

The cutting edge

Medical school student lands coveted cosmetic surgery residency

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NORTH CHICAGO -- Jake Bloom, a bright and determined medical student, could have gone into just about any area of medicine, but he chose plastic surgery, a specialty that has boomed in a culture that rewards youth and beauty as evidenced on TV shows like "Nip/Tuck" and "Dr. 90210."

Those shows had nothing to do with Bloom's pick. He has been too busy studying to watch TV, he said. He argues that glorifying cosmetic surgery casts a shadow over the specialty's role in healing.



Jacob Bloom

"A lot of procedures developed by plastic surgeons are adopted by other surgeons as they try to minimize scarring," said Bloom, 26, who also noted that current research in the field includes using fat stem cells to create insulin-producing cells for diabetics.

A native of Northbrook, Bloom is one of a growing number of top American medical students clamoring to enter highly competitive specialties that focus on procedures that restore rather than treatment of the chronically ill. He graduates in June from Chicago Medical School at Rosalind Franklin University of Medicine and Science in North Chicago, and by July he will be one of just 92 first-year MDs to train in 49

residency programs for plastic surgery. Another CMS student landed a spot in the even more competitive field of dermatology that offered just 30 residency slots.

Other specialties have trouble attracting enough residents. Just 55 percent of the 4,858 spots in first-year internal medicine residencies were filled by U.S. doctors during national Match Day last week. U.S. students matched only 44 percent of family medicine residencies, with 2,636 slots offered -- with 10 percent of those unfilled.

Motivating factors in Bloom's decision for plastic surgery included the mentorship he received from surgeons, the challenge of "doing very intricate procedures with very little room for error" and personal fulfillment. He may specialize in craniofacial surgery during his five-year residency at the top-notch University of Rochester/Strong Memorial Hospital in upstate New York.



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"I worked out in L.A. with a surgeon who does ear reconstruction on kids, like the boy who for the first time had a smile that was ear-to-ear," Bloom said. "The family cried tears of joy. It's very rare you can have that type of impact in medicine, where medicine is a very positive experience."

The 2008 National Residency Matching Program results show that in addition to plastic surgery and dermatology -- orthopedic surgery, otolaryngology, diagnostic radiology, radiation oncology and general surgery continue to be popular and competitive specialties. It is no coincidence that those are also among the highest paid.

Dr. Art Ross, Chicago Medical School dean, cited debt load and lifestyle as factors in the shift in the number of matches for certain specialties.

"The average debt for students across the country is about \$150,000, and there are many who will finish more than \$250,000 in debt," Ross said. "There's good evidence that the current generation of physicians may practice a lifetime and come to retirement and still have debt. I can't imagine any person facing that who would not allow compensation to at least enter into an equation."

When a student struggles over whether to follow "their brain or their heart in terms of providing for their families or serving humanity," Ross said he counsels "follow the heart."

"Specialties that are better compensated today in 10 years may not be better compensated," Ross said. "If they give up what their heart wants and do something their head says is more rational, they may end up with regrets."

Modern medical students are also willing to sacrifice income for lifestyle.

"Baby boomers were driven to succeed, to achieve at any cost and money was the measure of their success," Ross said. "When my generation went into medicine, it was a sign of weakness to say 'I want to be with my wife, I want to be with my kids.' Nowadays we celebrate people who are able to lead balanced lives and still be productive professionals."

Bloom said compensation was not a consideration.

"There's not a lot of starving doctors in any field," he said. "Lifestyle? I'm looking to providing service over lifestyle. I think I'll get a better feeling doing a procedure beneficial to someone than playing a round of golf."

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