International medical graduates, genetics at end-of-life, climate change, and paediatric antibiotic prescribing in China

International medical graduates. International medical graduates (IMGs) have played a critical role in the healthcare systems of high-income countries for many decades but surprisingly little research has examined their experiences. Using data from the 2019 American Medical Association Physician Masterfile (n = 19,985), a recent study from Pennsylvania found that IMGs from developed countries follow less marginalised paths in their US careers relative to IMGs from developing countries; they are more likely to practise in more competitive and popular medical specialties; to attend prestigious residency programmes; and to practise in less disadvantaged and affluent counties that employ more US IMGs relative to IMGs. In other words, IMG doctors are not a homogenous lump, and a more nuanced stratification would help us better understand how nativism and racism can intersect to generate inequalities in the medical profession.

Genetics at end-of-life. Some people with palliative care needs unknowingly have a genetic predisposition to their disease, placing relatives at an increased risk. Although the opportunity to talk about genetics narrows as the end-of-life approaches, these are clearly challenging conversations, and a recent Australian study sought to explore the experiences of palliative care clinicians in addressing genetics.2 They found that clinicians balance the potential harms and benefits of genetic information to their patients, navigate whether it is their responsibility to raise genetics, and must overcome numerous practice barriers. Potential strategies to build the capability of palliative care clinicians include fostering genetic-palliative care clinician relationships, developing clinical resources, increasing organisational support for genetics integration, and imbedded and ongoing genetics education.

Climate change. Given that climate change factors can cause flares of various skin diseases as well as increasing the risk of skin cancer, a research team from New York recently completed an online questionnaire study to characterise the viewpoints and actions of practising dermatologists with respect to climate change.3 They found that dermatologists in the US, particularly in academic areas, are largely cognisant of global climate change and its effects on patients, and eager for further education on its dermatological ramifications. The authors suggest there is a great opportunity to close this ‘practice gap’ and raise awareness through more efforts to provide resources and actionable items regarding climate change to physicians by professional organisations and journal publications.

Paediatric antibiotic prescribing in China. Despite the enormous scale of antimicrobial resistance as a healthcare challenge and the recognition that antibiotic overprescribing is a central component, it remains an underexamined topic in the healthcare system of the world’s most populous country. A recent study that analysed 183 video-recorded medical conversations in the Chinese paediatric setting shows that patient caregivers frequently challenge the physician’s medical authority by resisting treatment recommendations, displaying a high level of entitlement to influence the treatment decision.4 The authors argue that the relatively low level of medical authority is a significant contributor to the problem and that under this consumerist doctor-patient relationship model, antibiotics are conceptualised as a negotiable commodity and physicians are unable to fulfill their role as gatekeepers. They conclude that serious efforts are required to protect physicians’ professional authority in China.

Podcast of the month. Because I can almost never catch it on Radio 4 on Wednesday afternoons, BBC Radio 4 Inside Health has instead become a firm fixture on my podcast list: https://www.bbc.co.uk/programmes/b019dl1b.

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