ORIGINAL ARTICLE

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

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ABSTRACT

OBJECTIVE
To determine the speciality preference amongst doctors during house job and postgraduate studies, their preferred place of working / choice of continuation in their profession.

DESIGN
Survey research design.

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

SUBJECTS AND METHODS
Doctors of King Edward Medical University, session 2008 to 2010 were 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 and current working place.

RESULTS
Our study revealed that out of 401 doctors who responded, 53 % were female and 47% were male with a mean age of 28.5 years (±1.4). 277 (69.1%) were doing their post-graduation in different specialties. 60% were working in Pakistan while 40% doctors had proceeded 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 specialities while psychiatry was the third least preferred speciality, followed only by dermatology and pathology. Basic sciences were a lower priority than clinical fields. Majority preferred to work in major cities or go abroad.

CONCLUSION
Most doctors continue to pursue their own profession amongst both the genders. Psychiatry is an uncommon choice made by fresh graduates. Medicine is the commonest career choice. 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[1]. Medical students are a significant factor regarding the future of any country's health care system[2]. Career choice of medical students and young doctors is a topic that continues to attract the interest of medical educators and health service providers[3]. Career preferences can help provide important health information to aid in planning educational programs, setting priorities, and planning for the provision of adequate health care to general public.[4]

Pakistan has a long-standing deficiency of psychiatrists and there 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 than men.[5]

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's interest in a particular specialty[6]. Despite producing a large number of doctors each year, Karachi loses 65 - 95% of its graduates as they move abroad[7]. It has also been recorded that a large number of female doctors opt out of profession to be housewives on account of the socio-cultural values of Pakistan[8].

This study aims to highlight the speciality preference of medical graduates of King Edward Medical University in the years of 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 who graduated in 2008, 2009 and 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 the protocol of the study. A pilot study was conducted with 10 medical doctors to rule out any 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 the survey by emailing the questionnaire using convenience sampling. Collected data was analysed through SPSS. Percentages were calculated for various variables of the studies. Data were presented in the form of tables. Descriptive statistics were computed. No conflict of interests was encountered in the entire study period. No funding was obtained from any sources.

RESULTS

A total of 600 doctors were approached, however 401(66.8%) doctors returned completely filled out questionnaires. Out of the responders, 190 (47.4%) were males and 211(52.6%) were females. The mean age of the responders 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 (female 18.7% and male 20.7%). 83 (20.7%) were working in private hospitals and only 5 in private clinics.

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	Single	187 (46.6)
	Married	209 (52.1)
	Divorced	3 (0.7)
	Separated	2 (0.5)
Time of marriage	During MBBS	29 (7.2)
	After MBBS	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 / Library	38 (9.5)
	Government hospital	158 (39.4)
	Private clinic	5 (1.2)
	Private hospital	83 (20.7)
	Govt. &private hospitals	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 and Percentages

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-graduation programs	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 male 5.7%. (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 (Table 3).

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% of final year students at Zia Uddin Medical University13. 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 subject14. One study in Hungary noted that clinical exposure did not have a major impact on choosing psychiatry rather it becomes less attractive following clinical clerkship15.
Previous studies have noted the career preferences of medical

TABLE: 3

Shows home town and current working place of doctors and their frequencies and percentages (N=401)

		n (%)
Home Town	Bahawalpur	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 Working place	Bahawalpur	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)
Working 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[1, 9,11]. 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 specialities as the most preferred field followed by medicine, paediatrics, gynaecology and obstetrics[5,10].

In our study, medicine was the most preferred speciality by graduates of KEMU.It 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 with at least one study where house job doctors were also included along with medical students from 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 1l4.9%)[1].

How did surgery lost to medicine? Surgery despite being the favourite speciality in medical students appears to loose in its charm following their graduation. The possible reasons could be the added 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%).In other studies married graduates are also less likely to choose surgery compared to their single colleagues[11]. Changing trends in lifestyles also influences the choice of specialities. Other considerations gaining significance in the same vane include hours at work and economic benefits[12].

Overall basic sciences such 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 of females is a global phenomenon. For the past 3-4 decades increased number of females have entered the medical profession and recent statistics show about 50% of US students are females[16]

In our study, more than half preferred to stay in Pakistan and go on to join local postgraduate programs like FCPS, MCPS and MD/MS. Those planning to work outside preferred AMC 2.2%.

A fair number in our sample opted to go abroad. They preferred USMLE 18.7% over PLAB 7.5%.

In our sample the graduates from smaller cities were less likely to work in their hometowns and preferred larger cities or 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. In a large recent cohort in UK 70% (7,643/10,887) held their first career post in the same region as either their home before medical school, or their medical school or their location of training[18]. However this is not true for Pakistan and a major brain drain 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.[15] USA was the most preferred place of working in our study. It is consistent with the previous study from India.[18]

Our study found that 39.4% of doctors are working in government hospitals and 20.7% are working in private hospitals. Only 1.2% doctors are doing private clinics.

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 students choose this profession out

of their parent's desire[21]. 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[8].

CONCLUSIONS

Among medical graduates medicine is the preferred speciality followed by surgery, obstetrics and gynaecology. There is low preference for choosing basic sciences and among 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 and MD/MS. Those planning to work abroad, preferred USMLE, PLAB and AMC. Majority of graduates were women. A significant number (20%) decided to quit medical field for other options. Doctors generally preferred to work in larger cities or go abroad than working in their home town. Our results however cannot be generalized to all doctors from Pakistan.

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