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The female medical workforce

As a female consultant anaesthetist, I fully support the remarks from Critchley et al. [1] in their article regarding females in leadership and the attribution of undesirable comments when women take authority, using agenic traits that would not be attributed to our male colleagues taking a similar stance.

My comments, however, are about the proportion of female undergraduate medical students quoted, and subsequently working as consultants. While agreeing there are certainly fewer female consultants than males in the UK, there are a number of additional factors to take into account. In the article, proportions are used rather than absolute numbers. It is cited that while approximately 55% of medical students in the UK in the last decade have been female, at consultant level only 36.6% of doctors are female [2]. In addition, the article states that, in the UK, female anaesthetic specialty trainees have increased from 28% in 2003 to 50.9% in 2019, but at consultant level only 32% of the workforce are female [3].

It is important to recognise that in the article, female medical graduates have not been tracked to determine how many of them become consultants and, indeed, the numbers of consultants are not shown across the specialties and in anaesthesia in particular. Consultants in the UK train in many different medical schools, including those overseas, so a direct comparison of UK-trained female medical student numbers with the UK-trained female consultant numbers needs to be made. How many of the non-UK trained consultants are male? It is very likely that more males than females change country in pursuit of a consultant post.

In addition, many females train as less than full-time, consequently taking longer to reach consultant status. For example, an anaesthetic specialist registrar at 60% whole time equivalent will take 12 y to complete training, so this may also contribute to reduced numbers of consultants who are female.

The recent Royal College of Anaesthetists' Medical Workforce Census Report 2020 reports an increase in female consultants in the UK to 38% (n = 3024) from 32% in 2015, showing a further positive increase in the female consultant anaesthetist workforce [4]. It also reports favourably that 49% of ST4–7 anaesthetists in training are female (n = 1264); however, 69% are in full-time training, consequently the remainder will take longer to enter the consultant workforce.

A. Carr
College of Medicine, QU Health, Qatar University, Doha, Qatar
Email: a.carr@qu.edu.qa

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