

# Nephrology in the Netherlands is not going under

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**The combination of working in dialysis as well as in general medicine/nephrology after a good training program—along with ongoing interest in clinical research—makes it sufficiently appealing for many trainees to pursue a career in nephrology in the Netherlands.**

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In this issue, Lane<sup>1</sup> describes the results of a survey in two groups of potential trainees in nephrology: a group who did consider a career in nephrology and a group who did not. The most important reason why physicians decided to exclude nephrology as a career option was based on the fact that they had been working in a dialysis unit only or were foreseeing doing so in the future. This contrasts with the individuals who considered pursuing a career in nephrology who had also been working in transplantation and/or general nephrology with interesting physiology and electrolyte disturbances. The prevalence of the latter situation is one of the possible explanations why nephrology in the Netherlands is not in such dire straits. Most dialysis units in the Netherlands are based in renal units of non-academic hospitals. In these hospitals, internist-nephrologists not only take care of dialysis but also are involved in general nephrology as well as general internal medicine and/or intensive care medicine, thus providing sufficiently differentiated job content. These hospitals usually employ a larger number of internists such as internist-nephrologists, -hematologists, and -endocrinologists, who are able to be on-call for each other's patients, resulting in less overtime requirements and more leisure time, the lack of which was another factor cited by trainees who decided against nephrology.

Another important issue that made trainees favor considering a career in nephrology was the availability of sufficient nephrology training. In the Netherlands, a lot of attention is paid to nephrology training both locally, as is determined during frequent inspections of the nephrology training programs every 2–5 years, and nationally. During the 2 years of nephrology training, 4 days a year are devoted to attending training sessions offered by renowned Dutch nephrologists in the areas of hypertension, hemodialysis, peritoneal dialysis, transplantation, glomerular disease, and other nephrology-related topics. To become a licensed internist-nephrologist, trainees are obligated to attend at least 6 of these nephrology training days. Usually, however, trainees attend all 8 of these training days, as they are taught by renowned Dutch nephrologists, which gives trainees the opportunity to discuss most important nephrology topics with key Dutch opinion leaders in nephrology.

Another possible topic that, surprisingly, was not mentioned in the paper by Lane could increase enthusiasm for a career in nephrology: scientific involvement. Scientific involvement is another obligatory issue for becoming licensed as a nephrologist in the Netherlands. Trainees have to write a scientific paper and/or present scientific data on a

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national or international meeting. This may be the result of the long-standing good track record of Dutch nephrology or, by contrast, could be a contributing factor.

In 2002, Rahman and Fukui<sup>2</sup> examined countries' shares of basic and clinical papers in 13 top-ranked journals. In basic science, Dutch research was ranked 8th (share 1.5%) and in clinical research it ranked 4th (share 1.6%), even when counted in absolute numbers. Although these data did not specifically address nephrology research, Dutch nephrology contributed substantially to these figures. Further, 2% of the free communications sessions during the 2008 American Society of Nephrology meeting came from the Netherlands (1 nephrologist per 625,000 inhabitants). For clinical research, this fact may be attributed to the willingness of Dutch nephrologists working in non-university centers to participate in multicenter trials.

The Netherlands is, in fact, facing problems in the medical field, including an increasing number of physicians who want to work part-time and who have reduced enthusiasm for on-call and overtime requirements. Nevertheless, the combination of working in dialysis as well as in general medicine/nephrology after a good training program—along with ongoing interest in clinical research—makes it sufficiently appealing for many trainees to pursue a career in nephrology in the Netherlands.

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