

## **Urology is a relatively small subspecialty. What should urology do over the next five years to retain or expand its influence in organized medicine?**

### **Next Steps in Enhancing the Field of Urology**

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Urology is a small surgical subspecialty with approximately 1.3% of licensed physicians serving as urologists in the United States.<sup>1,2</sup> While only representing a fraction of the overall physician workforce it is important that urologists continually work to maintain and increase their influence on organized medicine. Looking over the next five years, urologists can begin to accomplish these goals through targeted efforts in research, health policy, and education.

The majority of urology research has been published in specialty-specific journals that are often unknown to or inaccessible to many audiences. Therefore, it's somewhat unsurprising that urology articles published outside of urology-specific journals receive higher newsworthiness scores and are cited more often.<sup>3,4</sup> To increase visibility and impact of urology research in healthcare overall, a greater proportion of studies should be conducted and aimed for dissemination in non-specialty journals, conferences, and other news media. Additionally, this research should be multidisciplinary and better integrated with general surgical and medical "hot topics". For example, there is immense opportunity to carve out publication real-estate and research funding at the crossroads of urology and topics such as multiple chronic conditions, opiate abuse, patient-centered outcomes, and healthcare cost, utilization and variation. However, to accomplish this goal we need to increase the number of urologist researchers. Currently, there are only a handful of urology fellowships and master degree training programs that can provide urologists with the skills necessary to become researchers and change-agents in healthcare. In parallel, better advocacy is needed for funding urology research. In 2017, only 4.4% of the National Institute of Health's \$32.3 billion research budget went to studying all urologic conditions, a miniscule number compared to the number of Americans inflicted by these diseases.<sup>5</sup>

Urology also needs to carve out a role in national, state and community health policy. At the national level the American Urological Association is the leading organization advocating on behalf the specialty of urology. However, urologists must take on a more proactive role in serving on national advisory councils and technical expert panels during the development of health policy, rather than providing comment on draft initiatives after they are put out for public comment. Often, these panels are comprised of generalists who don't have an adequate understanding of the practice of urology to anticipate the implications of even generic policies on our field and our patients. On a smaller scale, urologists need to own and advocate for the communities they care for through primary prevention, education and survivorship campaigns. An excellent example of this is the Michigan Institute of Urology Men's Health Foundation that not only promotes health advocacy and awareness around urologic cancer but also for general men's health issues, including hypertension, hyperlipidemia and mental health.<sup>6</sup> Each year this organization holds the Men's Health Event on Ford Field in Detroit, MI and provides free health screenings and education to the public. Efforts like this establish a resource in the community

and allow patients and families to not only see urologists as specialists but also as practitioners who are concerned with both individual and population health.

Urology can further increase its standing in organized medicine through educational initiatives aimed at increasing exposure to urology for medical students, residents and physicians. Last year, 18,935 (98.3%) medical school graduates entered a field other than urology in the U.S.<sup>7</sup> Of these students, few received adequate exposure to the discipline to understand how urology fits into healthcare practice and interacts with other specialties. To address this lack of exposure, all students should spend some time on a clinical urology rotation during medical school. At the very least, urologists should be leading pelvic and genitourinary dissections in anatomy labs and delivering lectures during renal courses. Similarly, urologists should be providing graduate medical education and continuing education courses to non-urology residents and physicians, respectively. The goal of this being to improve patient care, solidify the role of the urologist and create more opportunities for collaboration across provider types.

Urology is a small, but critically important surgical subspecialty. There is immense potential for urologists to further their role in healthcare through strategic research, health policy, and educational initiatives. Keeping the urologist in the operating room may be best for the bottom line, but in the years to come much more will be expected of urologists in order to maintain and expand urology's influence in organized medicine.

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