Female Surgeons Making Inroads In Male-Dominated Operating Rooms

By Sujata Srinivasan July 17, 2017

When the lights power on in the operating room at Bridgeport Hospital, more than a half of the acute care team of surgeons peering from behind the masks are women. That’s unusual, given that only 28 percent of all surgeons in Connecticut are female, according to the latest figures from the American Medical Association (AMA).

Flexible work schedules and hiring more surgeons to ease the on-call burden has helped to lure more women to the trauma surgical team, said Bridgeport Hospital’s chief medical officer, Dr. Michael Ivy, a trauma surgeon.

Hospitals statewide have launched initiatives to help boost the ranks of women surgeons. There’s been progress, but gaps persist.

In Connecticut, the percentage of female surgeons has grown slightly in recently years, from 23 percent in 2007 to 28 percent in 2013.

Dr. Niamey Wilson scrubs her hands prior a surgical procedure at St. Francis Hospital.
Women were under-represented in almost all surgical fields statewide except in obstetrics and gynecology, where they represented a majority—58 percent. There were no female thoracic surgeons as of 2013, and females comprised 28 percent (10) of colon and rectal surgeons and 8 percent (31) of orthopedic surgeons.

Connecticut’s percentage of female surgeons is slightly above the national average of 25 percent. Massachusetts, as of 2013, had 33 percent; New York, 28 percent; California, 27 percent; Pennsylvania, 26 percent; New Jersey, 25 percent; Louisiana, 23 percent; and Kentucky, 20 percent, the AMA data show.

In Connecticut in 2007, there were 575 women surgeons compared to 1,914 men. In 2013, the most recent AMA data show, the number of women surgeons increased to 758 compared to 1,885 men.

The demand for women surgeons in certain specialties is driving Hartford Hospital (https://hartfordhospital.org/) to seek gender diversity, Dr. Rocco Orlando, a general surgeon and chief medical officer at Hartford HealthCare, said.

“We’re aware that it’s really important from a patient standpoint that if we’re going to meet their needs, then we need to have choice,” Orlando said.

Both Hartford Hospital and St. Francis Hospital and Medical Center (http://www.stfranciscare.org/hartford) in Hartford are exploring ways to provide leadership roles to women who’ve earned it. “Surgery is still a boy’s club,” said Dr. Niamey Wilson, a breast surgeon at St. Francis. “Just by having more women in the room, the culture starts to change.”

**Efforts To Woo Women**

In part, Connecticut’s gains in courting women are due to the draw of academic institutions such as the Yale School of Medicine (https://medicine.yale.edu/), and teaching relationships such as Stamford Hospital’s partnership with the Columbia University College of Physicians and Surgeons. But doctors say what’s also important is that hospitals are changing the way they’re recruiting and mentoring women.

At Stamford Hospital (https://www.stamfordhealth.org/), women lead the breast and neurosurgery divisions, and the incoming class of residents is all female. “At least 50 percent of the medical students we interview are women,” said Dr. Kevin M. Dwyer, vice chairman of the Department of Surgery and director of the hospital’s Surgical Residency Program. And just as important, roughly a third of the hospital’s attending surgical staff and community surgeons are women, as well.

St. Francis’ Wilson had two children during her residency whom she “hardly saw,” she said.

She said that there could have been better options for residents like her who were in their prime years—a time when people their age outside the field of surgery were marrying and having children. “I think women start to think about that earlier than men do,” Wilson said.

“Now at St. Francis, we’ve hired a lot of mid-level providers—physician assistants, nurse practitioners—who can offset some of the clerical work that residents have had to do,” said Wilson, who is co-founder of the hospital’s Physicians Forum for Equity and Inclusion.
Doctors Roselle Crombie, Kristen Glasgow and Alisa Savetamal, are surgeons at Bridgeport Hospital.

Networking and mentoring are also helping to drive the numbers up. Dr. Linda Barry, an assistant professor in the Department of Surgery at the University of Connecticut School of Medicine (http://medicine.uconn.edu/) in Farmington, founded the Women in Surgery Interest Group at UConn in 2011 to encourage female medical students to take up surgery.

A lot of what Barry does is to give students a feel for the surgical life: “I’m like the fairy godmother,” she said. Members learn suturing techniques and attend workshops on negotiating and networking. The group has 85 women medical students, of which five chose surgery this year.

Healthcare solutions companies like Medtronic Inc. in North Haven also offer Women in Surgery programs, where discussions at symposiums include “the business of medicine, contract negotiation, choosing a surgical subspecialty, practice settings, and the impact of healthcare reform,” said Linda Richetelli-Pepe, the senior director of Healthcare Economics at Medtronic.

Hartford Hospital’s Orlando said progress is being made.

“The majority of trainees [nationally] in OB/GYN are now women, but what you were seeing was a lag in some of the surgical sub-specialties [like] gynecological surgery. We’ve already seen the gap close at Hartford Healthcare although nationally it’s slower,” Orlando said.

Other factors? “As our numbers increase, so does the awareness that women can be surgeons,” said Dr. Christine Laronga, president of the Association of Women Surgeons (https://www.womensurgeons.org/) and a professor of surgery at the University of South Florida. “The push is to get more and more women surgeons in visible leadership roles to continue raising awareness.”

It seems that merely getting doctors to talk about gender-based career challenges can, by itself, lead to change. As a result of these discussions, Wilson said, Dr. Anne Massucco, a gynecological surgeon, became president of the St. Francis’ medical staff.
**Barriers Persist**

But barriers continue. “Women are not promoted at the same rate as men,” said Dr. Anees Chagpar, an associate professor in the Department of Surgery and director of the Breast Center – Smilow Cancer Hospital at Yale New Haven. “The disparity is particularly clear at the full professor level, even for women who are equally, or better, qualified.”

![Dr. Michael Ivy](Tony Bacewicz Photo)

Dr. Michael Ivy, Bridgeport's chief medical officer, has hired more women surgeons.

According to the Association of Women Surgeons, women comprise only 8 percent of professors and 13 percent of associate professors in surgery. And studies ([https://www.womensurgeons.org/2017-statement-on-gender-salary-equity/](https://www.womensurgeons.org/2017-statement-on-gender-salary-equity/)) show that women earn less than men and that the gap widens over time.

Even with new incentives and programs, the conflict of family care and career continues to be among the biggest deterrents to women entering surgery.

“There’s a bigger time commitment in surgery, and women tend to think about work-life balance more than men,” said Dr. Patricia Sheiner, chief of transplant medicine at Hartford Hospital.


“We still haven’t gotten there,” but we’ve come far, said UConn’s Barry.