

## How medical specialties vary by gender

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While many factors influence what specialty medical students and residents choose, recent data show gender may stimulate what and where future physicians practice.

Using data from a variety of sources, the Association of American Medical Colleges (AAMC) 2015 Report on Residents identified the top specialties among 86,439 residents in the graduate medical education class of 2013-2014.

Based on key findings, women make up a larger percentage of residents in:

- Family medicine (about 58 percent)
- Psychiatry (about 57 percent)
- Pediatrics (about 75 percent)
- Obstetrics/gynecology (about 85 percent)

The data show male residents prefer to specialize in:

- Surgery (about 59 percent)
- Emergency medicine (about 62 percent)
- Anesthesiology (about 63 percent)
- Radiology (about 73 percent)
- Internal medicine (about 54 percent)

The data reflect a 2013 study from the Journal of the American College of Surgery, which found women were substantially underrepresented in neurosurgery, orthopedics, urology, general surgery and radiology. The study found female medical students were more likely than males to enter programs with higher proportions of female residents.

Overall, 57.5 percent of women who completed residency from 2004 through 2013 are practicing in the state of residency training, compared to 49.1 percent of men. The pattern of retention varies

across specialties.

While these numbers are based on residents who graduated from medical programs in the United States and Canada, international medical school graduates also reflected the same gender-specific breakdown of specialties. Whether abroad or in America, specialties like obstetrics/gynecology, pediatrics and radiology consistently show a great gender divide, according to the AAMC.

But why? Brandi Ring, MD, a fourth-year resident in obstetrics/gynecology at York Hospital in York, Maine, said that gender can impact the culture of a specialty and ultimately the residents who practice in that field.

“In medicine, specialties swing from one extreme to the next,” she said. “Years ago, gynecology was dominated by men but today, it’s just the opposite. Now I’m seeing a lot of male medical students who completely disregard OB as an option because they think it’s a ‘female specialty,’ which is a huge disservice.”

Dr. Ring said she’s noticed the same gender-bias in some male-dominated specialties, which may deter female residents from pursuing them. “Orthopedic surgery is still very male dominated and it’s one of those fields where the culture of the specialty reflects a ‘boy’s boy’ image,” she said. “I don’t think many women have known how to fit into that group or feel particularly motivated to deal with it.”

Michael Best, MD, a fourth-year anesthesiology resident at University of Pittsburgh Medical Center said he chose his specialty based on the field that made him “feel happiest” but noted that, “I also looked at the personality types of my peers and considered how I would fit in with them.”

“It is difficult to know whether gender plays a role although it is evident that there is a gender disparity given that in my residency year, there are four women and 15 men,” he said.

He added that the patient experience and environment residents prefer may also influence what they practice. He said certain specialties -- like family medicine and pediatrics – may attract residents who prefer to focus on long-term patient relationships while specialties like anesthesiology and emergency medicine can appeal to those who thrive on crisis management and caring for patients under extreme circumstances.

**Tell us:** What specialty did you choose and why? Do you think gender impacts the specialties residents practice? Share your thoughts with your peers on our Facebook page.