MEDICAL EDUCATION IN THE ERA OF VIRTUAL REALITY: PATHOLOGY IN FOCUS

A Literature Review of the Future of Pathology Education through Advances in Digital Technology Lemuel O. Irabor^{1,2}

¹Medical Research and Humanitarian Society, University of Nigeria Enugu Campus ²Faculty of Clinical Sciences College of Medicine, University of Nigeria Enugu Campus

I.INTRODUCTION

1. Background and Importance

The context of medical education has evolved dramatically in recent decades, due to technology developments that have revolutionized how medical students study and practice. Traditional teaching methods relying heavily on didactic lectures, cadaver dissections, and microscopic slide examinations—forming the foundation of a student's understanding of human anatomy and pathology—are now being augmented and in some cases replaced, by digital technologies. These novel digital technologies including computer-based simulations, e-learning modules, and interactive digital resources have largely addressed particular limitations of the traditional teaching methods. [1]

Interesting, there is evidence of an increasing consensus for their adoption. A paper detailing teaching experiences using the MD Anderson Cancer Center Hematopathology Virtual Educational Platform in 2021 demonstrated that, during the COVID-19 pandemic, there was a significant interest in virtual hematopathology teaching on a global scale. [1] This was further reiterated in another research article in 2022, which focused on social media as a primary tool for pathology knowledge acquisition and excellence; emphasizing the impact of tools like Tweetorials on X (formerly known as Twitter) and other platforms for sharing digital images like KiKo (Knowledge in, Knowledge Out). [2]

Virtual Reality: A Paradigm Shift in Medical Training

Virtual Reality (VR) represents a significant shift in the way medical education is approached, particularly in fields that demand an in-depth understanding of both gross (macroscopic) and minute (microscopic) structures, such as pathology. From the introduction of Whole Slide Imaging (WSI) technology in 1999, major advancements in technology over two (2) decades have seen digital pathology transition across borders of medical education and clinical practice [5]. Virtual Reality can be well considered the contemporary step in the evolution of digital pathology [3,4].

VR allows for students' interaction with virtual specimens and environments in ways that traditional methods cannot match, thus providing a level of engagement and activity that enhances learning outcomes.

For pathology education— where understanding the intricate details of disease processes is crucial—VR undoubtedly offers unprecedented opportunities for specimen exploration and advances in pathology practice.

2. Purpose of the Review

The purpose of this literature review is to explore how VR is transforming pathology education, enhancing student engagement: transforming the global medical curriculum, as well as improving knowledge retention and practical skills. Virtual reality, with its ability to create immersive, interactive environments, stands at the forefront of this educational revolution. Furthermore, as the medical field continues to evolve, the methods by which we train the next generation of healthcare professionals must evolve as well. By focusing on the intersection of VR and pathology, this review seeks to provide a comprehensive understanding of how this technology can be harnessed to improve educational outcomes and prepare students for the complexities of clinical practice in contemporary healthcare. Through a critical evaluation of current literature, notable case studies, and empirical evidence, this article will highlight the benefits of VR, address the challenges associated with its implementation, and discuss future directions for this innovative didactic tool.

This literature review is structured into sections covering the background and aim, scope of virtual reality in medical education, a comparison of traditional vs. VR approaches, impact of VR on pathology learning outcomes, evidence from studies, challenges and barriers to VR in pathology education, policy implications, and concludes with key findings, future research directions and recommendations, and a references list.

II. VIRTUAL REALITY IN MEDICAL EDUCATION 1. Overview of VR Technology in Education

Virtual reality (VR) is a computer-generated simulation that replicates real-world or imagined scenarios by submerging viewers in a threedimensional environment. [11,12] Virtual reality (VR) in medical education opens up previously unattainable opportunities for students to engage with virtual patients or patient models, carry out intricate surgeries, investigate and better understand anatomical structures.

In order to produce an immersive and interactive experience, virtual reality (VR) technology frequently uses headsets, motion sensors, and handheld controllers. This allows students to practice and improve clinical skills in a safe and regulated setting without the risk of patient discomfort.

Similar to how 3D printing works, complicated structures can be assembled through VR's 3D representations in a way that isn't achievable with a 2D screen. With VR, it becomes simple to understand how objects of interest are connected spatially. [13] The use of VR in education is not brand-new. Since simulations can mimic complex processes and high-stakes environments, industries like engineering and aviation have long employed them for training purposes. Medical education has started implementing virtual reality (VR) in recent years after seeing how much it may change conventional teaching techniques. With the use of this technology, which can mimic actual medical situations and procedures, students may hone their skills in a way that is both engaging and safe.

2. Applications of VR across Medical Disciplines

Virtual reality is being used in medical education across a range of fields, including surgery, psychiatry, and anatomy. For surgery, a 2017 report by Stanford Medicine reported that, in order to facilitate safer surgeries, the three-dimensional (3D) component of the VR simulation picture helps surgeons plan and enhances surgical accuracy. [15] Through the use of virtual reality (VR) simulations, surgical trainees can practice intricate surgical techniques without the use of cadavers or real patients.

Continuous performance tests (CPTs) have been used in virtual reality environments to assess and enhance the attention span of children who have attention deficit hyperactivity disorder (ADHD) or related conditions. [16] Virtual reality (VR) is utilized in psychiatry to simulate patients, allowing medical students to engage with individuals who exhibit signs of mental health disorders. This offers helpful instruction in diagnosing and treating mental health conditions as well as patient communication.

Because virtual reality is interactive, physiotherapists can monitor and modify treatment plans in real time, promoting neuroplasticity and functional recovery. Patients can practice balance, coordination, and mobility exercises in a safe and controlled environment. [17]

3. VR in Pathology Education

VR integration is especially well-suited for the subject of pathology, which largely depends on the interpretation of both microscopic and macroscopic changes in tissues. Examining real specimens and microscope slides is a common part of traditional pathology instruction [1]. However, access to these resources and their static nature might pose as a challenge and virtual reality (VR) which builds interactive, virtual settings that allow students to examine high-resolution 3D models of diseased tissues and organs overcomes these difficulties. [5,6,7,8]

For example, VR can simulate the histological changes seen in diseases like cancer or inflammatory conditions, allowing students to visualize how these changes progress over time. This dynamic representation provides a clearer understanding of disease mechanisms and helps students grasp the complexities of pathology and augments the diagnosis. Furthermore, VR can integrate clinical case studies with virtual pathology labs, where students can perform virtual autopsies or analyze virtual biopsy samples—perhaps even practice identifying diagnostic markers. These features go a long way in bridging the gap between theoretical knowledge and pertinent practical skills.

III. PATHOLOGY EDUCATION: TRADITIONAL VS. VR APPROACHES

1. Traditional Methods of Teaching Pathology

The traditional approach to pathology education is lecture-based learning. Lectures are usually delivered by experienced pathologists, and serve as the primary mode of coursework delivery, offering detailed explanations of disease processes, histological patterns, clinical presentation and clinical correlations. This is usually augmented by physical, hands-on specimen analysis of cadavers, body fluids and organ samples.

However, these methods come with specific limitations.

For example, the effectiveness of lectures relies heavily on an instructor's capacity to engage students and communicate complex content in an understandable manner. This subjective quality may result in variation in educational quality, particularly in large classes with insufficient personalized attention to students. Again, the availability of the gross specimens may be limited, and their quality may deteriorate over time, essentially hurting the pedagogic experience. Furthermore, the stationary character of physical specimens prevents students from adequately investigating the dynamic and three-dimensional elements of disease processes.

Microscopic slide reviews, another cornerstone of pathology education, provide students with hands-on experience in analyzing histological samples. [1] These sessions usually entail mounting & studying prepared slides under light microscopy to identify essential features of normal and sick tissues which are crucial to diagnosis and prognosis of various diseases. While this method undoubtedly provides vital insights into disease microanatomy, microscopy is frequently hampered by logistical issues such as the scarcity of microscopes and slides especially in resource-poor settings, as well as the time-consuming nature of hand slide examination.

Thus, it is evident that despite their foundational role in pathology education, traditional methods of learning have inherent limitations including accessibility, engagement, and variability in quality; particularly in the constantly-evolving landscape of medical education in era of virtual reality.

2. VR-Based Pathology Education

Digital scanning techniques have taken the place of light microscopy in recent decades. [6] Digital imaging has allowed for faster, more efficient and standardized ways of performing morphological analysis of peripheral blood smears and classifying hematological cells, for instance. [4] The introduction of virtual reality has brought a transformative approach to pathology education, removing many of the constraints associated with older techniques. VRbased pathology education uses immersive, threedimensional settings to provide interactive learning experiences that help students understand complicated pathological concepts. A 2023 review article projected that there would not be any need for tissue processing procedures in the near future, allowing an oral pathologist to study oral tissues immediately. [6]

Again, VR as a digital pathology technology offers remote review and analysis advantages in its usage. Lecturers and students from various institutions across the world can collaborate from any location with an internet connection by using digital versions of gross specimen sections & microscopic slides that are kept in databases. [6, 7] A 2016 case study involving three (3) pathologists employing Oculus Rift[™] Development Kits (DK2) in the review of digital slides reported that the slides were easily viewable and conceivable for medical diagnosis. [8]

Hence, it is demonstrable that VR offers such benefits over traditional methods as enhanced visualization, interactive learning, and accessibility, to medical education.

IV. IMPACT OF VIRTUAL REALITY ON LEARNING OUTCOMES IN PATHOLOGY

1. Enhancing Knowledge Retention and Understanding

One of the most important advantages of virtual reality (VR) in pathology education is its capacity to improve information retention and comprehension of complicated pathology concepts. Traditional techniques, including lectures and book-study, frequently depict pathology in a static, twodimensional (2D) style, which limits students' capacity to visualize dynamic disease processes. [18, 19] In comparison, virtual reality (VR) offers an immersive and engaging learning experience that involves several senses. Students can interact with virtual tissues, investigate disease progression, and manipulate structures in ways that traditional methods do not allow.

2. Increased Engagement and Enjoyment

Higher levels of engagement and satisfaction in learning can result from VR's immersive nature. Students that used a virtual reality pathology lab reported feeling more present and enjoying their education more, which improved their academic performance. [19]

3. Enhanced Comprehension, Improved Patient Care

According to a study, pathology residents who saw these virtual reality videos reported feeling more confident and knowledgeable about processing specimens. They also said that the immersive experience helped them comprehend complicated procedures. [18]

Overall, the integration of VR and virtual microscopy in pathology education has been shown to enhance learning experiences, improve knowledge retention, and foster critical thinking among medical students and residents.

V. CHALLENGES AND LIMITATIONS OF VR IN PATHOLOGY EDUCATION

Currently, there is not a significant presence of virtual reality and digital technologies in hematopathology. [4] As reported, digital scanning techniques have largely taken the place of light microscopy in recent decades. Haematoxylin and eosin (H&E) staining is still the accepted technique, nevertheless. [6] A number of challenges exist to the implementation of virtual reality (VR) in medical education and pathology practice. Understanding these limitations is particularly important for educators and institutions aiming to integrate VR into their curricula effectively.

1. Technological Barriers

Widespread adoption may be hampered by the expensive cost of VR gear and the requirement for technical support. VR systems require sophisticated technology, including high-end computers, specialized software, and headgear or head-mounted displays (HMDs). The cost of a high-end VR headset as reported by a 2023 article ranged from \$999 - 1399 USD (~₩1.6 - 2.26 million, Sep 2024) per unit. [9] Again, VR applications would have to be built, incurring development costs up to and even exceeding \$100,000 USD. [9] A significant obstacle in the visualization of 3D histology is the vast amount of data; full resolution images usually have a size of gigapixels or more. It takes time to read numerous full resolution whole section images (WSIs) into computer memory, which slows down data visualization due to lengthy loading times. Adding feature representations to the modeling of 3D histology data presents additional challenges. [13] Underdeveloped nations like Nigeria, especially, institutions with tight budgets might not be able to make the kind of financial commitment required for broad adoption.

Furthermore, the cost of upkeep and regular updates for virtual reality (VR) devices, as well as staff and faculty training, drives up the overall cost even in settings with ample resources. This can create disparities in access to high-quality contemporary medical education, with students at wealthier institutions benefiting disproportionately from these technological advancements.

In addition to the cost, technological challenges arise when using VR in educational settings. VR systems are frequently resource-intensive, necessitating high computational power and reliable internet connectivity for maximum performance. Lagging, software flaws, and hardware malfunctions can all degrade the learning experience and limit the efficacy of VR simulations.

2. Pedagogical Concerns

VR experience design and execution need to match the educational goals of medical programs. Teachers need to make sure that virtual reality is used to enhance existing teaching methods rather than completely replace them. Virtual reality (VR) has certain advantages, such as the capacity to model dynamic processes and visualize intricate structures, however it should be considered an additional tool. Furthermore, VR requires a degree of digital literacy that not all students may possess. There is a learning curve involved in adopting VR technology for both teachers and students, which could call for more resources and training.

Another problem is striking a balance between the many ways that pupils learn and the use of virtual reality. While some students might flourish in an immersive, technologically-driven setting, others might find it difficult or intimidating. When offering a range of learning resources, instructors need to take care to integrate VR in a way that accommodates a range of learning styles — perhaps balancing VR with traditional methods to obtain optimal teaching experiences for all involved.

Also, potential over-reliance on VR technology could lead to an under appreciation of traditional techniques, such as hands-on slide examination and in-person specimen analysis, which remain fundamental in pathology education.

3. Ethical and Privacy Considerations

It's important to think about the ethical ramifications of utilizing virtual reality in medical education. Certain virtual reality platforms, especially those that incorporate patient simulations, depend on actual medical data to generate precise and realistic scenarios. When such data is used, privacy issues arise, particularly if the VR system is cloud or network-based and could expose private data to security lapses. To guarantee that patient data is de-identified and managed securely to preserve privacy, certain standards must be in place. [10]

Teachers need to think carefully about how to handle these simulations as virtual reality gets more sophisticated and lifelike so that they are carried out responsibly and with respect.

VI. FUTURE DIRECTIONS AND INNOVATIONS

Virtual reality (VR) in particular shows potential for training medical workers on a range of operations, including laparoscopic surgery and medical database review. Developing treatment plans and aiding in the recovery of patients with illnesses like autism, cancer, and mental problems are other crucial aspects of its work. Moreover, these technologies offer improved learning chances for remote students who may lack the means to go to different places for specialized study. They make it possible to create dynamic and interesting clinical modules, which are especially helpful for excluding alternative diagnoses in complicated medical situations. [6]

Mixed reality (MR)

The way medical professionals and students learn and practice could be completely transformed by the introduction of Mixed Reality (MR), which includes both Augmented Reality (AR) and Virtual Reality (VR), into pathology education. Through the creation of fully immersive environments or the overlaying of digital material onto the real world, MR provides novel ways to comprehend intricate pathological ideas.

Artificial Intelligence (AI)

Researchers from all around the world are currently focusing on using AI-based picture analysis to diagnose a variety of oral lesions. As a result, this technology can help an oral pathologist decide quickly on further investigative examinations and histopathology reports for their patients. In the field of oral pathology, artificial intelligence (AI) was developed to address the heterogeneity in morphologic diagnosis and to produce consistent and dependable diagnostic findings. [6,7] The twodimensional (2D) format of the AI technique is a limitation. Nonetheless, the primary benefit of the AI method for diagnosing images is that it eliminates the inconsistent nature of both intra- and inter-observer variability. [6,7,20]

Incorporating AI and MR

Artificial intelligence (AI) will be included into MR in pathology education in the future to establish individualized learning pathways. AI can evaluate each learner's performance and modify MR simulations to fix particular flaws, improving the educational process. Large language models and multimodal tools are examples of generative AI technologies that have the ability to completely transform educational methods by delivering individualized learning experiences and assisting teachers and students across the training continuum. [20]

VII. CONCLUSION

A paradigm shift in how students learn and interact with intricate medical ideas has been brought about by the use of virtual reality (VR) into medical education, especially in pathology. Traditional issues in medical education, such as restricted access to uncommon clinical cases, the static character of textbooks, and variations in the caliber of instruction among schools, are addressed by virtual reality (VR), which provides immersive, interactive, and adaptable learning environments. It improves student engagement, fosters the development of practical skills, and strengthens knowledge retention, giving aspiring medical professionals the resources they need to succeed in clinical settings.

Despite its transformative potential, VR in medical education is not without challenges. To guarantee its equitable and efficient usage, several obstacles must be addressed, including high prices, technological constraints, ethical issues, and the requirement for balanced curricular integration. Long-term studies are also necessary to assess VR's long-term effects on professional performance and clinical competency.

With increasingly sophisticated features and easier accessibility, virtual reality technology will surely play a bigger part in medical education as it develops further. Policymakers, technologists, and educators must work together to realize its full potential. VR has the potential to transform medical education, close the gap between theory and practice, and eventually improve patient care results in the future by resolving the present constraints and guaranteeing careful implementation.

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