



HEALTH CARE / PUBLIC HEALTH

Medical and Nursing Students Don't Want to Treat Patients?

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The results of a [global survey](#) released late last year (2023) unveiled some startling findings among medical and nursing students. The “Clinician of the Future: 2023 Education Edition” surveyed 2,212 students, of which 446 were in the United States, from 91 countries.¹

The first statement posed to students: “I am considering quitting my medicine / nursing studies.” Of those students in the U.S., 25% of medical students and 21% of nursing students agreed. Of the combined group of U.S. students (an average of 23%), almost half (11%) said they are considering not pursuing patient care as a career.

The next statement posed was: “I see my current studies as a stepping-stone towards a broader career in healthcare that will not involve directly treating patients.” To this, 63% of medical students and 60% of nursing students agreed. In the survey responses, students shared their future plans as focusing on research, device and treatment development, improving patient care, consulting, and arts programs.

These results feed into the concern American Medical Association President Jesse M. Ehrenfeld, MD, MPH, expressed in a [national address](#) last October:

“The physician shortage that we have long feared - and warned was on the horizon - is already here. It’s an urgent crisis ... hitting every corner of this country - urban and rural -with the most direct [impact] hitting families with high needs and limited means.”

In his address, Dr. Ehrenfeld also noted that “nearly half of all practicing physicians in the U.S. today are over age 55.”²

A more recent (March 2024) [study](#) published by the Association of American Medical Colleges (AAMC) “predicts a shortage of between 20,200 and 40,400 (primary care) physicians by 2036.”

The report also projects a “shortage for 2036 ... between 10,100 and 19,900 surgeons.”³

Interesting enough, the second part of the “Clinician of the Future” survey addresses the use of artificial intelligence (AI) in medical care. In the U.S., almost two-thirds (64%) of medical and nursing students “believe that artificial intelligence (AI) advancements will aid in diagnoses, treatments and patient outcomes.” In addition, over half (56%) believe that “(c)linical decisions will be made with the assistance of Artificial Intelligence (AI) tools such as ChatGPT/Bard.”

If you combine the desire of over 60% of medical and nursing students to have careers that don’t include patient care with their belief that AI will provide diagnosis, clinical decision and treatment assistance, it isn’t hard to imagine a scenario in which the majority of patients seeking medical care interact solely with AI which refers the patient to a human clinician only when necessary. If a prescription is the likely outcome of most patient interactions, AI can handle much of the medical workload with potentially superior diagnosis.

So, what do these trends suggest about the future of chiropractic care? The above information forecasts an even greater need for more doctors of chiropractic. With future MDs looking to move past patient care, DCs will be seen as more accessible front-line doctors. This will be especially true for those patients who actually want to interact directly with their provider instead of a prescription-dispensing computer program.

Human interaction will come at a premium in health care, which should help raise reimbursement rates as patients and medical providers learn to place greater value on chiropractic.

While AI will likely be valuable for DCs as a screening tool and for making clinical decisions in challenging cases, it won’t replace the human touch and healing that comes with the chiropractic adjustment. Regular chiropractic care will become more valuable as the medical profession pulls away from direct patient contact.

References

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2. “AMA President Sounds Alarm on National Physician Shortage.” American Medical Association, Oct. 25, 2023.
3. *The Complexities of Physician Supply and Demand: Projections From 2021 to 2036*. Washington, D.C.: AAMC, 2024.

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