



# INTERNSHIVERS\*

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## Column

Guus Brand is a medical student at the Radboud University in Nijmegen and our standard columnist. He writes about peculiarities or striking events he encounters during his study program. This column discusses stress-related complaints amongst medical master's students, followed by a response from *rector magnificus* of Radboud University Han van Krieken, also a professor of pathology.

Last March, I finally received the news that I can start my clinical rotations in November 2022. Every medical student has to perform clinical internships at varying departments in different hospitals for three years in order to achieve their master's degree. However, when I received my starting date, I began to tremble at what lies ahead. Medical interns are expected to work at least 38 hours a week and, as good grades are a must for every medical student, invest additional time studying to keep performing at a high level. Furthermore, travel times can reach up to three hours a day, and many students have to work a part-time job next to their education since the student grants have been abolished. Lastly, because these years are supposed to be the time of one's life, we should meet friends, go clubbing, travel, and generally live our lives to the fullest. Paul Roodenburg, a general practitioner and teacher at the Amsterdam UMC, puts it as follows: "It seems socially unacceptable not to be busy" [1]. As a student currently trying to do all this while struggling to maintain a manageable schedule, I hope you can understand my reservations.

And I am not the only one. A 2015 questionnaire amongst medical interns shows that 17.8 per cent meet the criteria to be diagnosed with a burnout [2]. As this study was carried out in 2015, one can only imagine what it is like at this moment with the COVID-19 pandemic still raging. The lockdown and other measures taken to contain the virus may have a massive impact on the mental health of students, causing them to feel lonely and depressed and lowering their educational performances [3]. Outreach programmes are being set up but do not affect the performance anxiety that already exists around clinical rotations [4].

So what can be done to help students cope with this pressure and anxiety? In my opinion, the first changes should be made in the minds of students. Both recently graduated doctors and senior medical professionals that I spoke with confirm that your resume regarding your university period is not even close to being as important as many medical students think. What is important is that you are responsible, knowledgeable, and, most of all, passionate. And yes, grades and experience in related fields do play a part, but this seems to be marginal according to the people I spoke with. The road to becoming the medical specialist most of us aspire to be is long and hard. However, working yourself to the bone, while trying to study, maintaining a busy social life, and doing extracurricular tasks to jack up your resume, should not be the way to go. Just making it through medical school and having a good and informative time should be the goal, and it should be enough.

Secondly, I think an addition to the curriculum might be beneficial. Verweij *et al.* state that medical residents with high baseline levels of emotional exhaustion benefit from mindfulness-based stress reduction [5]. Not every resident benefits from this programme



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because not every resident experiences high baseline levels of stress. Personally, I believe that these results can be extrapolated to medical internships. The expectations and hours are roughly the same, with the only differences being responsibility and payment. Why not make similar comprehensive and accessible mindfulness programmes an optional part of the curriculum? Not all medical interns have high baseline levels of stress, so they should be optional, but they should be there nonetheless. With these changes, I believe we can make a significant impact on the amount of pressure and anxiety that medical interns experience, and hopefully provide the world with a group of more "mentally stable" doctors in the future.

## References

1. Van Twillert M. De Co staat altijd aan. *Arts in Spe* 2017 May 23. *Translated quote*
2. Conijn M, Boersma HJM, Van Rhenen W. Burn-out bij Nederlandse geneeskundestudenten. *NTVG* **159**, A8255P (2015).
3. Struijs S. *De geestelijke gezondheid van studenten tijdens de COVID-19 pandemie*. Caring Universities. 2020 August 19.
4. Landelijke Werkgroep Studentenwelzijn. *Handreiking studentenwelzijn in corona-tijd*. 2020 July.
5. Verweij, H., van Ravesteijn, H., van Hooff, M.L.M. et al. Mindfulness-Based Stress Reduction for Residents: A Randomized Controlled Trial. *J GEN INTERN MED* **33**, 429–436 (2018).

*\*This column aims to highlight the personal perspective of a student. Therefore, the views and ideas expressed in this column are the own personal views of the columnist and do not necessarily reflect the view of RAMS. If you have any questions or comments regarding this column, contact the editorial board of RAMS.*

## Be true to yourself

With much recognition I read the column of Guus Brand, bringing back memories about myself during clinical internships. I like to work hard but not for long, and I do need my sleep and relaxation. That was the case when I was a student and that is the case now. My first day at my first internship started at 8 am, so I had to be on my bike at 6:45 am. When I arrived at the morning report with a brand new white coat on, I was together with only one fellow intern instead of the normal four; we were welcomed by the head of internal medicine with the warning that we would have a hard time, since interns had to take on all the night shifts, so for us that meant to be on call every other night. Without thinking I replied that I would do no such thing, and a deep silence was in the room: such a remark was unheard of, but the professor said, "I understand, we are making another rotation scheme", and that was it. Later I realised that I could have been sent home, my behaviour was not fitting the culture. But I also felt: if that was the way it works, it would be without me. I have learned over the years that being true to myself and being honest about it almost always works.

As Guus writes, make choices and try to keep your stress level in control. Your period of clinical internships can be among the best times of your life, but it is heavy-duty, with many emotions (you may see the first person die in your hands, tell a child that he or she has cancer, you will make mistakes). This comes with responsibility: no parties, alcohol, or drugs the day before you are in the clinic; talk about your experiences, choose your leisure time carefully. Your real friends understand that your time in the clinic asks a lot from you, they will support you and understand that you cannot be at every party or get-together and that you need to be in bed on time. And yes, mindfulness may work for you; for me it was the bike ride to set my mind at peace. Guus, enjoy your clinical internships: you have the right mindset!

Han van Krieken



*Han van Krieken, Prof, MD-PhD (Rector magnificus)*

## Additional reading sources

Are you intrigued by burnouts amongst medical students after reading this column? Have a look at the following articles selected by RAMS:

- Hansell, M., Ungerleider, R., Brooks, C., Knudson, M., Kirk, J. Ungerleider, J. Temporal Trends in Medical Student Burnout. *Fam Med* **51**, 399-404 (2019).
- Erschens, R., Keifenheim, K., Herrmann-Werner, A., Loda, T. Schwille-Kiuntke, J., Bugaj, T. Professional burnout among medical students: Systematic literature review and meta-analysis. *Med Teach* **41**, 172-183 (2019).

## EXAM QUESTIONS

As RAMS aims to enlighten both students and professionals, we would like to present you two exam questions. Find out if you can remember what you have learned during your bachelor's!

*We challenge you!*

### Question 1

Myasthenia gravis is a disease of the neuromuscular junction, caused by antibodies targeting the post-synaptic receptors. These receptors are needed for the transportation of electric nerve signals from the nerve to the muscle. Which type of medication will decrease the symptoms in patients with myasthenia gravis?

- Acetylcholinesterase inhibitor
- Acetylcholin receptor antagonist
- Glutamate dehydrogenase inhibitor
- Glutamate receptor antagonist

*(Topic from Q6 MGZ Immune system, 2020)*

### Question 2

A couple has been trying to conceive for 17 months without success. The 30-year old woman has a regular cycle of 30 days. During ultrasound examination, the total antral follicle count is 12. There are no signs of uterine tube dysfunction. Her partner's semen has a total of 0.5 million moving sperm cells per ejaculation (VCM count). Which treatment is indicated?

- Wait and see
- Start with artificial insemination
- Start with ovulation-induction
- Refer the partner to the urologist

*(Topic from Q8 MGZ Reproduction, 2019)*

The answers to these questions can be found on page 29 in this journal.