

LETTER

Effective Studying Habits of High Performing Medical Students: To What Degree Does It Influence Exam Performance? [Letter]

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Dear editor

We read with great interest the article by Abdulrahman et al¹ on the topic of effective studying habits, and as senior medical students, we offer our perspectives in this letter.

It was intriguing to learn about the variety of study habits of highly effective medical students and the factors which motivated them to pursue their academic aspirations.

The findings of this study are supported by previous studies of a similar nature. A questionnaire-based study from King Abdulaziz University (which was one of the included institutions in this article) found that successful medical students abstained from distractions such as social media, had strong motivation and the majority preferred to study alone.²

Whilst we commend the authors for their work, we believe that there are further points to be considered.

This study did not account for medical students from potentially disadvantaged backgrounds. The authors mentioned that medical students who study effectively learnt from multiple sources and "invest in technology". It is also noteworthy that the majority of the students lived in family privately rented houses as opposed to student dormitories. These findings may imply that financial wellbeing is also a factor that may influence performance of medical students as they cannot afford the same resources. Poorer financial wellbeing of medical students has been demonstrated to be negatively associated with academic performance.³

The authors mention that many Saudi medical schools have adopted modern variations of active studying such as integration of problem-based learning (PBL). Six medical colleges were included in this study and hence variations in the curriculum between medical schools could have influenced the findings of this study. This could have been remediated by carrying out subgroup analyses based on the style of teaching that is delivered to students by their medical school. For example, comparing study practices of students who have a PBL based curriculum to those that have didactic lectures.

From our own experiences as senior medical students, the study techniques we employ have varied with the style of teaching that was delivered. The literature has shown that curricular design influences learning strategies too.⁴

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Highly effective medical students were inexplicitly defined in this study as medical students who had a higher GPA (above 4.0). Despite this, the authors state that students would rely on resources that were more likely to allow them to score higher on their exam. We therefore ask ourselves, how much of the student's exam performance was influenced by effective studying techniques as opposed to the specific resources that students used such as lecture handouts.

A cross sectional design makes it difficult to establish this. We thus propose a prospective cohort study at the beginning of the academic year, with questionnaires throughout the academic year whilst accounting for student financial wellbeing, curricular design, and lecture attendance (as this is where students received handouts).

Disclosure

The authors report no conflicts of interest in this communication.

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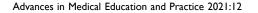
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