



How does one become a family physician?

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No doubt there are as many reasons for becoming a family physician as there are family physicians. Some would say that they inherited the gene from their fathers or mothers, who were family physicians before them; it was their destiny. Some remember physicians who inspired them to pursue this path by setting a wonderful example: their own family physicians or the physicians who practised in their villages or neighbourhoods. Others talk about pursuing a dream or a mission to accomplish great things, save lives, or ease suffering, following in the footsteps of Albert Schweitzer or Stephen Lewis.

Choosing family medicine

However, not everyone has such lofty goals. There was a time when any specialist nearing the end of his or her career could switch hats and become a general practitioner without any additional training. As though anyone could practise family medicine! There was a time—not so long ago—when medical students registering with the Canadian Resident Matching Service could make family medicine their second or third choice. They did this to guarantee that they would be accepted at the university, and in the city, of their choice, not because they were interested in family medicine. And, in recent memory, many academics considered family medicine a second-tier choice and were not afraid to share this opinion with students who expressed an interest in pursuing this path.

While all sorts of other factors might be at work—age, sex, life-work balance, and remuneration, among others—most of us choose family medicine during our training. We have a wonderful rotation experience. We are inspired by an excellent teacher. We enter the orbit of a family physician who is fiercely proud of the profession. We realize that we love all aspects of medicine and do not want to narrow our vision.

One relatively easy way to get medical students interested in family medicine is to create a formal faculty mentoring program. Myhre et al relate this in an article entitled, “Effect of the discipline of formal faculty advisors on medical student experience and career interest” (page e607).¹ Their study reveals


that faculty mentoring has a positive effect; there is a statistically significant increase in student interest in family medicine simply by having a formal faculty mentoring relationship with a family medicine advisor ($P=.01$). The study also reveals that mentors and mentees discuss a range of topics, not just family medicine. In this study, in their meetings, they discussed their education, their personal lives, and the profession in 44%, 75%, and 94% of cases, respectively.

Myhre and colleagues’ article offers a lesson that every department of family medicine seeking to promote the discipline should learn.

Peer review

Peer review is another interesting topic. Many people wonder what peer review consists of. Why is it used? Who are peer reviewers and how are they chosen? What criteria do they use and what is the process? What roles do the peer reviewer, the editor, and the publisher of a medical journal play?

There is a lot of misinformation out there about peer review. It is not foolproof, as Richard Smith points out in *The Trouble with Medical Journals*, published in 2006.² Recently, Stahel and Moore, the editors of 2 peer-reviewed medical journals, suggested ways in which peer review could be improved.³

Many of the questions around peer review are answered in an article entitled “Becoming a peer reviewer. Engaging in sharing and gaining knowledge” by Ramsden et al, which appears on page 1158.⁴ Peer review of scientific articles provides the foundation upon which advances in science are made. Perhaps you would like to contribute to the advancement of the field of family medicine by becoming a peer reviewer for *Canadian Family Physician*. 

References

1. Myhre DL, Sherlock K, Williamson T, Pedersen JS. Effect of the discipline of formal faculty advisors on medical student experience and career interest. *Can Fam Physician* 2014;60:e607-12.
2. Smith R. *The trouble with medical journals*. London, UK: Royal Society of Medicine; 2006.
3. Stahel PF, Moore EE. Peer review for biomedical publications: we can improve the system. *BMC Med* 2014;12(1):179. Epub ahead of print.
4. Ramsden VR, Pimlott N, Woollard R, Kvern B, Handford C, Dunikowski L, et al. Becoming a peer reviewer. Engaging in sharing and gaining knowledge. *Can Fam Physician* 2014;60:1158-60.

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Cet article se trouve aussi en français à la page 1064.