



An international multifaceted educational program about *Acute Kidney Injury* across Latin America

Raúl Lombardi¹, Alejandro Ferreiro^{1,2}, Guillermo Rosa-Diez^{1,3}, Álvaro Margolis⁴, Luis Yu^{1,5}, Mauricio Younes-Ibrahim^{1,6}, Emmanuel A. Burdmann^{1,5}, Fátima Oeyen⁴ and Walter Douthat⁷

1 AKI Commission, Latin American Society of Nephrology, Montevideo, Uruguay; 2 Department of Nephrology, Hospital de Clínicas, School of Medicine, Universidad de la República, Montevideo, Uruguay; 3 Department of Nephrology, University Institute of Hospital Italiano, Buenos Aires, Argentina; 4 EviMed, Montevideo, Uruguay; 5 Nephrology Division, University of São Paulo Medical School, São Paulo, Brazil; 6 Department of Internal Medicine, School of Medicine, University of Rio de Janeiro, Rio de Janeiro, Brazil; and 7 Latin American Society of Nephrology; Department of Nephrology, University Hospital Privado, Córdoba, Argentina

Contact information: alvaro.margolis@evimed.net

BACKGROUND

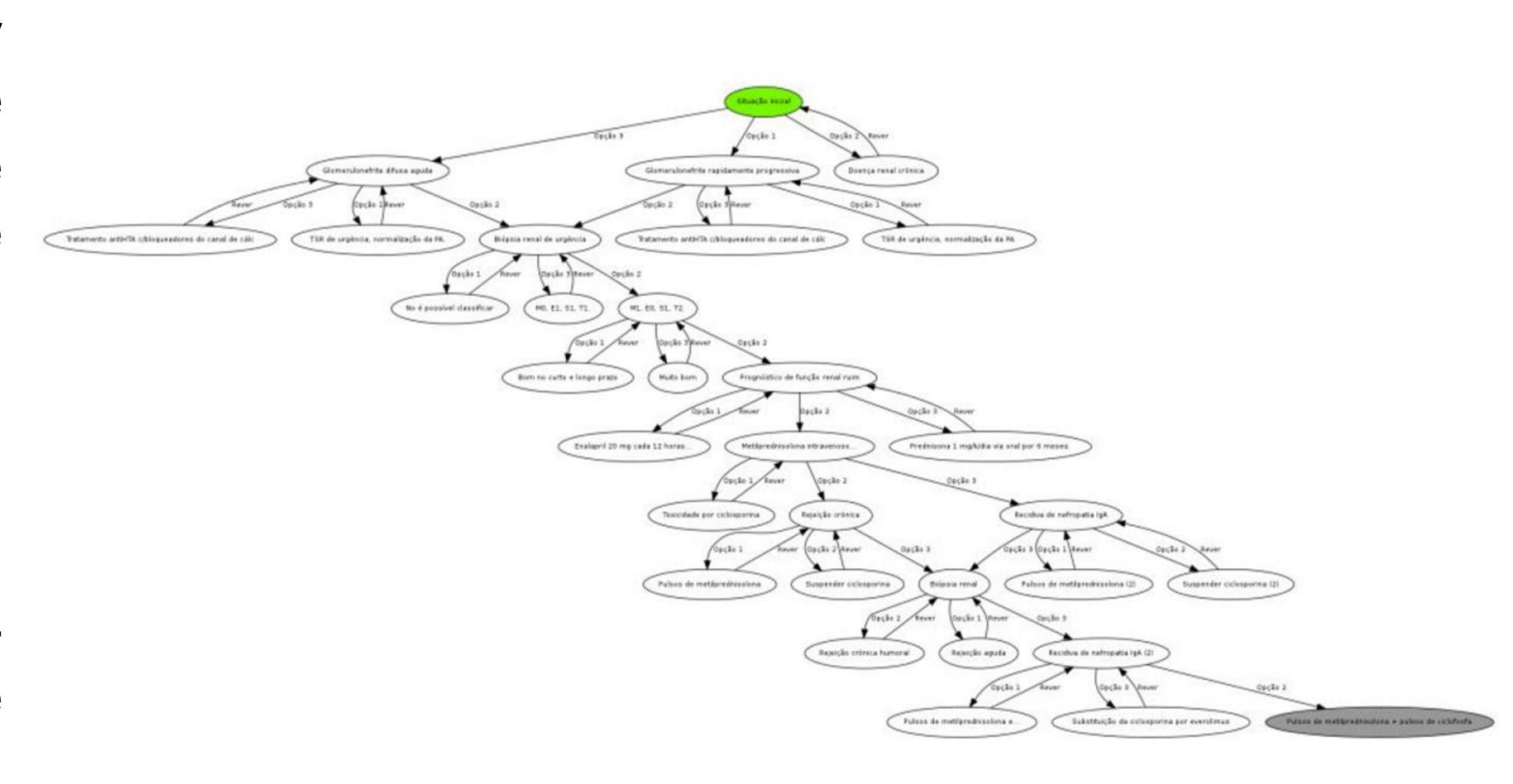
Latin America is a large and diverse region of over 20 middle-income countries, with 600 million people and one million physicians, who speak two main languages, Spanish and Portuguese.

Raising awareness on acute kidney injury (AKI) is an essential strategy for minimizing the burden of this lethal syndrome, and so the AKI Commission of the Latin American Society of Nephrology and Hypertension, together with EviMed, carried out an educational program based on networked learning.

METHODS

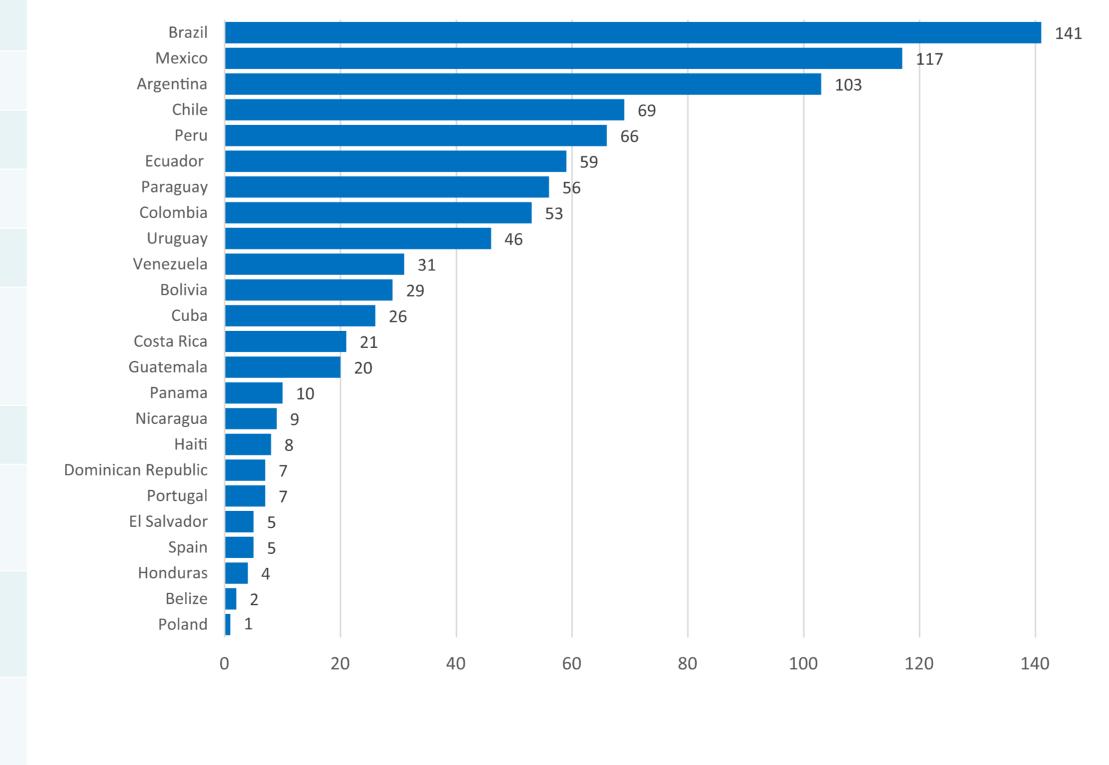
Two online courses with similar methodology were done, one for nephrologists and the other for primary care physicians (PCP). The courses were developed as Massive Online Courses, with a distance education, asynchronous online modality including multiple educational strategies: readings, videos, e-rounds and clinical simulations.

Knowledge gain was explored through a 10question test before and after completing the course.



RESULTS

	Nephrologists	Primary care physicians
Study work load /Duration	30 hours / 2 months	14 hours / 1 month
Participants	779	2011
Countries	24	27
Access	For a fee	Free
Number of access to texts	19289	7162
Number of access to videos	21384	13197
Gain of knowledge	36.5%	N/A
Evaluation good/very good	94%	97%
The best	Clinical simulation (60%)	Educational design
The worse	Nothing in particular (65%)	Nothing in particular (64%)
Main limitation for learning	Lack of time	Lack of time





CONCLUSIONS: Distance education for massive professional audiences was effective for learning about AKI, and is a potential tool for the development of a sustainable structure for communication, exchange and integration of physicians involved in the care of patients with AKI.