

# Where are they now?

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## Introduction

We held interviews for medical officers in orthopaedic surgery at the University of the Witwatersrand (Wits). This process takes place twice a year, during April/May and October/November. What is striking is the number of applicants vying for only a few posts – in this instance, only seven posts. The question is: What happens to the rest of the candidates who are not successful in getting a post on the teaching/training circuit? In other words: 'Where are they now?'

## Cluster hospitals

The University of the Witwatersrand has three teaching hospitals, namely Chris Hani Baragwanath Academic Hospital, Charlotte Maxeke Johannesburg Academic Hospital and Helen Joseph Hospital. There are a number of level 2 hospitals in the cluster, namely Sebokeng, Klerksdorp, Leratong, Thambo Memorial Hospital, Pholosong, Far East Rand, Edenvale and Thelle Mogoerane hospitals. Each of these hospitals offers orthopaedic services and has one or two orthopaedic specialists and a number of medical officers or career orthopaedic medical officers. This scenario is true for the hospitals under the University of Pretoria and that of Sefako Makgatho Health Science University in Gauteng.

In the Johannesburg Metro, Ekurhuleni and Mogale City, there are 171 orthopaedic doctors in public service. This number comprises 51 specialists, 52 registrars and 58 medical officers. The population of this area is 11 679 659.<sup>1</sup> Therefore, the ratio is 1:68 302 (1.4 per 100 000). A 2018 study aimed at determining the orthopaedic surgeon density in South Africa showed 1.63 orthopaedic surgeons per 100 000 population.<sup>1</sup> We do not know what a healthy population ratio of an orthopaedic doctor to the general population is, but we do have figures from other countries like Australia and Canada (4 per 100 000). Within the USA and UK, it is 7.5 per 100 000. In Scandinavia, it is 20 per 100 000.<sup>2</sup>

According to SAVA and the Registrar of the HPCSA, there is an average of 650 active orthopaedic surgeons in SA. Currently, the SA population is 60.6 million.<sup>3</sup> This represents a ratio of 1:10 154 000.

From the statistics, it is clear that we need more doctors. I am aware of an editorial by Prof. R Dunn (2015) where he was concerned that we might be producing too many specialists or rather specialists without a bright future.<sup>4</sup> However, I am looking at the medical officers and what is happening to them. Realising that more doctors are needed, we embarked on a drive/exercise to increase the number of training posts at Wits. We applied for more training post numbers early this year and were successful.

An additional 30 training posts were granted by Wits, ten for each teaching hospital. Sadly, these posts cannot be filled because there is no funded post from the Gauteng Department of Health. Posts have been frozen and we have no idea when the sanction will be lifted for posts to become available.

For now, these posts can only be filled by supernumerary doctors who get their salary from their respective government. After completion of their training, they are expected to return to their home country. This means the ratio of orthopaedic doctors to the population remains unchanged despite the greater number of trainees in our institution.

The process of creating a funded medical officer's post is difficult, tedious, political and centrally driven. Recommendation is made by the hospital after a request from the orthopaedic department. All this depends on budget allocation and treasury, and very little attention is given to statistics such as the impact on service delivery and quality thereof due to the dangerously low doctor:patient ratio.

It is clear that no new posts will be created. The only way in which posts become available is by someone vacating such a post, namely:

1. A consultant leaving either for private practice or retiring thereby making way for a qualified registrar to move into that post.
2. A registrar moving out after completing their contract.
3. A medical officer moving into a registrar training post.

There are on average around seven registrar posts opening as these doctors qualify and vacate their posts. That means an average of seven medical officers can apply to fill these registrar posts, and consequently, seven medical officers' posts open up. There were 49 applications for these seven medical officer posts.

What happened to the rest?

A snap telephone survey was conducted with candidates who were unsuccessful applicants asking them what they are doing now and where they are. Some of the responses were:

1. Applied elsewhere as an orthopaedic medical officer and still waiting
2. Working at a forensic mortuary
3. Career orthopaedic medical officer
4. Gone to private practice as a general practitioner
5. Registrar post elsewhere
6. Not working – still looking for a post

As I read through the CVs of some of the applicants, I realise how much they love orthopaedic surgery and how passionate they are about becoming orthopaedic surgeons, if given a chance, to make a change to the orthopaedic landscape of this country. I shudder

when I see the large pile of CVs with the Z83 application form, knowing very well that only seven will be successful this year. For the rest, I do believe their dreams for a future career in orthopaedics are shattered. I find myself asking the question, 'Where are they now?'

## References

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