**INTRODUCTION**

- Those 65 years and older use more than 50% of health care resources.
- As the older population increases and lives longer, their health care utilization is predicted to increase dramatically.
- We have an obligation to train our future health care providers to work with older adults to augment optimal aging.
- Innovative learning modalities, such as virtual reality, enhance medical students’ learning about older adult health care.
- We Are Alfred (WAA) Virtual Reality Software (VRS) provides such a platform teaching about macular degeneration & hearing loss while instilling empathy.

**GOAL, OBJECTIVES, & BACKGROUND**

**Project Goal:** To adopt technology that will teach UNECOM students to be empathic with older adults through experiencing the WAA-VRS developed by Embodied Labs, and familiarize medical students with information resources from the NIH/NLM related to older adult health.

**Project Objectives:**

1. Exhibit increased empathic attitudes toward older adults and additional skills such as patience and understanding as measured by the pre and post assessment surveys.
2. Demonstrate increased familiarity with health information resources related to older adults as measured by the survey.

**Background:** Research during the past 10 years has revealed that empathy in osteopathic medical students and residents tends to erode during medical school and residency training [1]. The somewhat reductive process of learning the body’s vital systems can distract students from a more holistic approach to their patients. Yet research findings in health professions training indicate that empathy and the ability to help other people are directly correlated, and empathy can lead to more positive clinical outcomes [2]. Treating the constellation of symptoms that patients, especially older patients, present with can be to the detriment of clinical outcomes [3].

**RESULTS & STUDENT REPRESENTATIVE COMMENTS**

Data and comments from the pre and post assessments indicate the project succeeded in its objectives. Descriptive data from the post-assessments showed:

- 92% agreed or strongly agreed that this experience helped them learn about macular degeneration and hearing loss.
- 88% agreed or strongly agreed that the experience helped them learn about macular degeneration from the patient's perspective.
- 89% agreed or strongly agreed that the experience helped them learn about hearing loss from the patient's perspective.
- 93% agreed or strongly agreed that curriculum that includes empathy training is important for their future career.

Because individual students were not provided identifying codes for the pre and post assessments, there was no way to perform a paired t-test to test for significant change, as proposed in our original plan.

- This was definitely a unique experience – I had no idea that sensory deficits of this proportion were actually fairly common in the aging population, and it has really opened my eyes to what elder individuals may be going through.
- This experience was truly eye-opening and I thoroughly enjoyed it.
- We’re all, for the most part, healthy and capable 20 somethings with no sense of what it means to have macular degeneration or any other type of serious degenerative illness. I don’t think this experience necessarily gives us the perfect foundation but what could? It’s a great first step!
- I loved this experience because I think it’s an incredible step forward to incorporating technology into our curriculum and creating a fundamental understanding of some of the symptoms our patients may be experiencing.

**CONCLUSIONS**

- Virtual reality was deemed a successful medical education learning tool enhancing empathy for these medical students.
- Utilizing this technology to create an immersive case study taught these medical students about the aging experience, specifically in regards to what it is like to have macular degeneration and hearing loss from the first-person patient perspective.

**REFERENCES**