

MD-wanted signs. *CMAJ* 1998;159(10):1292.

8. Sullivan P. Shut out at home, Canadians flocking to Ireland's medical schools — and to an uncertain future. *CMAJ* 2000;162(6):868-71.

Be careful how you report survey results

I read with great interest a recent Pulse column in *CMAJ*.¹ However, I have several major concerns with Lynda Buske's reporting of the survey of residency program directors concerning job opportunities in their specialties over the next 5 years.

While the statement that a majority of program directors in 4 specialties (occupational medicine, neurosurgery, pediatrics and community medicine) thought that job opportunities in their specialties would either remain constant or deteriorate over the next 5 years is technically correct, it is misleading.

A detailed review of the CaRMS survey report shows that respondents were asked to specify if they believed job opportunities in their specialty would (1) improve, (2) remain constant or (3) deteriorate over the next 5 years. For these 4 specialties the results of the survey were as follows: 100% (2/2) of occupational medicine program directors felt that job opportunities would remain constant; 22% (2/9) of neurosurgery program directors felt that job opportunities would improve, 44% (4/9) felt that they would remain constant and 33% (3/9) felt that they would deteriorate; 46% (6/13) of pediatrics program directors felt that job opportunities would improve and 54% (7/13) felt that they would remain constant; and 50% (2/4) of community medicine program directors felt that job opportunities would improve and 50% (2/4) felt that they would remain constant.

By choosing to group "remain constant" and "deteriorate" together, Buske presented a distorted view of the results. Imagine how the article would have read if she had chosen to group "constant" and "improve" together. I would suggest that in only 1 of these specialties — neurosurgery — is it true that pro-

gram directors thought job opportunities would deteriorate over the next 5 years. In the other 3 the survey results indicate that opportunities are expected to either remain constant (occupational medicine) or actually improve (pediatrics and community medicine) over that time period.

Unfortunately, this article has misinformed the journal's readers, particularly medical students who depend on sources such as *CMAJ* to make difficult career decisions.

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Reference

1. Buske L. Where do medicine's job opportunities lie? *CMAJ* 2000;162(13):1865.

[The author responds:]

Bart Harvey's points are well taken. The detailed results of the survey of program directors conducted by the Canadian Resident Matching Service in 1999 are shown in Table 1. I hope this will clear up the confusion caused by the presentation of the survey results in my *CMAJ* Pulse column.¹

Lynda Buske

Canadian Medical Association

Reference

1. Buske L. Where do medicine's job opportunities lie? *CMAJ* 2000;162(13):1865.

Table 1: Responses of Canadian program directors surveyed by the Canadian Resident Matching Service to the following question: Please speculate as to how job opportunities in your specialty will change in the next 5 years

	Response (%)		
	Increase	Remain constant	Decrease
Family medicine	73	27	0
Internal medicine	92	8	0
Obstetrics and gynecology	83	8	8
Anesthesia	77	23	0
Radiology	100	0	0
Psychiatry	62	38	0
Pediatrics	46	54	0
Laboratory medicine	82	9	9
Dermatology	75	25	0
Emergency medicine	70	30	0
Neurology	85	15	0
Physical medicine and rehabilitation	67	33	0
Community medicine	50	50	0
Medical genetics	100	0	0
Nuclear medicine	50	25	25
Occupational medicine	0	100	0
General surgery	100	0	0
Cardiac surgery	71	29	0
Neurosurgery	22	44	33
Ophthalmology	67	33	0
Orthopedic surgery	67	25	8
Otolaryngology	86	14	0
Plastic surgery	86	14	0
Thoracic surgery	100	0	0
Urology	67	33	0
Overall	74	23	3