of daily challenges.

What are the current challenges for those teaching in the university environment?

At McMaster [University], we have created a great learning atmosphere and have attracted many who want to learn more about rheumatology to enrich their education or even to pursue further training. The greatest challenge is our resources—in terms of space and manpower—as we have become very popular and have a difficult time trying to accommodate all those who apply. Furthermore, while we have created great interest, we have a limited number of training positions because of provincial funding; this has improved, but we still need more to add to the rheumatology workforce that remains an underserved profession in Canada.

Is there educational value in having students and trainees exposed to community-based physicians and their patients?

Absolutely. Many of us specialize in caring for patients with specific diseases, but we still need trainees to be as wide-eyed as possible to all aspects of the multitude of diseases we encounter in rheumatology, and community-based physicians help keep us rounded. In particular at McMaster, community-based rheumatologists, including Drs. Brian Hanna and Saeed Shaikh, are key and integral players in our training program. Several of our trainees have started community-based rheumatology practices and will continue to be involved in teaching.



Over the past few generations, there has been a change in the classic models of education with less didactic expert lectures and more student-led seminars. Novel methods of education and teaching have also been introduced. Are students and trainees better educated today and more prepared to be practicing physicians than a generation ago?

I am not sure that one should compare education to a generation ago, but certainly as our world becomes more complex, new ways

of education have had to emerge to adapt to this to allow for more engagement and ways to handle intricate problems and help tackle the huge and ever-expanding knowledge base in rheumatology.

What would your advice be to some of your younger colleagues who are interested in enhancing their teaching skills in rheumatology?

I would suggest that they remain flexible in their thinking, adapt to new technologies and continue to listen to and be taught by their trainees. Furthermore, formal training and mentorships are available through the Royal College as well as through various academic institutions that meet regularly through The Arthritis Society (to whom I owe great gratitude for their generous five-year support with the Clinician Teacher Award) and the Canadian Council of Academic Rheumatologists, such as the innovative Future Leaders in Rheumatology Training (FLIRT) program pioneered by Dr. Janet Pope.

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