

EDITOR'S PAGE



The Impact of Mentorship



Bonnie Ky, MD, MSCE, FACC, *Editor-in-Chief, JACC: CardioOncology*

*My breath in is gratitude,
and my breath out is helping others.*

—Shared by Dr. Kalpana and Uday Patankar

In my role as the Editor-in-Chief of *JACC: CardioOncology*, I am driven by the tremendous opportunity to inform and advance the fields of cardiology and oncology, collaboratively. I recognize the critical importance of building our community, and building the pipeline of young, motivated investigators and clinicians who want to make a difference. As I look forward to this promising future, I also reflect upon the past, and how I have come to this position.

MENTORS

It was through the encouragement, devotion, patience, and insight of countless mentors over the past 25 years that I have come to this position. As a resident and cardiology fellow, I struggled with career decision paths. I loved clinical medicine, listening to and caring for patients, and using the available evidence to make a positive difference on an individual level. I also was driven to answer fundamental questions that I felt could inform and advance everyday clinical practice, and I desired to have a global impact on medicine. The two were not mutually exclusive, but I was at a point when I had to choose in which area I would primarily focus. I was strongly considering applying for a National Institutes of Health career development award. I remember sitting daily with Dr. Martin St. John Sutton in the echocardiography laboratory, and I can still hear his words that encouraged me to pursue science: “Put pen to paper.” That encouragement, that push, will always remain invaluable to me. Soon thereafter, I developed a team of mentors—physicians and scientists—whom I felt connected to, relied upon, and, most importantly, trusted. Today, I am fortunate to be mentored and encouraged by many who still patiently and selflessly devote their time to helping me achieve successes and accomplish my ultimate

goal of having a positive impact. To my mentors, I will always feel a sense of indebted gratitude. I also have accepted the responsibility of mentoring others, and consider it an extraordinary privilege to help young, motivated, driven, and bright physicians and scientists develop their careers.

In my opinion, there are several components to a successful mentoring relationship.

THE MENTOR-MENTEE RELATIONSHIP. Key attributes of a successful relationship that have been identified through qualitative research include reciprocity, mutual respect, clear expectations, personal connections, and shared values (1). Reciprocity stresses the bidirectional nature of a successful mentor-mentee relationship. Mutual respect is a “given,” as is sincere consideration for an individual’s time and effort, amid the many demands we all have on our attention. Clear expectations of the bidirectional relationship are critically important to keep each person accountable. Some institutions might even recommend a contract to clarify these expectations and to indicate the level of commitment. A personal and honest connection, often created through shared values, helps strengthen the relationship and allows the relationship to further grow and mature. I also think empathy is important—for each person to sincerely consider the other’s current and past positions.

THE MENTOR. Qualitative studies also have noted the key attributes of successful mentors. Altruism is a fundamental character trait (1). Some of my most trusted mentors personify this. There may be no immediate identifiable academic metric for them to benefit from by mentoring me; they just listen and advise, challenge and inspire me. Strong listening skills, honesty, insightfulness, and accessibility also are important. Some have noted that connections and experiences mentors may have related to their position are important to create opportunities for mentees (1). Researchers from the Clinical and

Translational Science Awards (CTSA) Program have proposed a model that includes mentor training, mentor self-reflection, and peer learning as key opportunities for mentors to grow in their roles (2).

THE MENTEE. Qualitative studies suggest that ideal characteristics of mentees are that they are responsible, prepared, and responsive to and respectful of feedback (1). Although constructive feedback often can be hard to receive, it is critically important to the process of continuous self-improvement. Mentor-mentee meetings should be used for listening and advising. Thus, to maximize this time, it is important that the mentee come prepared. It is also vitally important for mentees to follow through with opportunities that mentors have created for them, and that they take the needed initiative to diligently and comprehensively complete the agreed-upon tasks in a timely manner.

OUR INSTITUTIONS. Institutional support for initiatives is needed to ensure the success of mentor-mentee relationships. Peer mentoring programs developed by institutions have been met with important success (3). However, studies suggest that faculty mentoring efforts may not be recognized by departments or institutions (4). This culture needs to change. In order for mentoring programs to be successful, there needs to be programmatic support, including dedicated training, formal curricula, and funding (4,5). The lack of dedicated training seems to

be a fixable problem that, once resolved, can make us all more effective. To this end, the American College of Cardiology recently developed a broad college-wide mentoring program, which is a step forward and to which we should look for guidance and leadership (6). Moreover, funding agencies, such as the National Institutes of Health, have robust K grant programs for both early career mentees and mid-career mentors.

In summary, as we together grow as a cardio-oncology community, mentors and mentees alike, I would encourage us all to:

Be prepared.

Follow through. Deliver.

Listen.

Be grateful for each other.

Be honest. Empathize.

Create your community of mentors and mentees.

ADDRESS FOR CORRESPONDENCE: Dr. Bonnie Ky, Department of Cardiovascular Medicine, Perelman School of Medicine at the University of Pennsylvania, Smilow Center for Translational Research, 3400 Civic Center Boulevard, Philadelphia, Pennsylvania 19104, USA. E-mail: bonnie.ky@pennmedicine.upenn.edu. Twitter: [@pennmedicine](https://twitter.com/pennmedicine).

REFERENCES

1. Straus SE, Johnson MO, Marquez C, Feldman MD. Characteristics of successful and failed mentoring relationships: a qualitative study across two academic health centers. *Acad Med* 2013;88:82-9.
2. Anderson L, Silet K, Fleming M. Evaluating and giving feedback to mentors: new evidence-based approaches. *Clin Transl Sci* 2012;5:71-7.
3. Flyer JN, Joong A. Improving peer mentorship: a novel Fellow "House" Program. *J Am Coll Cardiol* 2016;68:2907-10.
4. Kibbe MR, Pellegrini CA, Townsend CM, Helenowski IB, Patti MG. Characterization of mentorship programs in departments of surgery in the United States. *JAMA Surg* 2016;151:900-6.
5. Kashiwagi DT, Varkey P, Cook DA. Mentoring programs for physicians in academic medicine: a systematic review. *Acad Med* 2013;88:1029-37.
6. Sinha SS, Cullen MW. Mentorship, leadership, and teamwork: harnessing the power of professional societies to develop nonclinical competencies. *J Am Coll Cardiol* 2015;66:1079-80.