

Education & Professional Development: Correspondence

Increasing Diversity in Cardiothoracic Surgery: Early Exposure and Fostering Retention



TO THE EDITOR: We commend Paneitz and colleagues for their important study examining early career experiences of cardiothoracic surgery (CTS) graduates from the 3 Accreditation Council for Graduate Medical Education-recognized training pathways (independent “traditional”, 4+3, and integrated 6-year or I-6). They found no significant differences in overall satisfaction, operative autonomy, or operative experiences after graduation from the 3 distinct training modalities. It is encouraging that I-6 graduates are satisfied with their first jobs and that support for the I-6 paradigm is growing among traditionally trained cardiothoracic surgeons.

What is also clear from the authors’ study is that the demographics of the survey respondents starkly highlight the ongoing need for attention to achieving diversity in the CTS workforce and promoting inclusion in the CTS training environment. Only 18% of the respondents identified as female, and just 3% of respondents identified as Black/African American.¹ However, it is encouraging that there has been some progress in representation of women in CTS training as well as of Asians and Hispanic/Latinos in I-6 and Black/African Americans in traditional CTS programs.^{2,3}

Although this study focuses on graduate experiences, we should recognize the impact of attrition in training, especially as it affects underrepresented in medicine (UIM) trainees. To recruit and to retain more UIM individuals into and within the CTS workforce, increased early exposure and support during training are fundamental. Scholarships granting conference attendance and mentorship are impactful, but we should not perpetuate inequity by selecting awardees who already have networked CTS mentors. Our CTS societies should continue to scout students from unreached populations, such as students without home CTS programs, and cultivate partnerships with early-trainee organizations such as the Latino Medical Student Association and Student National Medical Association.⁴

Paneitz and colleagues’ well-written study highlights the need for intentional diversity efforts and early recruitment of UIM students.

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Pursuing Equity: The Struggle Continues



REPLY TO THE EDITOR: We thank Arrington and colleagues for their interest in and response to our survey that examined early career experiences of cardiothoracic surgery graduates between 2012 and 2020 stratified by the type of training model completed.^{1,2} Arrington and colleagues note the underrepresentation of female and Black or African American cardiothoracic surgery graduates in our study and call for increased intentional efforts to recruit and to retain women and underrepresented minorities into the field of cardiothoracic surgery, which we also support. Although there is still much to be done, it is encouraging that a study published by 1 of the coauthors in 2022 found that both the