

Aalborg Universitet

Why almost any orthopaedic subspeciality is preferable to spine surgery

Eiskjær, Søren Peter; Heide Pedersen, Peter

Publication date: 2018

Document Version Publisher's PDF, also known as Version of record

Link to publication from Aalborg University

Citation for published version (APA):

Eiskjær, S. P., & Heide Pedersen, P. (2018). Why almost any orthopaedic subspeciality is preferable to spine surgery. 15. Abstract from Nordic Spinal Deformities Society Meeting 2018, Kolding, Denmark.

General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- ? You may not further distribute the material or use it for any profit-making activity or commercial gain ? You may freely distribute the URL identifying the publication in the public portal ?

If you believe that this document breaches copyright please contact us at vbn@aub.aau.dk providing details, and we will remove access to the work immediately and investigate your claim.

No. 8. Why almost any orthopaedic subspeciality is preferable to spine surgery

Eiskjær SP, Petersen PH

Department of Orthopaedic Surgery, Aalborg University Hospital, Denmak

Background:

Resident's choice of subspeciality is influenced by many factors. Spine surgeons are in demand in most European countries (Okafor et al.). However, spine surgery ranks low among the subspeciality choices (Sanaz et al.). The reasons for this are mostly unknown.

Methods:

Participants in the mandatory 3-day spine surgery course for orthopaedic residents 2018 were asked to complete a survey regarding career priorities and choice of subspeciality. They were asked to give a reason for not choosing spine surgery.

Results:

37 current residents participated in the survey. 10 women. Only 1 out of the 37 wanted to pursue a career in spine surgery (3 %). Most residents opted for arthroplasty 9/27 (24 %), hand 8/37 (22 %), traumatology 8/37 (22 %), and sports 5/27 (14 %). A high proportion of outpatient surgery was given as the main reason for the choice of subspeciality by 15/37 (41 %) of participants, geographic location in 12/37 (32 %) and minimal on call duties in 9/37 (24 %). The reason for not choosing spine surgery was stated as prolonged duration of surgery 16/37 (43 %) and the belief that many patients suffers from psychosomatic diseases 12/37 (32 %).

Conclusion:

If only 2-3 percent of orthopedic residents choose spine surgery as their subspeciality it is questionable if status quo can be maintained or any expansion in numbers can be achieved. The reasons for not choosing spine surgery as a subspeciality is based on the false belief that all spine surgeries are long lasting and that our indications for surgery likewise are wrong resulting in many patients with psychosomatic diseases undergoing surgery. We should do our utmost to correct these misunderstandings.