

Ophthalmology Training and Teaching in India: Leadership Mantras for Young Ophthalmologist

Suresh K. Pandey, MS^{1,2,3}, Vidushi Sharma, MD, FRCS^{3,4}

¹Kota Division Ophthalmological Society, Kota, Rajasthan, India, ²Indian Medical Association, Kota, Rajasthan, India, ³SuVi Eye Institute, Lasik Laser Center, Kota, Rajasthan, India, ⁴Oculoplastic Surgery Fellowship (Australia)

ABSTRACT

It is essential to keep in mind that the young ophthalmologists are the future of ophthalmology. Using innovative teaching styles and techniques to help today's technology-driven residents to learn and fine-tune surgical techniques more efficiently. Residents in training would play a major role in shaping up into the future leaders of ophthalmology if they have all the essential elements – patient care, skill-based practice, practice-based improvement, and learning, professionalism, communication, and interpersonal skills leading to their continuous professional development. The training system must provide them a chance for open-minded learning of comprehensive ophthalmology and a broad-based approach. There are numerous ways through which these young ophthalmologists can become leaders of tomorrow. It is essential for them to find the right mentor, someone who is genuinely interested in helping them adapt their leadership qualities instead of someone who hardly offers any useful advice. The young ophthalmologists need to become more proactive if they truly want to become future leaders. These future ophthalmic leaders should also be engaged in member ophthalmic organizations and participation in national and international ophthalmic conferences right from the initial stage. Young ophthalmologists must consider stepping out of their comfort zone and must trust their education and training and must not be afraid to learn new techniques and skills that can open more opportunities for them to move on to leadership roles.

Key words: Leadership mantras for young ophthalmologist, ophthalmology training and teaching in india, leadership for young ophthalmologists, residency training in ophthalmology, teaching, and training in ophthalmology

INTRODUCTION

phthalmology offers the adrenalin rush associated with performing delicate sight-restoring surgeries, yet the eye specialists do not deal with stressful life and death situations. Residency training is one of the crucial phases in a doctors' life which transforms a theoretical generalist to a practical specialist geared up to take on the responsibility of caring for the patients. Throughout the years, the surgical training process in ophthalmology has progressed from unstructured apprenticeship to limitless period in the past, and then in the 20th century, shifted to a

Halstedian pyramidal structure and currently on consistent rectangular model with specified timeline.^[1] However, the "See one, do one, teach one" concept of the Halstedian model is still ingrained in the residency.

CHALLENGES OF RESIDENCY TRAINING

It is without a doubt that the residency training process in ophthalmology is intellectually, emotionally, and physically demanding. The crucial requirements of these residency

Address correspondence to:

Dr. Suresh K. Pandey, President, Kota Division Ophthalmological Society (KDOS), Vice President, Indian Medical Association (IMA) Kota, Director, SuVi Eye Institute & Lasik Laser Center, C 13 Talwandi, Kota, Rajasthan 324 005, India. Tel.: +91 935 141 2449. E-mail:suresh.pandey@gmail.com

© 2019 The Author(s). This open access article is distributed under a Creative Commons Attribution (CC-BY) 4.0 license.

programs are a working and atmosphere learning which promotes excellence in quality and safety of professionalism and care, faculty that has been trained to mentor, evaluate, train and teach, best exposure to clinical procedures and investigations, as well as patients, and the required equipment and facilities to offer standardized care.^[2]

VAST CURRICULUM VERSUS LIMITED HAND-ON SURGICAL TRAINING

The residency curriculum is, of course, dynamic and ever changing as per the scientific and technological advancements in ophthalmology. While the universities and regulated bodies make it a point to update the curriculum regularly, in the residency programs, the predominant is the "taught curriculum." [3] Even though similarities between taught and declared are ideal, there are discrepancies in adherence. Throughout the past decades, the practice of ophthalmology has tremendously changed worldwide. The treatment and management of ophthalmic disorders and surgical techniques have undergone significant changes. However, with the exception of few teaching institutes in India, majority of residents are getting limited exposure to these latest advances. While cataract surgery training has shifted from intracapsular cataract extraction and extracapsular extraction to small-incision cataract surgery and phacoemulsification and foldable intraocular lens, but other ophthalmic surgeries are still taught sparingly during the residency.^[4] There was an enormous variation across the country in residency training which needs immediate attention.

NECESSITY OF IMPROVING RESIDENCY TRAINING?

Several authors emphasized that the residency training in India still needs to be improved significantly. Without proper and updated residency training system in majority of medical colleges in India, how would young ophthalmologists become the leaders in their field? In India, 60% of residency training for ophthalmology is under government-run organizations while the rest are private institutions.^[5] The imparted training is typically done in various settings such as medical colleges (including regional institutes) and private institutes. There is not a coherent training system followed by all which leads to huge variations in quality of training. It is important to ensure that residents in India observe (and perform under supervision, if possible) a good variety of ophthalmic surgeries - not just only cataract-lens implant surgery but also in medical retina, basic vitreoretinal procedures, refractive procedures, oculoplastic surgery, glaucoma surgery, squint surgery, routine ocular trauma, and so on that will help them to develop interest while selecting their field of interest during the fellowship.

Willingness to change, commitment, culture, goals, agility to introduce change, and accept the change widely varies. [6] Can all of this change? Is it possible to implement such a training system that not just produces conscientious and safe specialists with the best attitude, knowledge, and skills, but those who practice optimal proficiency and exhibit leadership qualities? Can such a system be implemented without being affected by the negative practices prevailing in the system?

The shortage of standardization shows the need for a stronger regulatory authority to make these changes and implement them efficiently. It is important to have such a training system which focuses on the actuality of the learning process, human resources, and the infrastructure. In addition, the training system must be need-based. Standards must be established and followed. There is a dire need to emphasize the residents' role as researches and teachers throughout their residency to encourage them to become leaders. This is one of the major parts of competency-based curriculum for residency training of young ophthalmologists around the globe.

ROLE OF LEADERS AND OPHTHALMIC SOCIETIES

There is a strong need for the authorities to do major rethinking and correction in the curriculum and training system. Numerous ophthalmologists have stressed the need of establishing a fresh training system for the residency students in ophthalmology. Moreover, it has been stressed that potential of young ophthalmologists of India must be encouraged to take the leadership role. This can be done if the residency students have a great foundation of teaching and training. Two examples deserve special mention here - I-Focus, National Postgraduate Education Programme in Ophthalmology and Academic and Research Committee wing of All India Ophthalmological Society, both have done commendable work to update residents in basic and cutting-edge ophthalmology and helped them to prepare for leadership role.

ROLE OF RESIDENTS/YOUNG OPHTHALMOLOGISTS

Residents in training would play a major role in shaping up the future of ophthalmology in the right direction if they have all the essential elements - skill-based practice, practice-based improvement and learning, professionalism, communication and interpersonal skills, patient care, leadership skills, and medical knowledge. [12] The training system must provide them a chance for open-minded learning of comprehensive ophthalmology and a broad-based approach. It is up to the coordinators of residency training as well as ophthalmology

heads of various institutions to come up with the will to make these changes and also to lead this change throughout ophthalmology in India. There are numerous ways these changes can happen - a teaching schedule, one-on-one mentorship for residents, encourage young ophthalmologist to teach, management of their time, as well as reorganization in the departments.

PEARLS FOR WOMEN RESIDENTS IN OPHTHALMOLOGY

Ophthalmology is becoming a preferred branch for female doctors as career as an eye specialist is considered rewarding for women wanting to maintain a work-life and work-family balance. It is extremely important for all resident doctors to get the best possible training during their residency. This is even more pertinent for women residents, as it becomes very difficult to devote time to full-time rigorous training programs at a later stage in life, particularly after marriage and kids. At an early age, it is possible to travel far and wide for the best training opportunities, especially in surgical disciplines like ophthalmology. The current ophthalmology practice is becoming difficult due to heightened patient expectations and an aggressive consumer culture that is spreading fast. In such a scenario, it is absolutely essential to get the best possible clinical training so that their competence can become their big strength when these residents start doing clinical practice.

ROLE OF MENTORS

For mentors and teachers, teaching can indeed be challenging in a changing era of mentor protégé relationship. The residents of ophthalmology now are more focused and competitive than ever before. Some of them may suffer from work-related stress due to excessive workload while others may have an attitude problem, may not be doing their duties properly and lacking the basic discipline and a mindset that lacks respect for their seniors and mentors. Furthermore, their learning style, as well as exposure to innovative learning modes, has increased their expectations from their mentors and teachers. On the other hand, the mentors and teachers feel these young ophthalmologists just want to learn things way too quickly and on their own. There is a dire need to find a middle ground, and for that, there is a major need to create mutual goals that must be implemented. It is important to utilize the innovative teaching styles and techniques to help these technically driven residents to learn more efficiently. It is essential to keep in mind that these young ophthalmologists are the future of ophthalmology. Steps need to be taken to make immediate changes in the training and teaching in ophthalmology residency to ensure a bright and prosperous future of ophthalmology in India.

LEADERSHIP MANTRAS FOR YOUNG OPHTHALMOLOGISTS?

There are numerous ways through which these young ophthalmologists can become leaders of tomorrow. First, it is essential for them to find the right mentor, someone who is genuinely interested in helping them adapt leadership qualities instead of someone who hardly offers any useful advice. Most importantly, they have to actually listen to their mentors, even if it is a hard feedback. Moreover, young ophthalmologists need to become more proactive if they truly want to become future leaders.[13] There is no point in waiting for someone to hand them the responsibilities, they need to show their mentors and leaders that they have what it takes to be in a leadership role. These future leaders should also be engaged in member organizations right from the initial stage.[14] Another important thing these young ophthalmologists must consider is stepping out of their comfort zone. They must trust their education and training and must not be afraid to learn new technique and skill that can open more opportunities for them to move on to leadership roles.[15]

REFERENCES

- Honavar SG. Ophthalmology residency training in India: Quo vadis? Indian J Ophthalmol 2017;65:427-8.
- Murthy GV, Gupta SK, Bachani D, Sanga L, John N, Tewari HK, et al. Status of speciality training in ophthalmology in India. Indian J Ophthalmol 2005;53:135-42.
- 3. Gogate P, Biswas P, Natarajan S, Ramamurthy D, Bhattacharya D, Golnik K, *et al.* Residency evaluation and adherence design study: Young ophthalmologists' perception of their residency programs clinical and surgical skills. Indian J Ophthalmol 2017;65:452-60.
- Biswas P, Gogate PM, Maskati QB, Natarajan S, Verma L, Bansal PK, et al. Residency evaluation and adherence design study III: Ophthalmology residency training in India: Then and now-improving with time? Indian J Ophthalmol 2018;66:785-92.
- Ajay K, Krishnaprasad R, Divya DS. Ophthalmic surgical training in Karnataka and Southern India: Present status and future interests from a survey of final-year residents. Indian J Ophthalmol 2015;63:306-11.
- Thomas R, Dogra M. An evaluation of medical college departments of ophthalmology in India and change following provision of modern instrumentation and training. Indian J Ophthalmol 2008;56:9-16.
- 7. Grover AK. Postgraduate ophthalmic education in India: Are we on the right track? Indian J Ophthalmol 2008;56:3-4.
- Ryg PA, Hafler JP, Forster SH. The efficacy of residents as teachers in an ophthalmology module. J Surg Educ 2016;73:323-8.
- 9. Golnik KC, Lee AG, Wilson MC. A national program director survey of the shift to competency-based education in ophthalmology. Ophthalmology 2008;115:1426-30, 1430.e1-2.
- 10. Honavar SG. Steps to standardize ophthalmology residency

- programs in India. Indian J Ophthalmol 2018;66:733-9.
- 11. Gupta A. Ophthalmology postgraduate training in India: Stirring up a hornet's nest. Indian J Ophthalmol 2017;65:433-4.
- Grover AK, Honavar SG, Azad R, Verma L. A national curriculum for ophthalmology residency training. Indian J Ophthalmol 2018;66:752-83.
- 13. Foist C. 6 Tips for Young Ophthalmologists from 2018 President Keith Carter, MD. American Academy of Ophthalmology; 2018. Available from: https://www.aao.org/young-ophthalmologists/yo-info/article/6-tips-for-yos-from-2018-academy-president.
- 14. Mets MB, Brown A, Doan AP, Williams RD, Mills R, Erie JC,

- et al. The ophthalmologist of the future. Arch Ophthalmol 2012;130:1190-4.
- 15. Pandey SK, Sharma V. Ophthamology training and teaching in India: How these young ophthamologists can become leaders of tomorrow? Indian J Ophthalmol 2018;66:1517-8.

How to cite this article: Pandey SK, Sharma V. Ophthalmology Training and Teaching in India: Leadership Mantras for Young Ophthalmologist. Clin Res Ophthalmol 2019;2(1):1-4.