

LETTERS

Pregnancy in Residency

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To the editor:

I read with interest the study by Krause et al., which found that female residents who experienced pregnancy during residency received more negative peer evaluation scores when compared to colleagues in general and to male residents who experienced fatherhood during residency.¹

The impact of pregnancy in residency extends beyond the female resident. This article mentions a study from 1983 in which resident colleagues were surveyed regarding their feelings toward their pregnant colleagues.² While they felt pregnancy caused a “humanizing effect on the work environment,” the majority of respondents (80%) also reported feeling inconvenienced by their pregnant colleague. In the more than 3 decades since this study was published, much has changed: resident duty hours have been restricted, maternity leave is more uniformly available, and the proportion of women entering residency training has dramatically increased (from 24% in 1980–81 to 48% in 2011–12).³ Despite these changes, the findings of Krause et al. suggest ongoing struggles incurred by both residents returning from maternity leave and their peers. It would be interesting to further assess, from the perspective of peer evaluators, which evaluation domains were impacted the most. Could absences for lactation be perceived as unprofessional? Could sleep deprivation be impacting patient care or clinical reasoning? Further identification of the deficient domains may better allow for focused mentorship to residents impacted by pregnancy during residency.

The role of social media for mentorship in a residency setting has not been well studied.⁴ Residents experiencing pregnancy face unique challenges such as arranging childcare during periods on-call or maintaining lactation during intensive clinical rotations. One opportunity for future research would be to investigate the means by which residents who enter motherhood can seek support from beyond their own training institution. Social media networks can connect thousands of physician mothers who share in the unique challenge that is being both a physician and a mother.

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Compliance with Ethical Standards:

Conflict of Interest: *No conflicts of interest, financial or other, exists, and I have no funding sources to disclose.*

REFERENCES

1. **Krause ML, Elrashidi MY, Halvorsen AJ, McDonald FS, Oxtenko AS.** Impact of pregnancy and gender on Internal Medicine resident evaluations: a retrospective cohort study. *J Gen Intern Med.* 2017. doi: <https://doi.org/10.1007/s11606-017-4010-5>
2. **Franco K, Evans CL, Best AP, et al.** Conflicts associated with physicians' pregnancies. *The American Journal of Psychiatry.* 1983;140:902–904.
3. Association of American Medical Colleges. Women in U.S. Academic Medicine and Science: Statistics and Benchmarking Report 2011–2012. Available at: <https://www.aamc.org/download/415556/data/2011-2012wimsstatsreport.pdf> Accessed March 2, 2017.
4. **Sterling M, Leung P, Wright D, Bishop TF.** The use of social media in graduate medical education: a systemic review. *Acad Med.* 2017 Feb 21. doi: <https://doi.org/10.1097/ACM.0000000000001617>