At the end of this century medical care systems throughout the world are facing major crises and undergoing major reform. All system and health care providers are realizing that there is not enough money anywhere in the world to pay for all the new medical technology. The USA spends approximately 1,250 billion US$ annually in medical care, whereas developing countries such as Brazil, which try to follow the American model, spend around 30 billion US$ and the result is an almost complete disaster as regards the health of the population. A further problem in Brazil is that medical schools as well as post graduate programs all follow the American system, thus perpetuating the crisis.

Fortunately many of our universities are well aware of this problem and are searching for ways to minimize the problem. One alternative for countries like Brazil could be to seriously consider more investments in the health education of the population from primary school up to postgraduate courses.

The pursuit for efficient use of resources in the US, Canada, the UK and other industrialized countries has led to the implementation of a “gate keeper”, another name for the general practitioner, and to the application of evidence based medicine. In other words, the role of the general practitioner will be fundamental and medical care will be bound to decisions guided by the current best available evidence.

In the last 18 months, during the Internal Medicine Graduation Program of the Escola Paulista de Medicina, we had the opportunity to incorporate into the teaching process the problem based learning (PBL) system and evidence based medicine. In this program the students receive training in the PBL system to identify the health problems of the patients and to decide on the best treatment based on the best available medical evidence.

At the same time students attend a course on evidence based medicine which emphasizes the importance of critical appraisal of medical literature; they also have the opportunity to make use of the resources of the Centro Cochrane do Brasil.

A student satisfaction survey showed students’ enthusiasm with the course. Personally I also observed the same feeling within faculty members. We therefore believe that inclusion of linked programs on PBL and evidence-based medicine in all graduate and postgraduate medical program may be a good strategy to use resources more efficiently, following the examples set by Canada and the UK. Time is short, especially our own time, we should not waste it.