



CHOICE OF PSYCHIATRY AS A PROFESSION AMONGST MEDICAL GRADUATES: A CROSS SECTIONAL SURVEY OF CAREER CHOICES MADE BY KEMU GRADUATES OF 2008TO 2010

# AFTAB ASIF', SHAHANA NAZ', USMAN AMIN HOTIANA'

'MBBS, MRCPsych., Professor, Chairperson of Academic Psychiatry, King Edward Medical University 'MSClinical Psychology, Research coordinator & Clinical psychologist, King Edward Medical University 'MBBS, FCPS (Psych.), Assistant Professor (HEC),King Edward Medical University

# FOR CORRESPONDENCE

Dr. Usman Amin Hotiana, Ph: 0333 425 3170, Email: [drhotiana@gmail.com](mailto:drhotiana@gmail.com)

# ABSTRACT

**OBJECTIVE**

To determine the speciality preference amongst doctors during house job and postgraduate studies,their preferred place of working

/ choiceofcontinuationin their profession.

# DESIGN

Survey research design.

# PLACEANDDURATIONOFSTUDY

The study was conducted at the Academic Department of Psychiatry & Behavioural Sciences, King Edward Medical University, Lahore, Pakistan from March 2014to September 2014.

# SUBJECTS ANDMETHODS

Doctors of King Edward Medical University,session 2008 to 201Owere contacted through a mail survey by using convenience sampling. After ethical approval, 600 doctors were sent a questionnaire. 401 doctors responded. The questionnaire covered the demographic details, preferences about career, specialties, post-graduation program andcurrent workingplace.

# RESULTS

Our study revealed that out of 401 doctors who responded, 53% were female and 47%were male witha mean age of28.5 years(±1 ,4). 277 (69.1%) were doing their post-graduation in different specialties. 60% wereworking in Pakistan while40%doctors hadproceeded abroad. A majority of doctors have continued in their profession (80%), while 20% have changed their profession to another field. 39.4% of those who responded are working in government hospitals. Medicine and surgery were the most preferred specialitieswhile psychiatry was the third least preferred speciality, followed only by dermatology and pathology. Basic sciences were a lower priority than clinical fields. Majoritypreferred to work in major citiesorgoabroad.

### CONCLUSION

Most doctors continue to pursue their own profession amongst both the genders. Psychiatry is an uncommon choice made by fresh graduates. Medicine isthe commonest careerchoice. Fellowship and Membership of College of Physicians and Surgeons, Pakistan are the commonest postgraduate programmes chosen. A large number of doctors however continue to opt to settle abroad.

# KEYWORDS

doctors,graduates,specialties,career,medicine,surgery, psychiatry

# INTRODUCTION

Understanding patterns of career choices in medical field is important for educators and policy-makers to plan the supply of specialists'. Medical students are a significant factor regarding the future of any country's health care system'. Career choice of medical students and young doctors is a topic that continues to attract the interest of medical educators and health service providers'.Career preferences canhelp provideimportant health information to aid in planning educational programs, setting priorities,and planning for the provision of adequate health care to general public.'

Pakistan has along-standing deficiency of psychiatristsandthere is an ever increasing need for doctors to opt for this profession in Pakistan. This however has not been the case. Past studies in many countries have also revealed that an increased number of women doctors continued with their postgraduate training and their choice of specialties differs from those of males. General practice, community medicine, anaesthesiology, radiology, pathology and psychiatry were more popular among women thanmen.'

Medical specialties within an institution can influence the career choices of medical students and practical experience in a particular field is a major factor spurring a student'sinterest in a particular specialty'. Despite producing a large number of doctors each year, Karachi loses65 - 95% of its graduates as they move abroad'. It has also been recorded that a large number of female doctors opt out of profession to be housewives on account of the socio-culturalvaluesof Pakistan'.

Thisstudy aims to highlight the speciality preference of medical graduates of King Edward Medical University in the yearsof 2008- 201 and the trends of opting out of medical profession and to settle abroad. The authors' prime interest was to identify the interest for psychiatry as a profession amongst the study population.

### SUBJECTS AND METHODS

Doctors whograduated in 2008, 2009and 2010 were included in this study. The authors developed a structured, cross sectional self-administered questionnaire in English language. 14 items questionnaire collected data on age, sex, marital status, house job specialities, career specialties, changing profession, living



place and current working place. The forms did not require filling of the identity of the responder. The Ethical Review Board of King Edward Medical University Lahore,Pakistan approved theprotocol of the study. A pilot study was conducted with 10 medical doctors to ruleoutany ambiguity in the questionnaire, and the pilot study data was not included in the final analysis. Minor changes were made in the questionnaire after the pilot study had been conducted. Graduates of KEMU from 2008-2010 who agreed to participate were included and informed consent was taken. Email addresses of all participants were taken from the admission office of KEMU. Data collectors completed thesurvey byemailing the questionnaire using convenience sampling. Collected data was analysed through SPSS. Percentages were calculated for variousvariables ofthestudies.Data were presented in the form of tables. Descriptive statistics were computed. No conflict of interests was encountered in the entire studyperiod.No funding wasobtained from any sources.

## RESULTS

Atotal of600doctors wereapproached, however401(66.8%) doctors returned completely filled out questionnaires.Out of theresponders, 190 (47.4%) were males and 211(52.6%) were females.The mean age oftheresponders was (28.5±1.4).Most responders were married 209 (52.1%). As shown in Table 1,328 (81.8%) doctors continued in their profession. Those who left the profession, switched to CSS (7.2%), business (2.7%) and other fields (8.2%). 158 (39.4%) doctors were working in Government hospitals (female18.7%and male 20.7%). 83 (20.7%) wereworking in privatehospitals andonly 5in privateclinics.

#### TABLE: 1

The General Characteristics and Other Related Variables of Present Study Participants (N=401)

|  |  |  |  |
| --- | --- | --- | --- |
| **Characteristics** |  | **n(%)** | |
| Gender | Male | 190 (47.4) | |
| Female | 211 (52.6 |  |
| Years | 2008 | 122 (30.4) | |
| 2009 | 134 (33.4) | |
| 2010 | 145 (36.2 |  |
| Marital status | Sinole | 187 (46.6 |  |
| Married | 209 (52.1 |  |
| Divorced | 3 (0.7) | |
| Seoarated | 2 /0.5) | |
| Time of marriage | Durina MBBS | 29 (7.2) | |
| AfterMBBS | 116 (28.9 |  |
| After Part I FCPS/MD/local entry exam/foreign exam | 63 (15.7) | |
| Hostel | Boarder | 230 (57.4) | |
| Non boarder | 171 (42.6) | |
| Continue profession | Yes | 328 (81.8) | |
| No | 73 (18.2) | |
| Other fields | css | 29 (7.2) | |
| Business | 11 (2.7) | |
| Other | 33 (8.2) | |
| Working place | Home / librarv | 38 (9.5) | |
| Government hospital | 158 (39.4) | |
| Private clinic | 5 (1.2) | |
| Private hosoital | 83 (20.7) | |
| Govt. &orivate hosoitals | 40 (10.5) | |

Most of the doctors were doing their post-graduation in different specialties(277, 69.1%) while 124 (30.9%) did not. Of the following, medicine specialty (79, 19.7%), Surgery was the second most chosen by doctors (n=35, 8.7%). (Table 2).

#### TABLE: 2

Specialties and Post-Graduation Programs Chosen By Doctors and Their Corresponding Frequencies andPercentages

|  |  |  |
| --- | --- | --- |
| **Specialties** |  | n (%) |
|  | Anatomy | 7 (1.7) |
|  | Cardiology | 8 (2.0) |
|  | Dermatology | 6 (1.5) |
|  | Gastroenterology | 20 (4.9) |
|  | Gynecology | 28 (7.0) |
|  | Medicine | 79 (19.7) |
|  | Neurology | 18 (4.5) |
|  | Ophthalmology | 11 (2.7) |
|  | Orthopedics | 9 (2.2) |
|  | Pathology | 5 (1.2) |
|  | Pediatrics | 14 (3.5) |
|  | Physiology | 5 (1.2) |
|  | Psychiatry | 7 (1.7) |
|  | Radiology | 12 (2.9) |
|  | Surgery | 35 (8.7) |
|  | Urology | 13 (3.2) |
| Post-Qraduation oroorams | FCPS | 150 (37.4) |
|  | USMLE | 75 (18.7) |
|  | PLAB | 30 (7.5) |
|  | **AMC** | 9 (2.2) |
|  | **MD/MS** | 15 (3.7) |
|  | **MCPS** | 41 (10.2) |

Of the respondents who chose a specialty of medicine 79 (19.7%), 11.5% were males and 8.2% were females. Mostly females are involved in obstetrics and gynecology 28 (7.0%). Table 2 depicted that One hundred and fifty doctors were doing FCPS (37.4%) female 20.2% and male 17.2% while others were doing USMLE 75 (18.7%)

female 10.5% and male 8.2% and MCPS 41(10.2%) female 4.5% and

male5.7%.(table 2).

Table 3 depicted, one hundred and fifty five (40%) doctors, females 18.7% and males 19.9% working / training abroad. Majority of doctors (60%) female 33.9% male 27.4% are working in different major cities of Pakistan. Meanwhile, majority of them belonged to Lahore (44.1%) and also preferred to work in this same city (44.4%). 15.7% opted to go to USA and 8.2% and (3.7%) to UK and Australia respectively (Table3).

## DISCUSSION

In our study, Psychiatry is amongst the least preferred clinical specialities (1.7%). In another study it was preferred by 7% of third year medical students9 from Karachi and 4.7% offinal year students at Zia Uddin Medical Universityl 3. Early in student life medical student's attitude towards psychiatry is more influenced by their own experiences with psychiatric disorders or psychological issues, family history of mental illnesses, and cultural beliefs about the subjectl 4.Onestudy in Hungary notedthat clinical exposure didnot have a major impact on choosing psychiatry rather it becomes less attractivefollowing clinicalclerkshipl 5.

Previous studies have noted the career preferences of medical



#### TABLE: 3

Shows home town and current working place of doctors and their frequencies andpercentages {N=401)

|  |  |  |
| --- | --- | --- |
|  |  | n (%) |
| Home Town | Bahawalour | 19 (4.7) |
|  | DeraGazi Khan | 10 (2.5) |
|  | Faisalabad | 24 (6.0) |
|  | GilgitBaltistan | 14 (3.5) |
|  | Gujarat | 10 (2.5) |
|  | Gujranwala | 10 (2.5) |
|  | Islamabad | 30 (7.5) |
|  | Karachi | 15 (3.7) |
|  | Lahore | 177(44.1) |
|  | Multan | 32 (8.0) |
|  | Okara | 10 (2.5) |
|  | Peshawar | 9 (2.2) |
|  | Quetta | 9 (2.2) |
|  | Sargodha | 11 (2.7) |
|  | Sahiwal | 11 (2.7) |
|  | Sialkot | 16 (4.0) |
| Current Workino olace | Bahawalour | 6 (1.5) |
|  | Faisalabad | 3 (.7) |
|  | GilgitBaltistan | 9 (2.2) |
|  | Gujranwala | 4 (.9) |
|  | Islamabad | 17 (4.2) |
|  | Karachi | 17 (4.2) |
|  | Lahore | 166 (41.4) |
|  | Multan | 11 (2.7) |
|  | Peshawar | 4 (.9) |
|  | Quetta | 3 (.7) |
| Workino place in abroad | Australia | 15(3.7) |
|  | Canada | 8 (2.0) |
|  | Dubai | 15 (3.7) |
|  | Germany | 12 (3.0) |
|  | Saudi Arab | 9 (2.2) |
|  | Sweden | 6 (1.5) |
|  | UK | 33 (8.2) |
|  | USA | 63 (15.7) |

students during different years'·'·". Career preferences during early years don't translate to actual choices made as graduation is completed. For example in a study on medical students from 4 medical colleges in Karachi and another one from Kuwait showed surgery with its sub specialitiesas the most preferred field followed bymedicine, paediatrics,gynaecology andobstetrics'·".

In our study,medicine was themostpreferred speciality by graduates of KEMU.lt was followed by surgery and obstetrics and gynaecology. There is low preference for choosing basic sciences and among clinical speciality dermatology and psychiatry were least popular. Mid-range popular fields included gastroenterology (4.9%), neurology {4.5%), paediatrics (3.5%), and urology {3.2%). While least

popular included radiology (2.9%), ophthalmology (2.7%)

orthopaedics (2.2%) cardiology {2%), psychiatry (1.7%), and dermatology(1.2%).

It is consistent withat least one study wherehouse job doctors were also included along with medical studentsfrom Karachi. It included

both public and private medical colleges and concluded that medicine ranked top at both 1st and 2nd choice.Moreover medicine was the 1st choice for significantly more students in public than private medical colleges (22.2% versus 114.9%) 1•

How did surgery lost to medicine? Surgery despite being the favourite speciality in medical students appears to loose in its charm following theirgraduation.The possible reasons could betheadded stress, future family plans, difficulties in training or lack of role models. In our study, males more commonly opted for surgery than females (52.1%vs.13.0%).ln other studies married graduates arealso less likely to choose surgery compared to their single colleagues". Changing trends in lifestylesalso influencesthechoice ofspecialities. Other considerations gaining significance in the same vane include hours atwork andeconomic benefits".

Overall basic sciencessuch as anatomy (1.7%),physiology (1.2%)and pathology (1.2%) were least preferred. It is consistent with similar studies where in one study anatomy and physiology were least preferred and biochemistry was not preferred by anyone out of 346 medical students.

In our data there were 47.4 %( 190) males and 52.6 %( 211) females. This preponderance offemalesis a global phenomenon. For thepast 3-4 decades increased number of females have entered the medical profession and recent statistics show about 50% of US students are females"

In our study,more than half preferred to stay inPakistan andgoonto joinlocal postgraduateprograms likeFCPS,MCPS andMD/MS.Those planning to work outside preferred AMC 2.2%.

A fair number in our sample opted to go abroad. They preferred USMLE18.7%over PLAB 7.5%.

In our sample the graduates from smaller cities were less likely to work intheirhometowns and preferred larger citiesor going abroad while graduates from Gilgit Baltistan preferred to return to their hometown. This is against the global trends; most doctors do not change their geographical region.Ina largerecent cohort in UK 70% (7,643/10,887)heldtheir first career post inthesameregion aseither their home before medical school, or their medical school or their locationoftraining".However thisisnot trueforPakistanandamajor braindrain occurs every year.

There are numerous reasons for moving abroad such as lucrative salary, quality of training, job satisfaction, improved life, relatives, opportunities, working environment, terrorism in Pakistan, better management abroad, peer pressure, and longer working hours in Pakistan." USA was themost preferred place of working in our study. It isconsistent withthepreviousstudyfromIndia."

Our study found that 39.4% of doctors are working in government hospitalsand20.7% areworking in private hospitals.Only1.2% doctors aredoingprivateclinics.

A larger number of students discontinued their profession. 18.2

%(n=73:female=7.5%,male=10.7%). 7.2% went to attempt CSS as their choice of career.One of the reasons could be that a significant number (23%) of Asian medical studentschoose thisprofession out



of their parent's desire". Marriage, children and responsibilities of other family members along with cultural values in Pakistan pose a barrier for females from living a professional's life and they end up becoming housewives'.

CONCLUSIONS

Among medical graduates medicine is the preferred speciality followed by surgery, obstetrics and gynaecology. There is low preference for choosing basicsciences andamong clinical specialties dermatology and psychiatry were least popular. Majority were interested in pursuing a postgraduate program. Those who decided to stay in Pakistan preferred FCPS,MCPS andMD/MS.Thoseplanning to work abroad, preferred USMLE, PLAB and AMC. Majority of graduates were women. A significant number (20%) decided to quit medical fieldforother options.Doctors generally preferred to workin larger cities or go abroad than working in their home town. Our results however cannotbegeneralized to alldoctors fromPakistan.

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