



CIRUGÍA ESPAÑOLA

www.elsevier.es/cirugia



Letter to the Editor

Scientific Productivity of General and Digestive Surgery Residents

Sobre la productividad científica de los médicos residentes de cirugía general y digestiva

Dear Editor:

Recently, an interesting and important Letter to the Editor was published in which Parés¹ called attention to the low scientific productivity of resident physicians of our specialty. The scientific activity of our residents, measured as written publications and contributions to congresses, does not meet the standards set by the program of our specialty, as demonstrated in a previous study by Serra-Aracil et al.²

Probable solutions and incentives are proposed, such as stimulating critical review of the literature, increasing the conversion of previous oral communications into publications, structured and progressive planning of scientific activity and practical training in this part of clinical research through workshop courses. A word of necessary advice is also given: what is truly important is not to publish for the sake of publishing, but to generate knowledge.

There is no doubt that Dr. Parés's letter shows wisdom and excellent timing. Every now and then a voice arises to preach in this wilderness.³⁻⁵ But more should still be said. It is essential for there to have a leadership in general surgery departments, both in clinical practice and in research. To this end, department heads, unit directors and medical resident tutors all need to be able to demonstrate sufficient scientific background. Although generalizations are unfair, one must admit that the current system of promotion or selection of these positions is frequently capricious, arbitrary or even nonexistent. We could say the same about the Spanish Association of Surgeons or the regional societies with regards to some committee-member positions. When selecting

department heads and directors, objective requirements and indicators should be used to assess potential researchers, such as the possession of a doctorate, impact factor, *h* index⁶ or the number of publications that meet quality criteria. This experience or research potential should complement clinical or management needs. Research and clinical practice are inseparable, but in a large number of cases the routine of patient care consumes all the resources or is used as a weak excuse to justify the lack of research activities. Other times, there may even be open resentment toward scientific work. Resident doctors will do as they see being done, reproducing these learned behaviors in many cases. The low research profile of many chiefs, coordinators and those with similar positions makes it nearly impossible to stimulate the scientific production that Parés and Serra-Aracil find lacking. If those in charge do not encourage, require, facilitate or award research, it will languish. Another unresolved problem is the sufficient, fair and necessary recognition of the research work done by residents when later promoted to a work position.

It is the responsibility of all of us but especially those in leadership positions on tribunals, commissions and committees that have the possibility to demand not unattainable excellence but instead a minimal objective and simple threshold of merits in the designation or selection of heads of Spanish general surgery units. Furthermore, surgical teaching departments should be rewarded or penalized depending on the scientific and research activity demonstrated by their residents. One way of doing so would be to increase the teaching capabilities of productive departments and reduce that of those which are not.

* Please cite this article as: Aguayo-Albasini JL, Pellicer-Franco EM. Sobre la productividad científica de los médicos residentes de cirugía general y digestiva. Cir Esp. 2014;92:297-298.

REFERENCES

1. Parés D. ¿Cómo podemos aumentar el número de publicaciones científicas en cirugía general y digestiva? *Cir Esp.* 2013;91:346-7.
2. Serra-Aracil X, Navarro Soto S, Hermoso Bosch J, Miguelena JM, Ramos JL, Martín Pérez. et al. A prospective, multicentre study on the activity of general and digestive surgery residents based on the use of the computerised logbook. *Cir Esp.* 2012;90:518-24.
3. Parrilla Paricio P. Formación en investigación durante el periodo MIR. *Cir Esp.* 2000;67:1-3.
4. de Oca J. La investigación traslacional en cirugía. *Cir Esp.* 2005;78:135-7.
5. Ferrer Márquez M, Belda Lozano R. Investigación en cirugía, ¿un camino fácil? *Cir Esp.* 2012;90:67-70.
6. Aguayo JL, Campillo Soto A. El índice h o de Hirsch en la evaluación de la actividad científica. *Med Clin (Barc).* 2008;131:239.

José Luis Aguayo-Albasini¹, Enrique M. Pellicer-Franco^{2,*}

Servicio de Cirugía General, Hospital General Universitario "JM Morales Meseguer", Campus de Excelencia Internacional "Mare Nostrum", Universidad de Murcia, Murcia, Spain

*Corresponding author.

E-mail address: e.pellicerfranco@gmail.com

(E.M. Pellicer-Franco).

¹University Professor, Chief of the General Surgery Department.

²Specialist, General Surgery Attending.

2173-5077/\$ – see front matter

© 2013 AEC. Published by Elsevier España, S.L. All rights reserved.