

Pursuing Academic Qualification During Residency Training :Justification and Feasibility

By

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The residency training programme, as structured by the two training bodies in Nigeria, that is West African Postgraduate Medical College (WAPMC) and the National Postgraduate Medical College of Nigeria (NPMC), is understandably mainly clinically oriented. Understandably because the objectives and mission of these colleges are geared towards training highly skilled manpower in subspecialties of Medicine.

Essentially, these specialists are supposed to deliver first class medical care to the populace. Their programmes were not therefore designed to train pure breed academicians even though academic input is inevitable in the training of the Fellows and is such assumed. It is a fact that residents are supposed to teach during their training period. This teaching, which is often unsupervised and self-styled cannot be said to be the best grooming for tomorrow's clinical lecturer or academician.

Pursuit of academic qualification during residency, to my mind, is a pursuit of excellence in length and in breadth of science. It is quite clear that advances in clinical medicine in the past couple of decades have been largely sustained by improved knowledge of basic medical sciences like immunology, molecular biology etc, areas which are not usually well

emphasized or researched in clinical medicine except in some areas of laboratory medicine. This then explains why many of clinical lecturers are not really accepted or seen as iron cast academicians in the University System, in spite of the workload of clinical lectureship.

Many core academicians now see non-PhD holders, the bulk being clinical lecturers, as second rate academicians, rightly or wrongly. In fact some Universities, including University of Ibadan, now disallow some of our senior clinical lecturers from holding certain University appointments! For the same reason very senior clinical lecturers without academic degrees are also disqualified from supervising candidates pursuing higher academic degrees in spite of being eminently competent. There may be some genuine reason for all this as it appears that the clinical lecturers are usually more comfortable with clinical duties rather than pure academics. I have personally observed as many others have, that most of the clinical lecturers would rather come to examine during a clinical examination than be lecturers for the same postgraduate medical college. It is also well known that close to 80% of more of the clinical lecturer's time is spent with the hospital with much less time spent with the University.

A personal regret I have is not pursuing academic qualification during my residency period and would encourage residents to

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embrace this new dispensation, especially those who hope to pick up a lecturing position in the university system. The time is now!

I strongly believe that pursuing academic qualification during residency is robustly justified as it will enhance the research and teaching capability of the resident, it will engender intellectual satisfaction for the academically minded resident who hope to seek a lecturing post after the residency programme. Academic qualification in a relevant area to the areas of specialization will also improve the overall knowledge of the resident leading to a better understanding of the basis of clinical practice. It will to a good extent, cover the deficiency in residency training for the clinical teacher.

It is not difficult to convince the incurable pessimist of the feasibility of pursuit of academic qualification during residency training programme. Vital lessons could be learnt from what obtains in some progressive nations of the world.

In the United States of America the undergraduate Medical training leading to MD is structured in such a way that undergraduate students could enroll for a PhD. If this could be done by undergraduates, certainly, a resident pursuing a training in postgraduate Medicine should be able to better organize his work to accommodate pursuit of postgraduate academic qualification. No doubt the road could be rough and the task daunting as evidenced by the response of some residents in the UK who are in academic programmes¹ It all requires focus, determination and readiness to take up additional challenges. Thomas Edson once said, "Opportunities are missed by most people because it wears an overall and covered as work". I will find it difficult to be convinced that residents are busy and have no spare time when I consider the fact that residents find time to do locum tenens both while on vacation and when not. It

should be possible to pursue academic qualification with such disposable time, instead of pursuit of ephemerals. After all such self denial is time-limited. The statutory one year study leave with pay could also be utilized for an MSc programme barring industrial actions by the University Staff in Nigeria! For the Junior resident, it may be better to register for a part time (2yrs) programme while for the post-part I resident a one year full time will be better and data collection for the part II examination could be collected alongside the MSc or PhD programme. Residents could afford missing a few lectures, a 75% attendance is what is required by University regulation to qualify for sitting examinations.

Also in the UK, it is now a rule in most Teaching Hospitals for residents in specialist training to register concurrently for a university academic degree².

It is obvious from the trend of events now that for appointment into a lecturing post in the University, academic qualification and scholarly publications will become pre-requisite and residents with interest in these areas should not be caught off-guard. With the UI vision for the 21st Century of achieving a postgraduate: undergraduate intake ratio of 3:2, the pursuit of academic qualification will no doubt be much easier for the Ibadan resident. The following factors would also enhance the feasibility.

- rapport with Consultants and co-residents
- A joint agreement between the University and Teaching Hospital Management and the relevant University departments
- Reduction in number of hours of work per week creating a more encouraging and accommodating climate.
- Zeal

At a recent workshop on postgraduate training at the University of Ibadan, Professor Akande³, the first provost of the College of Medicine,

University of Ibadan, during a lecture he titled "Global trends in academic postgraduate education" suggested the way forward and said, inter alia that, "every resident doctor should be encouraged to register for the Master's degree of the University of Ibadan... the best residents should be encouraged to proceed to a PhD or MD concurrently with the part II fellowship examination to prepare them for absorption as faculty members at Senior Lecturer level"

The obvious from the foregoing is that it may not be business as usual for tomorrow's clinical lecturers at least at the University of Ibadan and the possession of an academic degree in addition to the Fellowship will not just be an added advantage but the sine qua non for employment in the ivory tower. To be forewarned is to be fore-armed, the time to act is now.

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