Pediatric gastroenterology – are you kidding?

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Kevan Jacobson is an Associate Professor of pediatrics at the University of British Columbia, Vancouver, British Columbia. He has training as an adult and pediatric gastroenterologist.

PA: What is a pediatric gastroenterologist?
KJ: A pediatric gastroenterologist is defined as a physician who either has Royal College certification in pediatric gastroenterology or is affiliated with an academic division of pediatric gastroenterology in a university setting.

PA: How many training programs are there in Canada? Is there any demand for these training programs?
KJ: There are six Royal College-accredited gastroenterology fellowship training programs and one nonaccredited training program. While we have no specific figures on the number of Canadian applicants to Canadian pediatric gastroenterology fellowship programs each year, it does appear that the number of Canadian applicants entering Canadian pediatric gastroenterology fellowship programs has decreased. The precise reason for this has not been determined. Factors likely to account for this decline include the lack of secure funding in Canadian programs for Canadian pediatric gastroenterology trainees; the attraction of larger American programs with more secure funding; and a reduction in residents choosing to enter a gastrointestinal (GI) fellowship program because, unlike in the adult world, pediatric gastroenterologists in Canada are mostly restricted to working in academic centres. In Canada, private office practice or working in the periphery is generally nonviable and not financially realistic for subspecialists in our field. Finally, there may be a general disinterest of pediatric residents choosing subspecialty training. Many pediatric residents wish to complete training in three to four years and enter the workforce.

On the other hand, international trainees are highly attracted to Canadian pediatric gastroenterology fellowship programs, making up over 50% of the training pool. Between 1998 and 2006, of the 65 fellows trained in Canadian pediatric gastroenterology fellowship programs, 65% were international trainees.

PA: How does pediatric gastroenterology differ from adult gastroenterology in the general community?
KJ: This is an existential question. How does internal medicine differ from pediatrics? The important distinctions include

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expertise. There are published data (3-5) indicating that pediatric procedures are more optimally performed in a pediatric setting with trained pediatric personnel. Another important consideration is that the adult gastroenterologist who chooses to perform an endoscopic procedure on a child must also feel comfortable managing the child.

**PA:** Would a rotation in pediatric gastroenterology be of benefit in an adult gastroenterology training program?

**KJ:** Yes, this should be mandatory. A rotation through pediatric gastroenterology provides a pediatric perspective and increases awareness of the differences in management of pediatric patients. We also believe that the reverse exchange should apply, in which pediatric gastroenterology fellows rotate through adult gastroenterology programs. This approach increases understanding of the differences in practice, enhances collaboration and improves transition of care.

**PA:** What are the challenges of the future?

**KJ:** The Canadian pediatric gastroenterology community is of the opinion that the current Canadian pediatric gastroenterology workforce is inadequate to meet present demands. With the limited number of Canadian trainees entering fellowship programs, the changing demographics, with an increasing number of females entering the workforce and altered job profiles, along with the aging current pediatric GI cohort, there is concern that the workforce will not meet pediatric population GI health care demands in the next decades.

**REFERENCES**
