

Brain Drain or Brain Gain - Retention rate of South African trained general surgeons in a university hospital training programme

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We reviewed the surgical training in Pietermaritzburg over a six year period (2008-2013) and identified, 21 registrars who had completed the General Surgery Residency Programme (GSRP) and qualified as specialist general surgeons in that time period. All 21 general surgeons remained practising in South Africa immediately following completion of the GSRP. Fifty-seven percent (12/21) pursued a subspecialty training programme. Ninety-five per cent (20/21) stated they had no intention of practising overseas. Only 1 considered practising overseas. Of the 12 who underwent subspecialty training programmes, none had any intention of practising overseas following completion of the subspecialty training programme.

South Africa has a population of 43 million and is a developing country with a large burden of preventable diseases. General surgery in South Africa is in a state of crisis and the critical shortages in the surgical workforce are unlikely to improve in the immediate future. The most frequently cited reason for this ongoing shortage is the high rate of emigration of South African surgeons to developed world countries such as UK, Australia and Canada.

A recent study by Liu et al. at the University of Cape Town (UCT) noted that only a minority of those who completed the surgical training programme actually left the country.¹⁰ Virtually all the newly qualified general surgeons remained in South Africa. The majority pursued subspecialty training within the country, many opted for private practice and few indicated a desire to emigrate immediately following the completion of training. What is evident from both our review and Liu's study is that the great majority of newly trained South African surgeons appear to have no immediate intention

to leave the country. However, it would appear that state practice is incapable of retaining these new surgeons and most move to subspecialise or move into private practice.

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