Should Your Child Study Medicine?

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As someone who has dabbled in a range of careers, around this time of year I often receive calls from young, wide eyed high school students sitting their final examinations. Parents also call, which I applaud. It is important to get as much information as possible before making what are big decisions.

“Should I do medicine or law? Can I get on TV if I do journalism? Isn’t all the money in banking anyway?”

Given the vast majority of my time has been practising as a doctor, I am best qualified to give advice on a medical career. As the health care debate rages throughout the Western world, most notably in the United States where public care is somehow equated with fascism by some opponents, it is worth considering whether becoming a doctor is really the worthwhile, prestigious career it may once have been.

In reality, the changes in the way doctors work are a reflection of broader transformations in society and the economy. There is possibly no career where the mismatch between reality and expectations are greater.

Its major disadvantages include the length of training, its relative immobility and intellectual narrowness.

First of all, it takes an extraordinarily long time to become an independent practising doctor, especially if you become a specialist. When you include the university degree which takes a minimum of five years as an undergraduate or 3-4 years as a postgraduate, you are looking at almost 12-13 years as a bare minimum to complete all the necessary training. If you decide to become a GP, this may be reduced to eight or nine years. Most people take longer because things like having children, failing arduous examinations or taking time off extend things further.

In reality, the training does not need to be so long, but a combination of poor linkages between the various stages of medical training, pressure to keep public hospitals afloat through a cheap pool of labour and the rigidity of the College system of specialist training conspire to drag out the time.

During this period of training, the income received is only barely above subsistence, especially in a city like Sydney. You will feel very annoyed indeed when some people think you must be rich or watch your peers in other industries overtake you considerably in financial terms.

Second, in the global age becoming a doctor is actually one of the more immobile choices. The vast changes in communications technology mean many jobs are easily transferable between countries. This can be a problem sometimes when some jobs are
easily outsourced but it also means that the upper tier of labour can enjoy international jobs in a number of countries or continents. I have many friends who are lawyers, bankers or IT professionals who easily shift between countries and lucrative jobs.

While being a doctor would seem to be such a universal role, in reality, you are limited greatly by language (if you can’t speak to patients in anything other than English, it’s very difficult) and by local, usually strict, regulations limiting practice. This may worsen when you consider that regions like the UK have essentially engineered an oversupply of doctors. The reality is that policy is directed at getting doctors to work in the under-resourced rural areas. This pressure will remain for some time to come. While it may suit some people, the average dynamic, intelligent, globally minded medical student may feel frustrated indeed when they find themselves trapped for years in a country town while many of their peers are working in high flying jobs around the world. Ultimately, other than in roles such as international public health, being a doctor is very much a local, community type role.

Thirdly, the job is actually extremely narrow. The average specialist spends over a decade to learn what is ultimately a very narrow, specialized role which they then undertake repeatedly for many years. The narrowness of the role means it is also very difficult to reinvent oneself or use the skills in different arenas, other than perhaps teaching or maybe administration. Many older doctors, both specialists and GPs, are completely bored with their job and it gives them very little intellectual stimulation. This may be the case with many jobs. A doctor receives very high level training for complex illnesses, but spends the bulk of their time consulting for basic or trivial problems and reassuring patients everything is fine. This may still be a valuable role, but not a very stimulating one, nor is it a great use for what are very intelligent people.

The status of a doctor remains high, although it is probably much higher within ethnic communities than in the broader populace. But is unlikely to remain so. Like many authority figures such as clerics and lawyers, the broad access to information means doctors cannot claim to have special knowledge for that knowledge is freely available. They must essentially help patients manage the knowledge. When you consider health problems are increasingly chronic, the heroic cultural icon of the doctor making difficult diagnoses and saving lives is very far from the norm.

When combined with the fact doctors’ incomes are now well below the highest paying careers in business related fields, it is inevitable that the status of the doctor will steadily decline.

It still remains a good career choice, especially for soft, caring individuals who have long been motivated to work in health. But for the ambitious, intelligent student who are the kind that may get the marks to do medicine in the first place, it is increasingly a questionable option.
Career options are so broad and varied the average student should pursue careers closely related to their interests. This may require a degree of life experience and exploration to discover because our conservative family experience may mean on entry to university students have very little life experience. This is another reason why medicine may be a poor choice because it locks you into a fairly narrow career.

Furthermore, despite our community being very successful in relative terms with a high percentage of young people undertaking tertiary education, we are not very powerful or influential. This is true of Bangladeshi expatriate communities throughout the world. I believe one problem is the fact our children choose a narrow range of careers. There are too few in the realms of real power such as business, politics or media nor in the fields which can really give a voice such as the arts. I am hoping this will change as we become more established and less cautious.