

PODIUM: DOCTORS SPEAK OUT LA PAROLE AUX MÉDECINS

Medical training in Canada

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Correspondence to: Dr. Stuart Johnston, Omineca Medical Clinic, RR2, Hospital Road, Vanderboof BC V0J 3A0 he medical training process in Canada has become bloated. The training period has increased to the point where a bright high school student at a Careers Day talk shook his head incredulously when advised that it would be a minimum of 10 years before he could practise medicine independently as a GP, and probably nearer to 13 years if he specialized. He chose a different career.

One constantly hears that the South African trained physicians are considered to be competent and well trained, yet curiously they were competent to function independently as a general practitioner (GP) after only 7 years —

.... LET'S CRACK THE MOLD AND START AFRESH.

a full 3 years less than their Canadian counterpart. (The current extension of the residents' training to 2 years in South Africa was a purely political move to force these physicians to work in government hospitals for an extra year. As happened in Zimbabwe, it has done much to encourage physicians to leave the country.)

The North American system of having a "pre-med" degree as a requirement for admission dates back to 1877 when John Shaw Billings was setting up the medical school training program with William Osler at the Johns Hopkins Medical School. It was his belief that this was necessary to filter out

those who would not be able to master medical training. With the passage of time and the continued efforts to regulate medical school admission, the selection process has become increasingly convoluted, expensive, time consuming and, arguably, irrelevant.

Students (who can afford it) now attend special classes to improve their MCAT exam marks. They take a year off (and thereby add another year to their medical training) to fit in the volunteer work that will allow them to "polish" their CVs. Often they sit the MCAT exam more than once to "upgrade" their mark.

So in 2005, some 118 years after the model for training medical students in North America was established, maybe the time has come to take a look at the model, and instead of trying to continually upgrade the old one, let's crack the mold and start afresh.

Realistically this would not be a huge shift if the "pre-med" degree was simply dumped as a prerequisite and the medical degree course expanded to include the necessary knowledge not already in the current 4-year degree. Even if the medical degree expanded to 6 years, the medical students would save a full 2 years over the present system.

Just a thought!

Competing interests: None declared.

REFERENCE

 Shaw Billings J. On the plans for the Johns Hopkins Hospital at Baltimore. *Medical Record* 1877;12, 129-32, 145-48, p. 129.

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