# A Career in Respiratory Medicine



### What do respiratory physicians do?

The work of respiratory physicians is varied and interesting. Respiratory physicians care for a multitude of clinical presentations, ranging from the acutely unwell patient with severe infection or respiratory failure, to managing chronic diseases, through to understanding the pathophysiology of someone with unexplained breathlessness. Respiratory physicians are motivated individuals who put the patient at the heart of all they do, whilst often pursuing additional interests including research, education and leadership. Our work is diverse, looking after patients spanning all age groups, from transitioning adolescents to older individuals, across a variety of acute and chronic diseases.

With around one third of all acute medical admissions being due to respiratory problems, a career in respiratory medicine can put you at the centre of the management of some of the sickest patients in the hospital. Managing a patient as they come through the doors of the emergency department with severe pneumonia, type 2 respiratory failure requiring immediate treatment with non-invasive ventilation, through to thrombolysing someone with a highrisk pulmonary embolism can be both challenging and rewarding. Respiratory physicians have strong working relationships with the Intensive Care Unit and are often asked to provide opinions on patients, with opportunities for joint training available.

As well as acute care, management of chronic disease is integral to respiratory practice, across a wide spectrum of presentations, ages and stages. To name but a few, asthma, bronchiectasis, COPD,

cystic fibrosis, interstitial lung diseases, lung cancers, pneumonia, pulmonary vascular and pleural diseases. With such diverse interests, and patient groups, a respiratory career will take you across inpatient care, clinics, procedural lists and increasingly community care.

Practical procedures form another key part of respiratory care, including pleural ultrasound (USS), bronchoscopy and thoracoscopy. These procedures are increasingly interventional, including stenting, endobronchial (and other) ultrasound, thermoplasty and insertion of indwelling pleural catheters.

A career in respiratory can take you in a variety of directions, across generalist, specialist and interventionalist options. You can become a general respiratory physician with an interest in acute care, a sub-specialist in anything from lung transplant to lung infection, occupational or vascular lung disease or develop your procedural skills with interests in interventional bronchoscopy or pleural procedures. The opportunities are as diverse as the patients we see, as are the geographical places a career in respiratory medicine can take you, across small and large hospitals, urban or rural settings and increasingly the community.



#### Why choose Respiratory Medicine?

Because the specialty is so interesting, wide and varied, it provides excellent opportunities for individualised career development! Whether your interests lie in community delivered medicine, the care of acutely unwell patients, practical procedures, education of patients and relatives or chronic disease management, respiratory medicine has a great deal to offer YOLL

Multi-professional teamwork is at the heart respiratory medicine. Respiratory multi-professional teams can include doctors, nurses, physiotherapists, physiologists, dieticians, pharmacists and increasingly psycho-social teams. The work that we do naturally integrates with radiologists, oncologists, thoracic surgeons, palliative care, histopathologists, physiotherapists and of course, general practitioners and practice nurses. This team ethos builds a strong network of colleagues, provides great opportunities for developing local services and encourages lifelong learning.

Respiratory training reflects the diversity of career options available within respiratory care. Trainees have the opportunity to work within generalist and specialist settings, large and small, with all trainees undertaking some intensive care training. Acute care is balanced with chronic disease management, and work within highly specialised, or regional specialist services, including lung transplant, home ventilation, sleep and adult cystic fibrosis units.

This diversity in training allows you to choose a career path in whatever area of respiratory care works for you.

Alongside clinical care, Respiratory physicians have a strong history of other interests making their careers varied and interesting. These include

education, research, leadership and management. Respiratory physicians are involved in research at all phases, from bench to bedside. Respiratory physicians are frequently enthusiastic educators. Respiratory trainees are encouraged to take time out of clinical training to gain experience in research, medical education, leadership and management, including a chance to pursue additional academic or postgraduate qualifications.

There are established models of working less than full time (LTFT) both as a trainee and as a consultant in respiratory medicine. The British Thoracic Society is committed to developing models of good practice for LTFT and flexible consultant working.

#### Job prospects

Lung disease is common and likely to increase in the future. With therapeutic advances in fields such as CF, prognoses are improving, creating a growing population of people living longer with respiratory disease. Other services including lung cancer are expanding to include screening and greater focus on earlier diagnosis. With so many acute admissions related to respiratory disease and awareness that outcomes improve if respiratory patients are managed by respiratory teams, there has been an expansion in consultant numbers to support 7 day services. As shown during the pandemic, the need for respiratory support units to manage cases of acute respiratory failure and provide non-invasive ventilation is rising. A renewed focus on working across primary/secondary care, with teams spanning hospital and community, is further creating new respiratory integrated care teams. Combined, this creates a need for continued expansion of the respiratory workforce, both now and in the future, creating great job prospects for those just starting on their respiratory journey.

# How do I become a Respiratory Physician?

After foundation training, you will need to enter the Internal Medicine Training (IMT) programme. This will provide broad training in general medicine at IMT1-3 level. It is not necessary to have experience in specialist respiratory medicine during IMT. However, during IMT you will develop acute respiratory and practical skills including pleural USS. This may help crystallise your decision to pursue a career in respiratory medicine.

To enter Higher Specialist Training (HST) in Respiratory Medicine at ST4, you will need MRCP and to obtain a training number through the national application scheme. There are currently around 750 respiratory trainees - among the largest number in any of the acute medical specialties. Specialty training positions last for four years and provide training across respiratory specialities and general internal medicine (GIM). All HST trainees are required to pass the Specialty Certificate Examination (SCE) in Respiratory Medicine, usually done at around ST6.

Training can be completed full time, or less than full time, with growing awareness of the need for flexibility in medical careers. BTS is supportive of trainees wishing to train, and practice flexibly at all stages.

Regional teaching is provided, both in GIM and respiratory, with an increasing role for practical courses and simulation. BTS runs an active respiratory short course programme, including an introduction to respiratory medicine course.

Out Of Programme (OOP) experience is encouraged. This can comprise a period of research with the aim of obtaining an MD or PhD, or completion of sub-specialist clinical, management or leadership experience.

If you are considering a career in respiratory medicine, it is always good to get advice as early as



possible. We are a friendly bunch of people and always happy to speak to enthusiastic new recruits. Speak to the local respiratory trainees, your hospital's respiratory consultants or training programme director.

**BTS** 

#### **Useful links**

More details about the training curriculum can be found here:

www.gmcuk.org/education/respiratory me
dicine.asp

The Royal College of Physicians www.rcplondon.ac.uk
The Royal College of Physicians of Edinburgh
https://www.rcpe.ac.uk/

Our national professional body, the British Thoracic Society (BTS), is probably the most active in the country. We have a reputation for being a friendly and progressive specialty with strong emphasis on involving doctors at all stages of their career.

## Membership fees:

If you are a medical student, CMT/IMT, F1 or F2 doctor you can join the BTS for as little as £40 per year (payment by Direct Debit).

Specialty Trainees can join as a member for £150 per year (payment by Direct Debit) for the whole of the time in training, pre CCT, and receive our internationally respected journal Thorax, every month. As a BTS member, you would be entitled to substantial discounts on a wide range of BTS activities including the short courses, and the Summer and Winter Meetings. You would also have free access to the BTS elearning modules.

Find out more here: <u>www.brit-thoracic.org.uk</u>