The Journal of Medical Research

Letter to Editor

JMR 2023; 9(2): 14-15 March- April ISSN: 2395-7565

© 2023, All rights reserved www.medicinearticle.com Received: 06-04-2023 Accepted: 18-04-2023 DOI: 10.31254/jmr.2023.9201

Alien Physicians in Underserved Areas: The Foreign Medical Graduate behind the Scenes

Pradnya Brijmohan Bhattad¹

¹ Brijmohan Bhattad Hospital, Nanded, Maharashtra, India

Dear Editor

Recent literature suggests that there exists a shortage of physicians and cardiologists in the United States (US), especially in underserved rural areas ^[1,2]. International medical graduates (IMGs) overcome several challenges with their perseverance, indefatigable hard work, and compassionate spirit contributing to scientific and clinical cardiology in the US. IMGs face several obstacles ranging from racism and bias to onerous immigration laws that make this challenging. The fact that the visa sponsoring authorities label these foreign physicians as "alien physicians" in and of itself points towards the attitude of the current overall system in the US.

Quite often, immigration laws do not allow these IMGs to practice medicine with the same flexibility as their local counterparts. For example, they cannot establish independent practice of self-employed medicine. Primary care and subspecialty outpatient care has a potential for great improvements, especially in terms of accessibility and affordability for the general patient population. Limited ability to establish physician owned independent practice leads to flourishing of corporate medicine. This limits a physician's ability to provide affordable care which could otherwise be readily accessible to a vast number of patients. And with the corporatization of medicine into a "revenue" generating business, several healthcare organizations have the ability and they tend to take inappropriate advantage of these aliens. Often, these physicians are mistreated with significant abuse by their corporate employers.

We continue to hear stories of mistreatment of IMGs, but unfortunately there is a lack of formal statistics in this area. The current status of visa requirements for these physicians reinforces corporate entities to continue to take advantage of these highly educated and excellent physicians.

IMGs also often have difficulties visiting their home countries due to visa system logistics, which have been made ironically worse by the COVID-19 pandemic. The process of obtaining a visa for graduate medical training and post-training employment is cumbersome for physicians with significant delays in obtaining timely visa appointments. The waiting times for visa appointments can be over a yearlong or more, making a family visit close to impossible for these physicians, and this is unacceptable. Often IMGs have not been able to visit their families for several years due to these seemingly futile reasons which are saddening given the hard work they put in for humanity. This background of silent and sugar-coated mistreatment of alien physicians is not well studied, and what we know is just a tip of an iceberg with lots more depth to it.

IMGs be treated respectfully and humanely, and recognized for their contributions to patient care. Further research and analysis on the treatment of IMGs and the barriers that must be overcome is needed. The development of real solutions that could be implemented to protect IMGs is imperative, as these physicians work diligently to save others' lives without much thought of their own loved ones.

IMGs play an important role in addressing the very real physician workforce shortage in the U.S., but systemic changes are needed at the federal level, as well as hospital and health system levels, to appropriately recognize these individuals for their contributions. The fact that the healthcare system, in general, is quite broken in the US when compared to some of the most developed nations, there exists a need for excellent physicians, and this void is filled to some extent by foreign physicians in the US. But the perpetual silent harassment of these guileless physicians must be addressed at least for keeping some

*Corresponding author: Dr. Pradnya Brijmohan Bhattad

Brijmohan Bhattad Hospital, Nanded, Maharashtra, India

Email:

pradnyabhattad20@gmail.com

humaneness alive.

The perpetual sluggishness in a healthcare system puts its own people at a huge disadvantage. It is high time that physicians be in-charge of their own working conditions without discrimination at any level and be fearless to continue treating the needlest in the best way.

Remember why you chose medicine, for service to humanity, and do yourself a favor and make that first human yourself, dear aliens.

Disclosures

The authors report no external funding source for this study. The authors declare no conflict of interest. This study has not been published anywhere or presented as poster anywhere till date of submission. No grants/funding available for this study.

REFERENCES

- Narang A, Sinha SS, Rajagopalan B, Ijioma NN, Jayaram N, Kithcart AP, Tanguturi VK, Cullen MW. The Supply and Demand of the Cardiovascular Workforce: Striking the Right Balance. J Am Coll Cardiol. 2016 Oct 11;68(15):1680-1689. doi: 10.1016/j.jacc.2016.06.070. PMID: 27712782; PMCID: PMC5351767.
- Rosenblatt RA, Hart LG. Physicians and rural America. West J Med. 2000 Nov;173(5):348-51. doi: 10.1136/ewjm.173.5.348. PMID: 11069878; PMCID: PMC1071163.