

Otorhinolaryngology: As the Primary Preference For post-Graduation

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ABSTRACT: Otorhinolaryngology is a constantly evolving branch, in terms of latest advancements, techniques, as well as its expansion to head and neck surgery, oncology, skull base surgery, and plastic surgery. But as an undergraduate subject in MBBS, students are limited to only a year's exposure, which is further overshadowed by only two months of clinical postings. In this study, we circulated an anonymous questionnaire to gauge of MBBS the interest interns towards otorhinolaryngology as their first choice of postgraduation, thereon being their lifetime career. We also gathered numerous responses and aspects as to, 'why' and 'why not' - is it their preferred option. The denouement directs towards dismissing the subject as a primary preference of specialization and hence there is a need for updating the syllabus and teaching-aids to inculcate interest towards the same.

KEY WORDS-Otorhinolaryngology, Postgraduation, specialty, syllabus, future in ENT

I. INTRODUCTION:

Otorhinolaryngology, a product of the early 20th century, developed from the joining together of the separate departments of otology, were whose practitioners surgeons, and laryngology which was managed by physicians who also treated diseases of the nose and chest [1].Despite the fact that over the last few years, the specialty has undergone major development and has taken advantage of new advances in endoscopy, microsurgery, and the use of lasers, cytotoxic drugs, flap reconstruction and microchip technology, it is still not opted as the first choice of specialization. The inadequate exposure to the subject, theoretically (with all the threedimensional micro-anatomy) and practically during undergraduate as well as internship rotatory postings has defined its perception as a 'minor subject'. The aim of this study is to gauge the interest and to learn the reasons behind whether or

not it has made an impression amongst the MBBS interns to major in this subject. Some measures that the Medical Education system can introduce to dismiss the perception of Otorhinolaryngology as a minor subject, and rather take it up as a preferred field of specialization amongst the medical interns, have been suggested thereby.

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II. AIMS AND OBJECTIVES:

- i) To assess the interest of MBBS Interns in choosing Otorhinolaryngology as their first option of post-graduate specialization;
- ii) To explore the various factors and reasons navigating their (above) choice.

III. MATERIALS AND METHODS:

MBBS interns from various institutes of medical sciences in Mangalore, Karnataka, India, were surveyed via an online questionnaire. Participation in this study was entirely voluntary and confidentiality was maintained as the survey did not record/require any identification details of the participant. The questions comprised a mixture of close- and open- ended questions, giving the participant the freedom to showcase their reasoning.

Firstly, the participant was asked to choose if Otorhinolaryngology was their first choice of specialization for their post-graduation, and then the further reasoning question based on their primary answer.

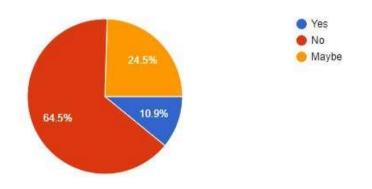
Prior to final submission, considering the current circumstances, including the COVID-19 pandemic, violence against doctors, etc., the participants were asked to ponder upon whether or not they will continue pursuing medicine, and if they will continue practicing in India or overseas.

IV. OBSERVATION:

On analyzing the final responses of a total of 110 medical interns, the following has been observed:

Is Otorhinolaryngology the first choice of specialisation for your post-graduation?

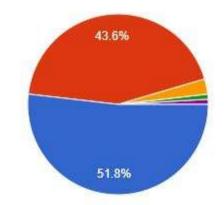
110 responses



It is to our dismay that, among the 110 participants who recorded their responses (Fig. 1), (12 respondents) have opted 10.9% only Otorhinolaryngology as their primary preference of specialization. The majority of the reason for this positive choice is the idea of having a good worklife balance, and the subject being a combination of medical and surgical practice. Few of the responses also included the fact that it has comparatively lesser emergencies, passion for the subject, and last but not the least- end branch (although, there are new guidelines in track that are expecting ENT post-graduates to be eligible for certain MChsuper specialties).

64.5% (71 respondents) have disregarded the subject as their first choice, and 24.5% (27 respondents) have considered but opted maybe. The key reasons for this observation is to be looked upon, as this reflects what and how to change so as to gain interest among the medical graduates to specialize in this ever-advancing field. Few of the responses reasoning why no/maybe includelimited exposure to the subject in undergraduate clinical postings as well as the internship rotatory postings, not interested in surgical field as a whole, and difficult microanatomy of the certain involved structures.

Considering the current scenario of the COVID-19 pandemic, violence against doctors, etc., 51.8% of the respondents (Fig. 2) wish to continue practicing in India despite the above. 43.6% of the medical interns wish to pursue higher studies abroad, and a very minimal of them plan to switch to a non-medical profession post-MBBS.



V. DISCUSSION:

To choose the specialty of post-graduation is one of the most crucial decisions for a medical graduate, as this is being determined by numerous factors. The major consideration being whether to opt a clinical or paraclinical branch, and then amongst clinical branches, whether to pursue a surgical specialty or medical specialty [2]. Otorhinolaryngology, in that aspect, has an advantage of holding both medical and surgical practice involved. Despite the same, and the everevolving advancements in this vast field, it is still



not chosen as a primary preference.Given the fact that an otorhinolaryngologist is a specialist in head and neck surgery as well as advanced ear surgery, his or her abilities as a skull base or plastic surgery expert are still questioned. Although they are well practised, their capacity to navigate the limited space of the operating field using advanced technology, utilisation of micro-debriders, lasers, and trans-oral robotic surgeries are not completely known facts, at least to those on the verge of making a career decision.

A recent study conducted by Qadri H et al. [3], a very minimal percentage of interns mentioned about skull base, oncosurgery, cochlear implants, facial nerve decompression and plastic surgeries as part of ENT surgeons' skills. Similarly, Gurgain et al. [4] conducted a comparative study in ENT across multiple medical institutions, revealing non-uniformity in curriculum and the necessity for government intervention. Morris et al. [5] emphasised the importance of ENT abilities in general practice; and Veitch et al. [6] questioned both postgraduate practitioners and undergraduates about their ENT training and most of the respondents believed that additional training in various formats was essential.

The lack of interest in building a strategy and projection for this branch has had such an influence that the majority are unable to consider it as a primary career option. Hence, some measures that could be brought about to change the same include, increasing the exposure to the subject during the undergraduate years, which has been recently implemented by the National Medical Commission, as currently the 2nd year MBBS students have begun their ENT clinical postings early. These rotations are in small group teaching modules wherein the MBBS curriculum has been-

a) Aligned- that is, topics in various subjects in the same phase that have common threads will be placed together in the timetable as much as practicable, and

b) Integrated both horizontally (to remove redundancy and provide interconnectedness) and vertically (emphasize the practical application of the basic science concepts, as well as the clinical practice foundations) [7].

Advanced teaching aids, and live stepwise demo of surgeries (including micro-surgeries projected on monitors) can help in better understanding as well as instill some interest in the subject. The rotatory internship postings schedule should also be extended from 2 weeks to a month's time, if not for all, at least for those who are interested in the subject- to avail as their optional posting (15 days). Another recommendation includes, equipping the simulation labs in the medical colleges with instruments and mannequins specially designed for ENT surgeries, so that the undergraduates and interns can have a better understanding, visualization and hands-on experience in certain common surgeries performed.

VI. CONCLUSION:

Through our study and a lot more studies as reviewed above, we have inferred that the attitude of the medical interns in opting Otorhinolaryngology as their primary preference of post-graduation is limited. It is, thus, a dire need to effectuate reforms in the undergraduate syllabus and internship schedule, so that we prepare a lot more of the upcoming medical graduates to choose the ever-evolving and advanced field of otorhinolaryngology as their preferred specialty.

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