

Letters to a Young Doctor

Becoming a consultant: other considerations

PHILIP RHODES

When planning which specialty to make your career you should think about the stress given at any time to various medical themes by bureaucratic imagination and politicians. They pick up themes, perhaps overpublicise them, and provide the money and resources for putting their policies and ideas into action. A judgment has to be made about whether there is real sustaining power in such policies or whether they are ephemera. Over the past few decades there have been almost frenetic drives on the maternity services, mass miniature radiography, cervical screening, abortion, sterilisation, cigarette smoking, alcoholism, and on services for the elderly, chronic sick, and children, and so on. They are all worthy causes, and in a few cases policies have had some effect but in others, none or very little. There are also the perennial penchants for diet and exercise. These are just examples of fashions and fads in medicine, some of which are maintained and others not. Moreover, all clinical practice abounds with examples of treatments and procedures that were once thought to be important and have now been discarded. In planning a career you need to keep a cool head so as not to be carried away by the moods of the moment. You do not want to hitch your wagon to a shooting star that will rapidly peter out.

Another matter to take into account in planning your career is arriving at the right age for a consultant post. Every discipline has a modal age at which consultants are appointed. It tends to be 33 or 34 in the shortage specialties and 36 to 38 in surgery or medicine, for instance. There is much variation round these modes, but nevertheless if you are much younger or older than these the chances of being appointed may be slightly lessened unless there is a reason which is acceptable to that particular appointing committee. You might feel joyful at being appointed as a senior registrar at the age of 27, but if you cannot get a consultant post when the post comes to an end when you are 31 the first triumph fades. You may feel that this is very unfair, but committees may take the view that you have not had as much general experience as other candidates for the post or they may feel that old so-and-so at the age of 36 ought to have the job now, so that he does not get too old and lose all his chances.

So you have to beware of slipping along too fast just as much as going too slowly. If you find that this might happen to you you can often "mark time" and gain valuable experience by a year in research or a year abroad. This can sometimes be taken out of your four years as a senior registrar to give you an added year, or sometimes it is best to take up such an additional post between registrar and senior registrar posts. This may have the drawback of taking you away from clinical work, making it more difficult to get a senior registrar post where recent clinical experience is usually deemed to be essential. By taking a research

post between these two grades it may mean that you will have to take up another registrar post to get back your clinical skills before applying for the senior registrar grade. But for some this may not be a bad thing.

If you are fully registered at age 24 and then enter medicine, you may do two years as a senior house officer and two years as a registrar and have gained the MRCP (membership of the Royal College of Physicians) and be only 28. A year in research or abroad and one back as a registrar would make you 30 and ready for a senior registrar post which you would finish at age 34—a good age at which to apply for a consultant post. In psychiatry, pathology, geriatrics, radiology, and anaesthesia the more rapid progression may be acceptable and appointment to the consultant grade may be made at about the age of 33, or sometimes earlier. But you must try to get the feel of your particular subject so that you know how to prepare yourself for consultancy and so market yourself at the right time, having done all the right things.

Going abroad

In four articles I have outlined the simplest way to a consultant post, the path that most doctors follow. It may seem unadventurous, but the competition is very severe, and you have to decide whether you will stick to the straight and narrow or branch out into other things—like working in a foreign country. This can be fine experience and you will probably enjoy it, though it may not further your career in the United Kingdom. Provided you are not away too long—say, more than two years—it will ultimately count in your favour, but on returning to the UK you may have to take a post in the same grade as the one you left to get your foot back on to the training ladder.

It is often hard for appointment committees for the junior grades to assess the nature of experience and the extent of learning obtained abroad. So they often play it safe and appoint the devil they know rather than the one they are not sure of. Put this slightly strange deviant into a position where he can be properly supervised and he can then be assessed. This is frequently done. Later, the special experience is usually looked on with favour as interesting and unusual—seen then not to have caused any damage! It is probably wisest to obtain a higher diploma before going abroad. It is easier at that time in your career than on returning after you have been seduced by the pleasures of uninterrupted clinical work, often in underdeveloped countries with minimal supervision and uncritical standards. Moreover, when you return it shows that you are capable of doing academic work and gives a measure of your achievement.

It may be that these articles have been too cautious. That has not been the intention. You should try to do what you want to do and your career will probably take care of itself. Yet it is wise to be aware of the pitfalls and also of the opportunities in what you have chosen to do. People like postgraduate deans unfortunately see many junior doctors who have just drifted from one job to

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another, never lifting their eyes to what was going on around them, receiving very bad advice, and not knowing how to shape their careers. Sometimes, and regrettably, it is too late to remedy, when a little foresight a few years before might have prevented trouble. Weighing up the forces against you, which come from within as well as without, can be a difficult task and fraught with error. You may very well need advice and help in this. But it is your life and your career. All that an advisor can do

is to suggest courses of action, point out factors that you may have ignored, and ask you to reconsider what you are intending to do at pivotal places in your progress. The final decisions are your own. A good counsellor knows this and tries to help you to make decisions that will be the best for your career and for you personally as far as that is possible.

In the next two articles I shall discuss planning for a career in general practice.

MATERIA NON MEDICA

A fragment from Saudi Arabia

From above, against the sandy coloured background, it seemed like a motorised column, a vague line of tiny dark objects moving with surprising speed. Like a column of ants, one might say. But of course, they were ants—the small variety of the ubiquitous industrious hymenoptera, which seems to be semi-domesticated in Saudi Arabia, and, no doubt, throughout the Middle East. We had had a small number of friends for dinner last evening and these creatures were busy exercising their role as scavengers, removing the exiguous crumbs from the dining room carpet.

The little dark line was directed towards the bookcase, a roughly linear collection of dots. From under the end of the bookcase debouched a further posse (do ants have a noun of assembly?), accompanied by a foreman, at least four times the size of his fellows, and moving with even greater vigour. One large crumb—a small piece of pasta (orzo)—was moving across the floor under the power of a dozen ants. With only a pause they hauled it up on to the thicker pile of the Baluchi rug, and on it, progressed—I timed its passage: three feet across the rug in less than three minutes—and down on to the carpet again. The foreman inspected this morsel and its bearers, encouraged them by a shove in the right direction, and moved on to another fatigue party struggling with a pastry flake, so light—a reflection of my wife's baking—that it moved along under the muscle power of but three ants.

Then somebody called at the front door and on my return the objects had gone—under the bookcase, under the wainscot, and down into some subterranean food store to be consumed in time of famine. How wrong it would be to write "consumed at leisure," for can an ant enjoy leisure time? I marvelled at their social integration, at their powers of orientation, their ease of communication and their soldierly qualities of comradeship. Yes, like a supply column seen by air reconnaissance in the Western Desert forty years since. Thus I have considered their ways but am no wiser than before. Being more sluggard than naturalist, I must needs turn to the books to inquire further.—G A GRAY, Tabuk, Saudi Arabia.

The champions

The Australian marathon championship, held this year in Brisbane, served as a trial for the same event in the forthcoming Commonwealth Games. Much of the course followed the Brisbane River, and this, with the fine sunny winter morning, must have added to the pleasure one imagines the runners take in the event.

I went down early to be in a good position to see the runners go by. The nearest point to home was the 17.5-km mark, though the sign used the old terminology—11 miles. Here was a refreshment area, with three trestle tables set up about 20 metres apart, each with a couple of dozen wet sponges and attended by volunteers from athletic clubs. I spoke to a man wearing a grey tracksuit and an official cap. He pointed out a tall, strongly built, fit looking sexagenarian, wearing a tracksuit in green and gold, the national colours. He, my informant said, was in recent years the undefeated world champion in the 100 metres sprint for his age group. Also in green and gold was this man's wife. She had seen her husband win his event in Germany a few years before, thought she should be in it too, and had taken up running at the age of 57. So far she had won two gold medals in her age group for the 400 metres. My informant had left things a bit later. Now aged 69, he had taken up running at 63 and had a gold medal for the men's 4 × 400 metres relay race for his age group. Three world champions in 50 metres of street—I wondered if the rest of the 42 kilometres was similarly populated.

The first group of runners stormed past—a knot of 11, only a few metres between them. The winner was Japanese. He must have felt at home, as the police outriders were on Hondas and the lead car was a Toyota. The faster veterans were well ahead of the slower youngsters; the faster women led the slower men; the lean outran the heavy. Some were chatting, most sweating, none looked distressed—not even the man, halfway along the field, with stridor. The Japanese winner did not make a speech, but the second placegetter, interviewed on television after the race, was not even breathing heavily. Marathon runners are a special breed.—DEREK MEYERS, Brisbane, Australia.

The institution

A new part of the country to discover, new acquaintances to make, and old ones to revive amid the reassuring security of a wedding makes for an excellent weekend.

A delayed start at 4 pm along the narrowing perspective of roads separating Edinburgh and North Wales saw us to Llangollen two hours later than the ETA quoted to the landlady. Her comforting lilting accent revealed her forgiving nature. After the offer of tea we joined the stag night in a local public house. The hostelry buzzed with debauchery for the morning's groom. Here the gentle qualities of the Welsh radiated from towering young men who sought their living from the land. They spoke of qualities of life in such a manner as to make us city dwellers blush with shame at our self-importance and selfishness. A very late night, or should I say very early morning, of precelebration saw the groom to his prenuptial bed.

Scattered amongst the lanes of Llangollen in numerous inns, hotels, and guest houses, the wedding party metamorphosed through the uncouth unshaven stage to the respectability fit for the service. Llantysilio Parish Church, idyllic in a river-bordered meadow, housed the congregation ushered in to the strains of the *Water Music*. They shuffled, whispered, and excitedly acknowledged the presence of old friends with frantic nodding and hymn book waving: new ones were made with comments on the golden autumnal colours of the foliage surrounding the church. The bride was a full twenty minutes late, lending time for further superlatives on the local countryside. The service began with a Welsh hymn—*Nid wy'n gofyn bywyd moethus*—limply sung by the English, but proudly driven by the strong Welsh voices dominating the event.

The wedding vows spoken in the quiet splendour of the flower-bedecked church brought a lump to my throat. The finality of the ceremony and commitment of two lives together surely is an institution which all enrolled in should strive enormously to perpetuate. The *Trumpet Voluntary* heralded the victory salute of the bride and groom as they faced their friends and relatives parading their bonded dedication.

The traditional reception brought something for everyone: reminiscences from the bride's father to his peers, thanks for the bride, risqué double-entendres to make girls blush, and good food and wine for all cemented friendships made earlier in the day. An informal action replay in the evening, with the impromptu formation of an Anglo-Welsh choir, ensured compulsory exchanging of addresses and telephone numbers.

The following morning saw a thin mist coating the cobwebbed hedgerows of the narrow lanes. Sleepy revellers prepared for their journeys back to divergent destinations. The soft rolling hills of the Llangollen countryside echoed the songs of the night before. It's a pity we've got to leave. Never mind, maybe there'll be another one soon.—N WILSON, paediatric registrar, Edinburgh.