

Enhancing gastroenterology education through e-learning

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E-learning has revolutionized medical education by providing flexible, accessible, and interactive learning opportunities. This article explores the transformative impact of e-learning on gastroenterology education, highlighting the advancements and benefits brought by the American Society for Gastrointestinal Endoscopy (ASGE) platforms. ASGE's e-learning platforms offer specialized content, interactive tools, and continuous updates, enhancing the learning experience for gastroenterologists. (Gastrointest Endosc 2026;103:654-60.)

(footnotes appear on last page of article)

INTRODUCTION

The specialty of gastroenterology is rapidly evolving as the result of endoscopic and pharmacologic advances, necessitating gastroenterologists, both in training and in practice, to keep up with progress in medical knowledge and technology. Traditional methods of Continuing Medical Education (CME) rely on publications and periodic in-person meetings where didactic lectures or hands-on training are delivered to a classroom of learners. Given the rapid pace of advancement, textbooks have largely been relegated to acquiring core knowledge or for comprehensive review. With the advent of the internet, widespread and instantaneous dissemination of information became possible and started the e-learning era.

E-learning can be described as the delivery of education through digital platforms, typically online via the internet. This allows the learners more flexible access to content and lends itself to novel and asynchronous methods to facilitate learner interaction.

For the first few decades, e-learning was in the form of websites that housed electronic versions of published documents. The ability to use web-based search engines allowed these websites to become easily searchable and attracted a lot of learners.¹ An example of this is the guidelines page on the American Society for Gastrointestinal

Endoscopy (ASGE) website, which has been immensely popular with society members globally.

Structured e-learning initially was explored as a secondary tool to engage distant learners who could not access more traditional learning chiefly because of a lack of local expertise and an inability to travel to traditional forums of education; however, in 2020 the COVID-19 pandemic significantly accelerated e-learning in medicine, particularly in gastroenterology. Out of necessity, online educational instruments and platforms were rapidly adopted to maintain continuity of medical education amidst social-distancing measures.² Since then, e-learning has been solidified into the educational fabric for learners across all subject and content domains. This white paper highlights the evolution of e-learning, particularly in gastroenterology, discusses e-learning initiatives offered by the ASGE, and postulates on future trends that may significantly influence learning in the future.

THE ROLE OF E-LEARNING IN GASTROENTEROLOGY

The complexity of disease and evolution of endoscopic procedures in gastroenterology necessitate ongoing education and training to ensure health care professionals remain proficient with the latest diagnostic and therapeutic

techniques. Traditional teaching methods often lack flexibility and fail to engage adult learners effectively. E-learning can overcome these limitations because it allows for more flexible, self-paced, and asynchronous access and has the potential to incorporate methodologies such as flipped classroom, microlearning, collaborative learning, and interactive learning to enhance the educational experience.³ Social media platforms can act in synergy to facilitate collaborative learning and knowledge-sharing among gastroenterologists. Since the advent of e-learning strategies, several studies have found that e-learning has high acceptability, leads to improvement in knowledge retention, and in trials, is more effective than traditional education amongst medical students and resident trainees.^{4,5} Simulation exercises, both virtually and physically, including partial task trainer integration, can further augment and solidify the skills represented in e-learning modules.

KEY COMPONENTS OF EFFECTIVE E-LEARNING PROGRAMS

As mentioned previously, e-learning can offer significant advantages for adult learners over the traditional formats. Structured e-learning programs should follow similar core principles as traditional learning and incorporate, with key components including:

- 1) Clear objectives: Activities should have specific learning objectives and structured curricula informed by needs assessments and learner feedback.⁶
- 2) Interactive design: Engaging learners virtually can sometimes be more challenging, and elements such as online polling, chat-based question-and-answer, and case-based discussions can enhance engagement. Virtual simulations provide practical, hands-on experiences in a controlled environment. With the increase in use of handheld devices such as smartphones or tablets, gamification and scheduled content delivery are other approaches used to enhance user interaction.⁷
- 3) Faculty training: Educators must be proficient in digital tools and online pedagogical strategies to design effective e-learning experiences.
- 4) Assessments and feedback: Providing assessments and feedback is crucial, because e-learning can be very different from traditional learning methods. E-learning platforms offer the ability to create posttest assessments and use them to identify knowledge gaps, which then can be improved through spaced repetition of focused teaching points, often in bite-sized content, also known as microlearning. Regular assessments and feedback also support test-enhanced learning, track learner progress, and identify areas for improvement. This has been shown to improve knowledge acquisition and retention.^{8,9}
- 5) Content revision and periodic updates: Medical knowledge and associated literature continue to expand expo-

mentally, and e-learning platforms are advantageous over traditional learning in that they can incorporate advances more rapidly. Therefore, it is imperative that e-learning platforms be regularly updated on the basis of evaluation data and the latest advancements in the field, as well as include built-in technical support to troubleshoot any software glitches.

- 6) User-friendly platforms: From the end-user perspective, these platforms should be easily accessible and intuitive to navigate while providing asynchronous learning opportunities, allowing learners to access content at their own pace and convenience. This flexibility is particularly beneficial for medical professionals with varying schedules or who are in different time zones. By incorporating these components, e-learning can provide a comprehensive and engaging learning experience.

HYBRID LEARNING

Hybrid learning in the context of e-learning platforms for gastroenterology refers to an educational approach that combines e-learning with traditional face-to-face classroom methods. This model leverages the strengths of both asynchronous and synchronous learning to enhance the educational experience. Hybrid learning has been shown to increase engagement, support diverse learning styles, and improve outcomes.^{4,10}

The flipped-classroom strategy is particularly effective in hybrid courses. Flipped classroom is a teaching approach in which the traditional approach of classroom didactic education is reversed and students are given pre-course study materials and the class time is used for more active collaborative learning, group projects, and discussions. This allows learners to complete precourse self-paced study followed by the acquisition and refinement of skills and techniques on the basis of that knowledge. Incorporating postmodule assessments supports test-enhanced learning by helping learners identify knowledge gaps to focus on during in-person sessions.⁹ This approach makes hybrid courses more flexible, learner-centered, and effective at consolidating both cognitive and technical skills.

ASGE's E-LEARNING OPPORTUNITIES

Recognizing the potential and advantages of e-learning for adult learners and busy professionals, ASGE has strategically developed comprehensive and diverse educational opportunities for all levels of learners including fellows in training, physicians, nurses, technicians, and even industry partners (<https://www.asge.org/home/education-meetings/education>). ASGE members have easy access to a broad range of educational materials, with easy navigation and efficient search capabilities. These include resources that

can track CME and Maintenance of Certification (MOC) credits for users.

GI Leap: ASGE's e-learning platform

GI Leap (<https://www.asge.org/home/education/advanced-education-training/online-learning-gi-leap/gi-leap-lp>) is an advanced e-learning platform designed to provide optimal learning experiences for gastroenterologists. It is the anchor to ASGE's e-learning offerings and incorporates cutting-edge technology to deliver high-quality educational content and offers accessibility on various devices, including offline capabilities. GI Leap offers a vast library of educational resources, including videos of procedures, webinars, and courses. ASGE members have easy access to a broad range of educational materials, with easy navigation and efficient search capabilities.

GESAP/GESAP mentor

GESAP (Gastrointestinal Endoscopy Self-Assessment Program; <https://www.asge.org/quicklinks/gesap/gesap-mentor>) is ASGE's premier educational tool that allows learners to stay current in the ever-changing field of not just endoscopy, but also in gastroenterology and hepatology, with the latest clinical developments and guidelines highlighted in multimedia, case-based scenarios. It currently has 13 modules with several options for individuals to access.

GESAP uses a commercially available interval-reinforcement methodology that is scientifically proven to improve proficiency (process of increasing one's level of expertise in a specific area as a measure of knowledge improvement and retention and a measure of how well someone can apply their knowledge to solve problems), and durably change behaviors with measurable impact on outcomes.¹¹⁻¹³ Spaced-learning, immediate answer feedback, and repetition with knowledge reinforcement that is provided can lead to improved engagement and performance.¹⁴ The online learning platform provides an optimized, seamless experience that can be accessed on any device or system at one's own pace, supporting flexibility for today's busy learners and increasing productivity. GESAP uses scenarios in a case-based format to make learning relevant to clinical practice.

For example, with GESAP Mentor (the GESAP version used in GI fellowship programs), preliminary data show that in 16 GI fellowship programs with a total of 193 participants, the overall proficiency gain for all modules was 66% (Fig. 1). In addition, GESAP Mentor was able to identify areas of knowledge deficit that programs could use to focus attention on specific lectures and case-based discussions to improve proficiency. Fellows using GESAP Mentor report increased engagement, knowledge retention, and proficiency. The ability to identify each fellow's knowledge needs allows fellowship directors to personalize learning.

HYBRID COURSES

Skills, Training, Assessment, and Reinforcement certificate programs

Hybrid course offerings at ASGE include the Skills, Training, Assessment, and Reinforcement (STAR) (<https://www.asge.org/home/education/advanced-education-training/star-certificate-programs>) Certificate Programs. The STAR programs use simulation-based hands-on practice with reflective feedback, foundational learning with e-learning, which includes postmodule assessments to support test-enhanced learning, and contextual understanding through didactic and case discussions to teach performance of advanced endoscopic procedures.

The curriculum for each STAR program includes 2 sequential training components. The first phase is e-learning, which involves taking a baseline test to gauge the participant's knowledge, reading expert-curated literature on subject matter guidelines and technology, and watching instructional videos that address the subject matter from ASGE's Endoscopic Learning Library (GI Leap). A postcourse test not only gauges changes in the participant's knowledge but primes participants for the second, hands-on phase. The second phase is the Live Course and Assessment, which focuses on technical skill development with hands-on training led by the field's leading subject matter experts at the ASGE IT&T Center, case-based video panel discussions, video debriefing, and concludes with a one-on-one skills assessment. Upon successful completion of the knowledge and skills-based assessment requirements for the course, participants receive a STAR Certificate of Completion and transcript that include details on the program's curriculum, the CME/MOC they earned, and the feedback from their hands-on skills assessment. These elements create a comprehensive, learner-centered approach that prioritizes competence, self-reflection, and clinical readiness, preparing learners for clinical integration into their practice.

An example of the effectiveness of the ASGE hybrid, competency-based learning model is the STAR Lower GI EMR endoscopy course, which significantly enhanced both cognitive and technical skills in endoscopists training in endoscopic mucosal resection (unpublished internal ASGE data). For this program, the course directors developed 12 technical milestones for lower GI EMR. The cognitive portion of the curriculum combined online e-learning with in-person didactic sessions, whereas the technical component consisted of hands-on training. Cognitive skills were measured using 2 separate examinations administered pre- and postcourse completion. Technical skills were assessed using standardized evaluation tools for lower GI EMR procedures performed on ex vivo models. Of the 20 participants participating in the 2025 lower GI EMR course, postcourse cognitive skill scores were improved significantly, from $69.8\% \pm 8.5\%$ to $96.1\% \pm 6.2\%$ ($P < .0001$) (Fig. 2). The proportion of participants rating the overall quality of

Proficiency Before and After Using the Online Self-Assessment Tool for Streams 1, 2, 3 & 4

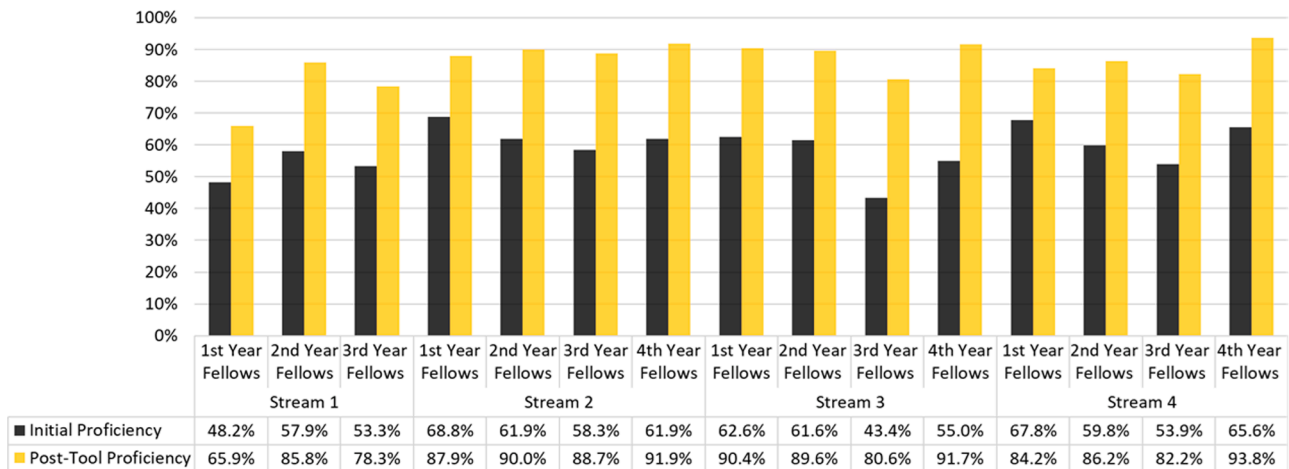


Figure 1. Proficiency before and after using the online self-assessment tool for streams 1, 2, 3, and 4.

the course as “excellent” (highest rating) was 92.9%. [Table 1](#) collates the various e-learning and hybrid learning opportunities offered by ASGE in addition to traditional learning opportunities through in-person meetings and monthly publications.

CHALLENGES IN IMPLEMENTING E-LEARNING

Although e-learning is an effective and often more feasible alternative to traditional instruction methods, it can present challenges that should be considered and monitored in offerings.¹⁵ These include:

- 1) **Technological barriers:** From the technological aspect, having a robust digital infrastructure to handle high web-based traffic and provide seamless user experiences is essential. The ability to provide secure content and regulate the user interface in a digitally friendly learner-oriented manner is important to avoid advertent or inadvertent abuse or misuse of the online platform. Solutions to overcome these barriers include investing in secure, scalable platforms.
- 2) **Educator preparedness:** Educators and teaching faculty have traditionally not been trained in e-learning methodologies, and this can lead to ineffective content ie, developed to mirror traditional didactic teaching. Therefore, training educators in technical skills and digital tools is essential for more effective teaching.
- 3) **Learner resistance:** Adult learners not used to e-learning may have some resistance or apprehension to these platforms that in general are overcome through continued engagement and streamlining of the end-user interface.
- 4) **Content updates:** Unlike traditional learning resources that have a publication date, information disseminated by e-learning resources is expected to be current or

near-current. The pace of medical research is rapidly accelerating, driven by technological advancements and a growing understanding of disease. To keep pace with the new information and evolving learner need, regular content review and updates add to the financial and logistical burden. This should be tracked and accounted for in any e-learning platform budget.

- 5) **Standardization issues:** Other challenges with distance learning include variability in learning outcomes that may lead to learner disengagement.¹⁶ In addition, regulations associated with e-learning may be less robust than traditional teaching, which is most commonly done through accredited institutions or organizations. Caution must be maintained when evaluating e-learning programs because the lack of standardization may unintentionally yield quality control concerns for the disseminated material. Accreditation standards should be maintained to ensure quality and consistency across programs.

FUTURE TRENDS IN E-LEARNING FOR GASTROENTEROLOGY

E-learning for medical education has the ability to transform the future of learning. The future of e-learning in gastroenterology lies in harnessing emerging technologies such as:

Virtual reality (VR), augmented, and mixed reality: New technologies, including VR, augmented reality, and mixed reality, can enhance learning experience by providing an immersive and interactive environment to simulate clinical scenarios and allow learners to practice new endoscopic skills in a safe and controlled setting.¹⁷

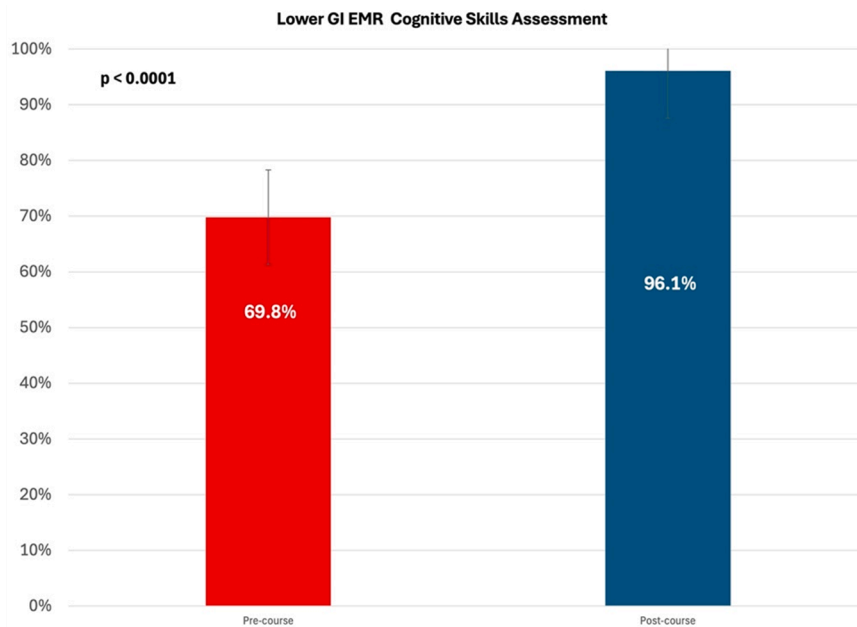


Figure 2. Cognitive skill assessment scores before and after completing the 2025 STAR Lower GI EMR endoscopy curriculum. *STAR*, Skills, training, assessment, and reinforcement.

TABLE 1. E-learning and hybrid learning opportunities available through the ASGE

Educational offering	Learning format	Frequency	Educational credits offered	Cost
ASGE guidelines	Repository of published content	Available anytime	N/A	Free to all users
ASGE tech assessments	Repository of published content	Available on website		Free to all users
Video tips	Video-based education	Monthly	N/A	Free to members
Video tips	On-demand repository	Monthly	N/A	Free to members
Journal scan	E-mail-based commentary	Weekly	N/A	Free to members
Digestibles	Case-based microlearning	Every 2 days for 6 weeks	N/A	Free to members
Endo Hangout	On-demand webinar	Multiple times annually	N/A	Free to members
ASGE STAR certificate programs	Hybrid (e-learning, on-demand + live hands-on)	Annually	CME and MOC	Additional cost
ASGE Masterclass	On-demand, virtual	Multiple times annually	CME and MOC	Additional cost
ASGE Recognized Industry Associate (ARIA) program	Hybrid (e-learning, on-demand + live hands-on)	Multiple times annually	N/A	Additional cost
ASGE Annual GI advanced practice provider course	Hybrid (e-learning, on-demand + live hands-on)	Annually	CME and MOC	Additional cost
ASGE first-year fellows course	Hybrid (e-learning, on-demand + live hands-on)	4 times per year	CME and MOC	Free to first-year trainee members
ASGE Golden Scopes	Hybrid on-demand + live component	Annually	N/A	Free to trainee members
ASGE senior fellows course	Hybrid (e-learning, on-demand + live hands-on)	Annually	N/A	Free to trainee members
GIE	On-demand	Monthly	CME and MOC	Free to members
Video GIE	On-demand	Monthly	CME and MOC	Free to all users

ASGE, American Society for Gastrointestinal Endoscopy; CME, continuing medical education; MOC, maintenance of certification; N/A, not available; *STAR*, skills, training, assessment, and reinforcement.

Artificial intelligence (AI): The rise in the use of AI in learning also can be harnessed to help adapt and personalize learning to an individual's learning style, geographic location, practice environment, or knowledge gaps.

Global collaboration: There has also been a trend in collaborative learning through online peer interactions and global knowledge sharing. The Digestibles program through ASGE (presented via a microlearning platform) is one such example that is designed to increase knowledge and levels of retention in a convenient, engaging interaction. Participants receive 3 rounds of 12 to 15 questions, spaced a few questions at a time over a period of 6 weeks, with the ability to engage at a time that works for their schedule. Increased proficiency ratings keep learners coming back for more. This program has engaged learners from fellows in training to those with more than 10 years of experience, across 60 countries globally. This type of global engagement helps accelerate both learning and advancement in science, collaboration, and may eventually help to improve patient care.¹⁸

CONCLUSIONS

E-learning has significantly transformed gastroenterology education by providing flexible, accessible, and interactive learning opportunities. The ASGE has been at the forefront of this transformation, with platforms including GI Leap, GESAP, and hybrid offerings such as STAR and the ASGE Recognized Industry Associate programs. These platforms incorporate advanced technologies, including virtual simulations and spaced learning, to enhance knowledge retention and proficiency. Despite a few challenges around technological barriers and standardization, the future of e-learning in gastroenterology looks promising with the potential of emerging technologies like VR and AI that can help personalization of education on a global scale.

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Abbreviations: AI, artificial intelligence; ASGE, American Society for Gastrointestinal Endoscopy; CME, continuing medical education; GESAP, Gastrointestinal Endoscopy Self-Assessment Program; MOC, maintenance of certification; STAR, skills, training, assessment and reinforcement; VR, virtual reality.

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