

Short Abstract Samples — 200 words max

Changing the Face of Sex Education in Our State

Sex Ed by ABC Med is a collaboration between the XYZ Medical School and the Board of the ABC School District with the aim of improving the sexual health knowledge of adolescents in the state. We designed a comprehensive sexual education curriculum and recruited 41 medical student volunteers to deliver seven lessons to 168 eighth grade students in Fall 2014. To assess baseline knowledge and knowledge acquisition, the middle school students were administered a 17-question, mixed format assessment before and after the course. Our students demonstrated statistically significant improvements in sexual health knowledge. Over the course of the semester, their average assessment score rose from 68.3% to 78.1% ($p < 0.001$). They also scored significantly better in both the sexual health and reproductive anatomy sections of the post-assessment (76.3% vs 66.7%, $p < 0.001$ and 91.1% vs 80.1%, $p < 0.01$). In light of the initial success, we have included seventh grade students to the program.

IVC Filter: A Safety Device That Can Kill

The use of inferior vena cava (IVC) filters has steadily increased since 1967, with over 259,000 placed in 2013. There are few true indications for IVC filter placement, and the vast increase in utilization has occurred secondary to relative indications and prophylactic usage. While complications related to filters remain low, increasing utilization combined with low retrieval rates will likely lead to more patients presenting with long-term adverse events. The corresponding case recounts a 59-year-old male who had an IVC filter placed for a true indication in 2007. When the patient presented six years later with abdominal pain and blood in his stools, a wide differential diagnoses failed to include iatrogenic perforation. Due to a physical exam finding that triggered concern for appendicitis, the patient was triaged to the emergency department, where he was ultimately found to have a perforation of his duodenum and aorta by the IVC filter.

Depression and the Vulnerable in Tijuana

Little is known about depression among socially and structurally vulnerable groups living in Tijuana, Mexico, who may be at high risk for depression. We sought to determine the prevalence and correlates of depressive symptoms among vulnerable patients at a free clinic in Tijuana. Eligible participants were ≥ 18 years of age and spoke either Spanish or English. A convenience sample of 584 patients completed a questionnaire including the NIH-PROMIS depression short form as well as measures of individual, social, and structural factors affecting health. Descriptive statistics and multivariate logistic regression were performed. The prevalence of clinically significant depressive symptoms was 55%. In the multivariate analysis, female gender, poor/fair self-rated health, recent illicit drug use, feeling rejected, history of forced sexual act, and history of violence were independently associated with depressive symptoms. The prevalence of depressive symptoms at this Mexican free clinic exceeds prevalence rates reported for other populations in the region. Public health efforts to support mental health, such as interventions to address socioecological risk factors for depression (e.g., interpersonal and sexual violence, drug abuse) are needed. The clinic is piloting a walk-in mental health clinic as a model for mental health service provision for vulnerable patients.

Student-Led LGBT Health Seminar

Lesbian, gay, bisexual, and transgender (LGBT) individuals face significant health disparities. Barriers to care include physicians' lack of adequate training regarding LGBT-related healthcare issues. We designed an educational session for first-year medical students on LGBT-specific health concerns to better prepare them to care for this population. With faculty oversight, second- and fourth-year medical students conducted a 2-hour session on LGBT health for 167 first-year medical students at Case Western Reserve University in Cleveland, Ohio. The mandatory session consisted of a student-delivered presentation, a patient panel, and a small-group case discussion and reflection. Assessments measuring students' knowledge of LGBT terminology and health concerns, as well as their confidence in providing care were administered before and after the session. A total of 73 complete, matched pre-/post-session assessments were received. Students' knowledge of LGBT terminology and health concerns improved significantly after the session, as did their confidence in providing care. Students found the session helpful and hoped it would continue in the future. Student-led educational sessions on LGBT health effectively improve first-year medical students' knowledge and confidence to provide LGBT-specific care.