Mentorship in the Modern Era

By Corey Cavanaugh

Many influences propelled me along the course that ultimately allowed me to train with some of the best minds in nephrology as an osteopathic medical graduate and current clinical nephrology fellow at Yale.

As many nephrologists will surely attest, it was the tutelage of talented mentors that led me to my career in nephrology: Surveys have explored the reasons behind why fellows are choosing not to pursue nephrology, and lack of mentorship is a particularly troubling reason. In one study, 33% of those polled attributed lack of quality teachers as the reason for choosing a non-nephrology specialty (1). As one of my favorite nephrologists and mentors once stated, with disappointment, “Sometimes there are simply not enough hours in the day to discuss a complex case with trainees.” It seems that both trainees and nephrologists “get” that lack of quality mentorship is difficult for both parties to endure.

There is a potential solution to such a problem, albeit unconventional. As traditional classrooms become flipped and cadavers are traded out for ultrasound-based anatomy lessons, the mentor-mentee relationship must also be updated. Millennials spend significant portions of their lives on the web. From online dating to online universities, life is the web for some. The current cohort entering nephrology is more likely than ever to utilize the web for their medical education. The so-called FOAMed movement (Free Open Access Medical Education) is upon us. With the strong following of “Dr. Smith’s ECG blog” among cardiologists, and EM-Crit.org for emergency medicine specialists and intensivists, the landscape of medical education is changing rapidly (2,3).

In nephrology, among the greatest sources of free information are the ASN discussion forums, in which award-winning educators actively respond to clinical queries from around the globe; even the most brilliant clinicians post case discussions when they’re stumped. Trainees like me have the ability to pull back the curtain and analyze these discussions that would otherwise occur without any house staff involvement. Ideas are exchanged, studies are rediscovered, and guidelines are debated, all through the convenience of an email inbox.

NephJC is a Twitter-based online nephrology journal club that hosts bi-weekly chats and aims to stimulate powerful discussions among educators and trainees alike. Co-founded by Joel Topf, MD, and Swapnil Hiremath, MD, it consists of a team of nephrologists from five different countries who carefully choose contemporary nephrology articles for discussion.

As Topf et al. point out in their article “From Order to Twitter,” over 2500 separate Twitter handles (profiles) have participated in the journal club over a two-year period (4). This takes a considerable amount of effort on the part of the organizers. Each article is chosen by a panel of 15 nephrologists, after which a summary of the chosen article is created. The article’s authors are invited to join, and the online chat occurs on two separate evenings so as to accommodate European time zones (4). One NephJC chat covered a thought-provoking study by Tine and colleagues that suggested increased salt consumption decreases fluid intake. The article evaluated the sodium balance of cosmonauts in hermetically sealed rooms for months on end, simulating a trip to Mars. The discussion caused even the brightest minds in nephrology to grapple with the researchers’ findings and struggle to reconcile the new data with our foundational understanding of salt and water homeostasis.

Twitter also offers open access to countless nephrologists around the world. On the @askanrenal page, a nephrology-related query can be asked at any time of day. A tweet to @askanrenal is usually met with a response in seconds. Other online resources such as the Renal Fellow Network blog allow trainees to create and publish their own searchable papers and introduce them to medical writing. Surprisingly, in a survey by Rope et al., as many as 34% of renal fellows used the Renal Fellow Network as an education tool (5, 6). Resources such as @AJKDOnline, The Washington University Pathology Series, Arkana Pathology challenges, GlomCon, and others are all stimulating new educational tools that allow the exchange of ideas within the nephrology community and deliver information in a palatable manner to prospective trainees.

My hope is that these and other tools capture the hearts and minds of prospective trainees around the globe and expose them to the sheer excitement and curiosity of nephrology—qualities that I admired the most in my mentors. However, these websites mean nothing without the discussion and interaction they hope to create. We need you in these discussions. So, create a Twitter handle and follow us. You may find yourself being a mentor to a learner like me. No, this isn’t how your father envisioned we would be teaching and learning nephrology, but mentorship via social media could prove to be an exciting new frontier with a vast untapped potential with regard to revitalizing the future nephrology workforce.

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References

Figure 1. A typical discussion on @askanrenal among nephrologists

Have a tip or idea you’d like to share with your fellow peers and the broader kidney community? Send your idea to the Kidney News Fellows Corner column at kidneynews@asn-online.org