



**Responses to “On the advantages and disadvantages of virtual continuing medical education: A scoping review”**  
**Réponses à « Avantages et inconvénients de la formation médicale continue virtuelle : une revue exploratoire »**

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## Responses to “On the advantages and disadvantages of virtual continuing medical education: a scoping review” Réponses à “Avantages et inconvénients de la formation médicale continue virtuelle: une revue exploratoire”

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Dear Editor,

I have read with great interest the manuscript titled “On the advantages and disadvantages of virtual continuing medical education: a scoping review”<sup>1</sup> written by Cheng and colleagues, published in the Canadian Medical Education Journal. In this study, the authors analyzed 282 studies published between January 1991 and April 2021.<sup>1</sup> It is noteworthy that, considering that the virtual methods are effective in providing continuing medical education (CME) during the COVID-19 pandemic,<sup>2</sup> it was surprising to find that in the paper of Cheng and colleagues, isolation of physicians from one another was considered only as a disadvantage in virtual continuing medical education. This isolation was depicted as a representation of impersonal interactions, without exploring the potential advantage of such isolation in safeguarding physicians with compromised immune systems or underlying health conditions that increase the risk of complications upon exposure to acute infectious diseases (e.g., COVID-19). Considering the shortage of doctors willing to teach,<sup>3</sup> primarily in Family Medicine, which was not addressed in the paper by Cheng and colleagues, another advantage of virtual learning is its potential to mitigate the challenges associated with medical teacher shortages. Virtual CME offers a solution that can help bridge the gap between the

need for medical education and the limited availability of experienced medical teachers, particularly in Global South countries. While online learning cannot replicate the invaluable experience provided by in-person training, it serves as an important tool to protect doctors during periods of infectious diseases and has the potential to address the challenges posed by medical teacher shortages.

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