

What type of doctor are you...

Personality and lifestyle differences between elderly care physicians* and emergency physicians



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*The elderly care physician specializes in long-term care for frail elderly people and chronic patients with complex health problems. The elderly care physician endeavors to maintain and improve the quality of life of elderly people and chronic patients. His or her fields of activity are nursing or residential homes, primary health care and/or hospitals. The Netherlands is unique in having this specialization.

Introduction

Doctors are already considered a special breed. But do doctors in different specializations differ on important personality traits? There is evidence that there is. Previous studies also have demonstrated correlations between personality traits and job performance, risk of burn out and job satisfaction. So choosing a speciality that fits your personality seems to have several advantages. This study aims to identify personality traits and lifestyle differences between the elderly care physician and emergency physician.

Methods

Via an electronic link to an anonymous survey physicians could fill in a survey online via limesurvey.com which also included the NEO-FFI, with 60 questions measuring personality using the BIG 5 personality traits (see picture below). The BIG 5 is currently considered the most reliable and valid psychological personality test.



The BIG 5 personality traits

Openness to experience (inventive/curious vs. consistent/cautious)

Conscientiousness (efficient/organized vs. easy-going/careless)

Extraversion (outgoing/energetic vs. solitary/reserved)

Agreeableness (friendly/compassionate vs. challenging/detached)

Neuroticism (sensitive/nervous vs. secure/confident)

Results

Demography	Elderly care physician (n=235)	Emergency physician (N=107)	P-value
Participants; n (% of all doctors of this specialty)	235 (12.3)	107 (17.9)	
Specialists; n (% of all registered specialist)	127 (8,1)	78 (16,8)	
Residents; n (% of participants)	108 (46)	29 (27)	
Age; average (SD)	40,2 (10,9)	35,2 (5,9)	0,00*
Woman; n (%)	180 (77)	82 (77)	0,99
Participants with children; n (%)	140 (60)	47 (44%)	0,01*
Working hours in contract (SD)	32,6 (5,2)	36,3 (5,4)	0,00*
Single; n(%)	25 (10,8)	18 (16,9)	0,07
Not married with partner; n(%)	74 (31,5)	41 (38,3)	
Married; n(%)	126 (53,6)	40 (37,4)	
Partnership; n(%)	7 (3,9)	6 (5,6)	
Divorced; n(%)	3 (1,3)	2 (1,9)	
Participant with working experience in another specialty; n(%)	145 (61,7)	63 (58,9)	0,62

⇒ In January 2016, there were 1568 elderly care physicians and 345 residents. The total number of ER residents and registered specialists SEH is 135 and 462.

*P-value <0.05 is significant

Personality according to the NEO-FFI	Norm	Elderly care physician	Emergency physician	P-value
Neuroticism (SD)	31.1 (8.2)	29.9 (7.5)	28.6 (8.0)	0.13
Extraversion (SD)	40.1 (6.6)	41.8 (6.3)	44.3 (6.6)	0.01*
Openness (SD)	35.9 (6.4)	39.8 (5.5)	38.9 (6.0)	0.18
Agreeableness (SD)	44.1 (5,2)	48.0 (4.8)	46.6 (5.2)	0.02*
Conscientiousness (SD)	45.3 (5.6)	46.7 (4.4)	46.9 (5.1)	0.83

Lifestyle	Elderly care physician	Emergency physician	P-value
On scale 0-10 how happy is the participant (SD)	7.9 (0.9)	7.8 (1.0)	0.07
>1 hour per week exercising; n(%)	152 (65.8)	74 (69.8)	0.25
> 30 minutes per day light exercise minimum 5 days per week; n(%)	136 (58.9)	60 (56.6)	0.00*
Nicotine use; n(%)	10 (4.3)	6 (5.7)	0.35
Alcohol use; n(%)	195 (84.4)	94 (88.7)	0.25
Of the participant who drink alcohol have possible problematic use; n(%)	96 (41.6)	36 (34.0)	0.26
Use of drugs or non-prescribed medicines in the past year; n(%)	12 (5.2)	12 (11.3)	0.04*
Burn out in last 5 years; n (%)	37 (16.0)	14 (13.2)	0.17
Published in own field of expertise; n(%)	56 (24.2)	40 (37.7)	0.03*
Participant who would continue their work if they won the lottery; n(%)	161 (69.7)	81 (76.4)	0.11

Conclusions

Findings support that emergency and elderly care physicians differ regarding personality and lifestyle. With regard to personality traits, the emergency physician scores significantly higher on extraversion, the elderly care physician on agreeableness. In comparison with the entire Dutch population, both groups score significantly differently (doctors might be a different breed!). The emergency physician uses drugs or medication not prescribed by a doctor more often compared to the elderly care physician. There appears to be no difference in the research between happiness or number of people who get burned out.

We believe that personality, like many other factors, should be included in the search for the right specialization. One way to discover this is by taking a personality test, preferably already during study time, which can also be an important tool for reflection and self-insight.