



Commentary



A commentary on “6th year medical students’ future specialty preferences: A cross-sectional study”

Dear editor,

We have read with great interest the article published by Al-Beitawi et al. [1] titled “6th year medical students’ future specialty preferences: A cross-sectional study”, where the authors inquired about the specialty preferences of medical students, finding that job opportunities (32.5 %), economic income (27.7 %) and length of postgraduate studies (27.7 %) are the determining factors in the choice of specialty. Similarly, they observed that a large number of these students have a preference for non-surgical medical specialties (59.3 %) [1]. We thank Al-Beitawi et al. [1] for providing such valuable evidence. However, we consider relevant to expose some comments about emerging factors influencing medical student’s choice of graduate school and career satisfaction. Likewise, to highlight the importance of educating about the need for translational medicine research inclination in medicine.

Beyond the consideration of income for the choice of a medical specialty, it is necessary to highlight two concepts and determining factors to consider among medical students, work policies and medical interest groups. These labor policies in medicine vary from region to region. Health systems, supply and demand of services and public policies are crucial in the satisfaction and success of a general practitioner and medical specialist [2]. Workload (hours of work per day), income, ergonomics, work infrastructure, personal work space, relationships between colleagues, the burden of care and responsibilities during medical residency, gender equity, discrimination, harassment, and many other factors should be evaluated and discussed with respect to the choice of a medical specialty, which should be supported at the local level to avoid migration of specialists and imbalance between supply and demand of professionals [2].

On the other hand, medical interest groups are collectivities that aim to create new knowledge through scientific production, specialized workshops, sharing experiences and lifestyles among different professionals, residents and specialists, as well as deepening the development of specific skills, according to the interest and affinity of the group and its students [3–5]. The advantage of these groups is that they can be founded and coordinated by undergraduate students (usually higher academic students) with the support of professors for the development of academic and scientific content [3–5]. In addition, they can obtain the endorsement of universities, hospitals and research institutes, for the approach and execution of research projects, and also for the participation in scientific events. These groups grant an affiliation, which allows identification with other research groups, societies and specialized knowledge networks, both nationally and internationally [3–5]. Currently in times of COVID-19, it has been reinforced as a strategy to facilitate learning and virtual meetings, especially in the study of surgical sciences [4,5].

Persistent participation from early on in the medical career

strengthens the interest in the discipline of the interest group, regardless of whether it is a basic or clinical medicine interest group. In addition, participation in these groups and associated research projects increases the probability of scientific publication during undergraduate studies, metric indices and publications of higher quality [6–8]. Especially in basic sciences with the aim of teaching medical students the need for research in translational medicine, whose production is low by students, who prefer clinical research.

Waaier et al. [8] conducted a study where they followed 4145 medical graduates, comparing the impact of those who did research during undergraduate vs. those who did not, observing that those who researched during their career published 1.9 more times, published more articles and had a higher number of citations; modifying the prognosis of success, probability of accessing a postgraduate degree and satisfaction with their career [8]. In this order of ideas, it is necessary to work to counteract barriers and improve research opportunities, create research groups and promote work policies that guarantee a fair and healthy medical practice [9]. Similarly, to evaluate and modify curriculum to include research practice in medical students, to reinforce knowledge in research methodology [10], basic sciences, and to discover other factors to be taken into account in general practice and choice of medical specialty.

Data statement

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Declaration of competing interest

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