

## The Paeds Poll

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Dear Editor,

I chose to train in Paediatrics for three main reasons, working with children in healthcare; the profile of personnel that paediatrics attracts and learning opportunities within the specialty.

Arguably the most important reason is working with children. Pathologies are interesting, with great variety from neonates to infancy, childhood to adolescence. It is difficult not to enjoy being on a paediatric ward with the volume of energy the children bring, even when unwell. Over the last four years I have worked with some wonderful teams. Junior doctors and Consultants alike are approachable and supportive by nature. I have never felt alone when faced with a problem while caring for a sick child. I have met some excellent role models and made some great friends. Working in a supported environment fosters an encouraged sense of learning, for research and fellowship at home and abroad. It is an exciting time to work in Paediatrics, with the new hospital opening as we progress through our training.

Against this backdrop of good job satisfaction, one third of NCHDs in Ireland have experienced burnout, 50% reporting emotional exhaustion and feelings of being overwhelmed by work.<sup>1</sup> The COVID-19 pandemic has magnified this issue.<sup>2</sup> In May 2021 the cyber attack on HSE IT systems further compounded existing stressors as Irish healthcare professionals faced an additional challenge. I invited Paediatric trainees to complete a survey (n=126) in May 2021. During a time of difficulty in retention of trainees, my aim was to remind trainees of some of the “best bits” of Paediatrics.

Most trainees preferred ward rounds, over consults and clinics. Close to 50% chose counselling parents in childhood constipation, 37% favoured discussing feeding issues, and the remainder chose a variety of respiratory illnesses and sleep disorders, among others. Eighty-eight (70%) of participants would tackle a consultation on neonatal vitamin K refusal above counselling parents with anti-vaccination views. While 77% prefer neonates to adolescents, half of doctors enjoy baby checks and half dislike carrying out the task.

Two-thirds NCHDs chose “Kulana Apple” juice above “Kulana Orange” with a small number opting for “Ribena Blackcurrant”, as favourite beverage. One contributor responded that she heats apple juice to mimic mulled cider during call shifts over the Christmas period. When speaking to parents, only 16% remember their first names, the vast majority referring to guardians as “Mam/Dad”. During assessment of toddlers’ ENT system, “fairies” (46%) were visualised more often than “spuds” (34%) on otoscopy. An assortment of “broccoli”, “bunnies” and “bears” were found in the other 20%. Fifty-four (43%) of trainees use balloon animals created from gloves to distract children during assessment.

When using topical analgesia prior to cannula insertion, 58% trainees’ favour “Ametop” over “Cyrogesic Cold Spray”. “Jelco” cannulas were deemed more popular than “Braun”. The part one written exam was listed as the favourite membership exam. Questioned regarding on call habits, 60% prefer night shifts to 24 hours. The group divided 50:50 in terms of heading straight to bed post-call or socialising over brunch. Some of the best pieces of advice trainees have been given included, “How to swaddle”, “Always listen to parents and nurses”, “Learn the Paw Patrol characters” and “Remember to smile”.

Physician health and wellbeing is an important focus for many faculties across training bodies in Ireland. In a high-pressure environment, it is important to take a break now and then and take stock of the simple commonalities over which we can share a debate or just a laugh.

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**References:**

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