

FELLOWS-IN-TRAINING & EARLY CAREER PAGE

International Medical Graduates in Cardiology Fellowship



Brain Drain or Brain Gain?

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It was graduation day for 1 of the biggest and most prestigious pediatric residency programs in the country. Families came from every state to see their children graduate. Omar's family could not join him from overseas today, as they were not able to get the visa in time. The big news today was that the resident of the year award went to Omar, who is one of the few international medical graduates (IMGs) in the program. Like many IMGs, Omar was fascinated by cardiology, and he is currently pursuing his pediatric cardiology fellowship at the same institution. Omar was touched by President Barack Obama's speech on immigration reform, as he referred to immigrants by saying "they did not come here in search of a free ride or an easy life. They came to work, and study, and serve in our military, and above all, contribute to America's success" (1). Omar's goal is to leave his fingerprint on the field of pediatric cardiology, and he realizes this means a road full of obstacles that can only be overcome with persistent work.

There are 2 distinct groups of IMGs: those who were born and attended medical school in their home country, but come to practice and attain certification in the United States; and those who were born in the United States, but attended medical school abroad. Regardless of the pathway, IMGs have rapidly become an essential part of the adult and pediatric cardiovascular workforce in the United States (2). IMGs represent 37% of the physicians in internal medicine, 28% in pediatrics, and 30% of the fellowship training positions in cardiology (2-4). However, IMGs face many challenges to reach the same goals as their counterpart American medical graduates.

The first challenge for IMGs is to attain residency and fellowship positions in highly competitive academic institutions. A second very common rate-limiting factor faced by IMGs is obtaining the appropriate U.S. visa. Most IMGs come with a J-1 training visa or an H-1B work visa. In general, most universities and academic institutions will only accept the J-1 visa (although this rule has many exceptions) for medical trainees. The J-1 visa can be extended for up to 7 years; however, the trainee is required to return to his or her native country for 2 years after training completion prior to seeking re-entry into the United States for medical practice. As many IMGs often choose to stay in the United States for myriad reasons, they may preferentially search for institutions that sponsor the H-1B visa. The H-1B visa is a work visa that is valid for 6 years and does not have the same requirement for leaving the United States at the end of training. Unfortunately, many fellowship programs will not sponsor this visa, which limits the available options for IMGs.

Once training begins, IMGs can face challenges due to language barriers and cultural differences (4). As a result, some IMGs also experience isolation in the workplace, as well as a feeling of guilt for leaving their country and a need to give back to it (4). One of the largest causes of frustration for IMGs is "brain waste," because their skills obtained prior to coming to the United States are often unrecognized, underutilized, or unutilized (3).

Below are 7 tips for IMGs (5) that may help prevent *brain waste* and create *brain gain*, without brain drain:

1. *Put first things first.* There are varied, complex reasons why IMGs leave their countries and decide to train in the United States. One of the reasons is the excellent training at U.S. institutions compared

with their own countries. As mentioned, many U.S. institutions will only offer the J-1 visa, which has the 2-year requirement to leave after training is complete. This may discourage some excellent IMG candidates who wish to stay in the United States and give back to the profession. Under the right academic and funding settings, numerous options for waiving the J-1 visa requirement exist. These opportunities often are not realized or utilized by IMGs. As such, we suggest prioritizing the academic considerations and goals in lieu of the visa type when deciding about future cardiology training. This will prevent the *brain waste* that may be associated with immigration.

2. *Research always helps.* Research helps develop intellectual and interpersonal skills for IMGs (4). Most importantly, studies show that residents and fellows who publish in peer-reviewed journals during training are more likely to continue publishing in their future careers (6). IMGs also could help meet the demand for physician scientists in the United States (7). Unfortunately, early career academic cardiologists are facing many challenges, including increased competition and less funding opportunities (8). To identify the motivated stars, many program directors and chairmen look for research and academic productivity when selecting incumbent fellows. Fellowship programs relish trainees who bring new research ideas, experiences, and work ethic to the table. Last, presenting research at national conferences and networking with other fellows and faculty members increases the possibility of establishing the next steps in their medical careers (9).
3. *Turn abstracts into papers.* Completing work with publications is a very important characteristic of a great fellow. It demonstrates your self-motivation and commitment to academic medicine. In an academic institution, your research contributions are as valuable as your clinical role (10).
4. *Synergize.* Good mentors are critical in academic cardiology, especially for IMGs (11). Search for mentors who have some experience with mentoring IMGs, because these mentors will have a more complete understanding of our backgrounds, milestones, and expectations (12). Oftentimes, multiple mentors are better than a solitary one. Another important synergistic aspect is connecting to other fellows in different programs through the local societies, including the state chapters of the American College of Cardiology. These societies will provide opportunities to network and

exchange experiences and can help locate employment when the time comes (9).

5. *Seek systematic ways to give back to your own country.* To overcome feelings of guilt for staying in the United States and to change the *brain drain* into a *brain gain*, giving back to your country of origin can be essential. There are many ethnic medical associations based in the United States that have activities to help your country of origin, including online training courses, scholarships for new IMGs, and health mission trips that can aid in building the health care capacity in your native countries. Additionally, helping prospective IMG students from your own country and even other countries by offering mentorship opportunities and becoming a person of contact can be extremely valuable for the newcomers, and is also personally rewarding.
6. *Keep working hard.* Calvin Coolidge once said, “Nothing in this world can take the place of persistence. Talent will not.... Genius will not.... Education will not.... Persistence and determination alone are omnipotent” (13). Many IMGs report that hard work was the key to their success in training, despite many barriers and failures. As the number of IMGs in the U.S. medical training programs continue to decrease with the increased number of American medical graduates, persistence and hard work become more valuable (14).
7. *Sharpen the saw.* Maintain balance and renew your resources and energy. Although we always recommend healthy lifestyles to our patients, we should also adhere to this recommendation (15). This will provide the long-term energy that will help maintain the drive necessary for a long, sustainable future career.

CONCLUSIONS

Although the available positions for IMGs within cardiology training may decrease in the future as the number of American medical graduates increases, these recommendations may help IMGs excel in a cardiology fellowship program. In essence, persistence and hard work cannot be overstated. IMGs will continue to contribute to the field of cardiology in the United States.

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