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Surgeon and nonsurgeon personalities at different career points

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ABSTRACT

Background: Previous studies have demonstrated correlations between personality traits and job performance and satisfaction. Evidence suggests that personality differences exist between surgeons and nonsurgeons, some of which may develop during medical training. Understanding these personality differences may help optimize job performance and satisfaction among surgical trainees and be used to identify individuals at risk of burnout. This study aims to identify personality traits of surgeons and nonsurgeons at different career points.

Materials and methods: We used The Big Five Inventory, a 44-item measure of the five factor model. Personality data and demographics were collected from responses to an electronic survey sent to all faculty and house staff in the Departments of Surgery, Medicine, and Family Medicine at The Ohio State University College of Medicine. Data were analyzed to identify differences in personality traits between surgical and nonsurgical specialties according to level of training and to compare surgeons to the general population.

Results: One hundred ninety-two house staff and faculty in surgery and medicine completed the survey. Surgeons scored significantly higher on conscientiousness and extraversion but lower on agreeableness compared to nonsurgeons (all $P < 0.05$). Surgery faculty scored lower in agreeableness compared with that of surgery house staff ($P = 0.001$), whereas nonsurgeon faculty scored higher on extraversion compared with that of nonsurgeon house staff ($P = 0.04$).

Conclusions: There appears to be inherent personality differences between surgical and nonsurgical specialties. The use of personality testing may be a useful adjunct in the residency selection process for applicants deciding between surgical and nonsurgical specialties. It may also facilitate early intervention for individuals at high risk for burnout and job dissatisfaction.

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1. Introduction

The development of the Big Five factor structure of personality [1] has standardized personality measurement and allows

for comparative studies. Personality researchers rely on a descriptive model of these traits—the five factor model (FFM). This system categorizes personality into five traits as follows: openness, conscientiousness, extraversion, agreeableness,

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and neuroticism (Fig. 1). Although prior studies have investigated personality differences between medical specialties [2,3], few have examined surgery house staff personality profiles [4]; fewer still have evaluated personality traits across different career points. To date, no study has examined differences in personality traits across generations in the surgical workforce.

Among the biggest threats to the surgical workforce are stress and burnout. High levels of stress can adversely affect performance, career longevity, and job satisfaction [5]. This is particularly important among newer generations of surgeons who may not have developed advanced coping strategies [6] and tend to place more importance on life–work balance [7]. Although the causes of burnout are multifactorial, individual characteristics play an important role. Ironically, the traits that define a good surgeon are often associated with a greater risk of burnout. These include attention to detail, commitment to patients, and desire for perfection [5]. Personality testing may help identify individuals at risk for burnout so that early intervention can be undertaken.

Prior investigations [2,3] have sought differences between surgeons and nonsurgeons, and our group believes that individuals with certain personality characteristics may gravitate toward surgical careers. We believe these personality characteristics are refined throughout residency training by numerous factors, including acquisition of skills and knowledge, interactions with colleagues and other healthcare professionals, and emulation of role models. We hypothesize that there are inherent personality differences between surgeons and nonsurgeons and that personality traits vary based on stage in career. The purpose of this study was to determine the distribution of personality traits among surgical and nonsurgical faculty and house staff according to the FFM.

2. Methods

2.1. Study sample

The study was approved by the Institutional Review Board. An electronic link to an anonymous personality survey was emailed to all faculty and house staff in the Departments of Medicine and Family Medicine (nonsurgeons, n = 586) and in the Department of Surgery (surgeons, n = 150) at The Ohio State University Wexner Medical Center. Faculty members included all clinicians in a department, and house staff included all physicians-in-training (interns, residents, and fellows) in a department. Surveys were completed online via surveymonkey.com. Participants were informed that no personal identifying information was collected.

2.2. Measures

We used the Big Five Inventory (BFI) to assess personality traits according to the FFM [8]. This 44-item inventory requires participants to rate self-descriptive phrases on a 5-point Likert scale from “agree strongly” to “disagree strongly” (e.g., “I see myself as someone who is a reliable worker”). The BFI questionnaire is shown in Figure 2. This measurement tool is widely used and noted for its simplicity and brevity. Additionally, it achieves a high degree of reliability and acceptable level of discriminant correlations [8]. Each of the five personality traits on the FFM are quantified by averaging participants’ numerical responses to statements pertaining to the corresponding personality trait. Forward and reverse scoring were used according to the standard scoring technique [8].

Trait	Description
Openness	refers to the breadth, richness, originality, and complexity of an individual’s cognitive and experiential life. Individuals with high levels of openness tend to be more creative, artistic, have a wide variety of interests, and seek new learning opportunities as opposed to those who are more conventional or closed-minded.
Conscientiousness	refers to socially prescribed impulse control that facilitates organized, thoughtful, goal-directed behavior. Conscientious individuals tend to delay gratification and efficiently prioritize tasks as opposed to those who are impulsive and disorganized.
Extraversion	refers to an energetic approach toward social situations and a proclivity toward assertiveness and positive emotionality. Extraverts tend to be assertive and seek leadership positions. In contrast, introverts tend to be shy, reserved, and may avoid social situations.
Agreeableness	refers to a compassionate, community-oriented mindset. Individuals with high levels of agreeableness tend to exhibit greater degrees of altruism, trust, and modesty as opposed to mistrust and antagonism of others.
Neuroticism	refers to negative emotionality and emotional instability. Neurotic individuals tend to be more anxious, tense, nervous, and experience more depression. In contrast, individuals with low levels of neuroticism tend to exhibit emotional stability and even-tempereness.

Fig. 1 – Description of the FFM of personality traits, adapted from John et al. [8].

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