Disruption and Medical Training: What can we learn from reading ‘medimoirs’?

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INTRODUCTION

There are numerous ways of thinking about disruption in relation to medical education and training, one of which is to consider autobiographical accounts from junior doctors, referred to by Shaw (2018) as ‘medimoirs’. Here, ten junior doctor autobiographies were considered to see whether disruption was a common theme and if so, what these common themes were.

METHODS

Relevant books written in English were identified using searches on various platforms, such as Google™, Google Scholar™ as well as one of the author’s (R.F.) personal library. Relevant publications were read and analysed as part of a dissertation written by Dr Russell Foster for the award of Diploma in the History of Medicine from the Society of Apothecaries in London, UK, completed in 2019. The work arose, in part, after considering a publication asking whether there was ever a ‘golden age’ for junior doctors (White, 2016).

RESULTS

A total of ten relevant publications were found, including one unpublished volume. The books were published between 1957 and 2019 by newly-qualified doctors writing about their early experiences as junior doctors. All books contained direct and indirect references to disruption, with common themes emerging of disruption to normal patterns to eating, sleeping, thinking and functioning. Most of the books refer to long hours of work, stress and lack of support yet also refer to resilience and positives of the experience, apart from one where the author leaves the profession due to stress. The use of humour, especially sardonic/sarcasm, appears to be a common means of coping with the disruptions that the junior doctor experience entails.

CONCLUSIONS

This work has shown that junior doctor memoirs provide an unusual means of assessing the concept of disruption in early years of post-graduate medical training and are a potentially useful source of inspiration, support and learning, as well as being a source of ideas for further research. Given that reflective practice is an increasingly important aspect of medical practice, these books provide examples of how this may be done and suggest further that there has never really been a golden age for junior doctors and that medical education and training need to change, in part by learning from historiography.
