

Rheumatology is an exciting and rapidly evolving medical specialty that treats a broad range of conditions. It gives practitioners an opportunity to pursue a rewarding and individual career path. Rheumatology is becoming a popular specialty among physician trainees applying for higher specialty training.

Management of patients with chronic rheumatological diseases is often shared with practitioners in primary care and organ based specialists, although patients can be under the care of other specialties. Rheumatologists have close working relationships with radiologists and participate in multidisciplinary meetings to discuss diagnostic and therapeutic challenges, which is a great learning opportunity for trainees and consultants alike.

The past few decades have seen remarkable advancements in the treatment of rheumatological conditions and improved patient outcomes as a consequence. Most patients with rheumatic conditions should expect to have a good (including functional) outcome from treatment.

The rheumatology outpatient clinic involves a mixture of new and follow-up patients. Most new patients are referred from primary care, with some from other specialties within the hospital. Rheumatologists often take part in combined specialist clinics to develop a consensus on the management of “complex” patients. Emergency referrals are often seen.

Consultant life

The majority of rheumatologists practise in the single specialty. Some choose to combine rheumatology with general (internal) medicine and participate in the acute on call rota, as well as having either ownership for a general medical ward or doing clinical sessions on a medical assessment unit. Following the recent Shape of Training recommendations, it is likely that more rheumatologists will practise general (internal) medicine, including participation in the acute rota.

Academia/research

There are many opportunities to become involved in research. Many rheumatologist trainees undertake two to three years of formal research which then leads to an MD or PhD. Trainees should discuss opportunities with clinical academics as early as possible.

Practical procedures and imaging

Practical procedures such as joint aspiration

A career in rheumatology

Qasim Akram and Michael Hughes offer advice for trainees considering a career in this expanding specialty



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and injection are very rewarding, often with rapid benefits for the patient.

The last few years have seen the development of a subspecialty interest in musculoskeletal imaging in rheumatology. This can be performed in the outpatient department allowing management decisions to be made immediately in consultation with the patient after the scan. It is likely that musculoskeletal ultrasound will become a component of the Joint Royal College of Physicians Training Board (JRCPTB) rheumatology curriculum.

Specialist fellowship options

There are plenty of opportunities to pursue

USEFUL WEBSITES

Arthritis Research (UK): www.arthritis.org

American College of Rheumatology (ACR): www.rheumatology.org

British Society of Rheumatology (BSR): www.rheumatology.org.uk

European League against Rheumatism (EULAR): www.eular.org

Joint Royal College of Physicians Training Board: www.st3recruitment.org.uk/specialties/rheumatology

a specialist fellowship in an area of personal interest in a centre of excellence, nationally or internationally. This may either be clinical or research oriented and is usually taken towards the end of specialist training and must be agreed prospectively with the postgraduate deanery and the JRCPTB—so it makes sense to plan early.

Entry requirements

Entry to specialist training requires completion of foundation training, and then core medical training or acute core care stem (medicine), with successful completion of full membership of the Royal College of Physicians.

There is usually strong competition for places so a comprehensive CV—that demonstrates commitment to the specialty through audit and research, including publications or postgraduate degrees, taster sessions in rheumatology, and attendance at relevant courses or conferences—is required.

Training in rheumatology takes four years for single accreditation, or five years for dual accreditation with general (internal) medicine. Completion of the specialty certificate examination MRCP Rheumatology is required before the award of the certificate of specialist training, when one can apply for a consultant rheumatologist post.

Tips for a succeeding at rheumatology interview

Trainees who are interested in a career in rheumatology but have not completed a rotation in the specialty should approach their local rheumatology team. Take along ideas for audits or quality improvement projects, but be open to their suggestions. Any publication with a rheumatology focus is excellent but not essential, as is participation in an audit or quality improvement.

At specialty training year 3 interviews assessors are increasingly looking for well rounded candidates with a good clinical knowledge and experience in general medicine. Prospective trainees will often have significant clinical or academic rheumatology experience at interviews. Check the British Society of Rheumatology website and try to attend either a “core course” and/or the society’s annual conference—aiming for some form of presentation.

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