

PERSONALITY TYPE AND MEDICAL SPECIALTY

(Excerpt from "The ultimate guide to choosing a medical speciality")

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What makes you tick? How do you handle stress? What gives you satisfaction and fulfillment? How do you interact with your peers? These are all dimensions of a doctor's personality. Discerning your personality type is not simply finding a stereotype that fits. Instead, it means identifying your distinctive attributes, values, and affinities and finding the natural comfort zone where your true preferences lie as a physician.

Although it is especially important for doctors-in-training to select a specialty that is the best match with their personality, best match does not mean it has to be perfect. Take a hard look at the physicians you have met and make sure that your personality type is well represented (rather than underrepresented) in the specialty that interests you. The notion that opposites attract will probably not lead to a long, satisfying medical career. For instance, most physicians would not dispute the idea that empathetic, laid-back medical students make better psychiatrists, and strong-minded, authoritarian, no-nonsense ones should become surgeons. In these examples, students find themselves most comfortable working side-by-side with other physicians who share their personality traits. When you get along well with your colleagues, patients end up receiving the best medical care possible.

Many physicians have studied the relationship between a doctor's personality and chosen specialty. A group of surgeons sought to determine whether there were differences in the characteristics and temperament of physicians in three types of medical careers: surgical, primary care (family practice, internal medicine, and pediatrics), and controllable lifestyle specialties (anesthesiology, dermatology, emergency medicine, neurology, ophthalmology, pathology, psychiatry, and radiology).¹ Most students think of surgeons as dominant, uninhibited, and aggressive. They tend to overlook the fact that surgery requires a certain type of person who can handle its tasks and challenges. Are you one of them? Their study found that surgeons tend to score higher than other specialists on being extroverted, practical, social, competitive, and structured. At the same time, however, surgeons were less creative than their colleagues in controllable lifestyle specialties (who were found to be the most withdrawn and rebellious). Neither group differed significantly from the primary care physicians. This particular study, therefore, helps to support the idea that a physician's satisfaction in a given specialty has a lot to do with personality factors, like temperament and sociability.

Another landmark study surveyed a group of medical students to determine any relationships between personality type and specialty choice.² Students entering the hospital-based specialties (anesthesiology, radiology, or emergency medicine) had less tolerance for ambiguity and preferred highly structured environments with fixed guidelines and immediate closure to

every patient encounter. Future obstetrician-gynecologists saw themselves as warm and helpful, but they were also emotionally vulnerable, uncomfortable around others, and very concerned about appearances and making a good impression. Future pediatricians, who sought warm and close interactions with their patients, were the most extroverted and sociable people. In contrast, the introverted students with fewer social connections—particularly the ones who had been in psychotherapy themselves—became psychiatrists. The study also found that students interested in surgery were more likely to be competitive, aggressive, and highly confident. They were the doctors-to-be who carried a strong conviction that their actions could rapidly influence the course of events.

When checking out all the different choices, medical students should keep in mind that more than one specialty could meet their preferences. For every personality type, it is possible to find a satisfying match with more than one area of medicine. If you are a visually oriented person, consider specialties like pathology, dermatology, and radiology. For students who want to speak only the language of medicine every day as a doctor's doctor, radiology and pathology are ideal choices. Primary care specialties, like internal medicine and family practice, are great opportunities to have long-term, intimate patient relationships. If you prefer an action-oriented specialty that gives immediate gratification, then consider anesthesiology, any surgical subspecialty, and emergency medicine. Some areas overlap considerably—like the great variety of medical problems encountered in both family practice and emergency medicine. But at the same time, they can have significant differences—like the long-term follow-up nature of family practice versus the acute, stabilize-the-patient-and-move-on style of emergency medicine. Thus, to make the best decision, you have to know yourself and your desires well.

THE MYERS-BRIGGS TYPE INDICATOR

First developed in the 1950s by Isabel Briggs Myers and Katherine Briggs, the Myers-Briggs Type Indicator (MBTI) has become the most popular and widely used psychological test in the world. Based on Carl Jung's theory of personality types, the MBTI was designed to analyze personality in a systematic, scientific manner. Where other questionnaires (type tests) only illustrate type, the MBTI precisely identifies a person's personality type preferences.

The MBTI can help medical students to choose the right specialty for their personality and temperament. The test enables you to learn more about how you perceive and judge others, whether in an occupational or social situation. It identifies your strengths and weaknesses and shows whether you value autonomy or prefer interdependence.

Medical students usually take the MBTI at some point during the first 2 years of medical school. It is a very understandable and useful test for health professionals. Your Dean of Students Office will use the valuable information for career planning and development purposes—

especially when it comes time to figuring out which specialty might be the best one for you. For those who have not yet taken the MBTI, now is the perfect time to do so in conjunction with reading this book. Many web sites offer different versions of the MBTI. You can do an Internet search for these, or simply log on to the official site of the Center for Applications of Psychological Type at <<http://www.capt.org>>. For a fee, they will send you the official test and provide personalized expert feedback over the telephone about your results and how to use their interpretation. When taking the test, be sure to answer every question truthfully; honesty is the only way to yield the most accurate results and help you pick the most appropriate specialty.

Breaking Down the MBTI: Sixteen Personality Types

According to the theory behind the MBTI, every individual falls into one of 16 types of personality. These personality types are derived from the four main indices of the MBTI. Each index represents one of the four basic preferences (described by Jung) about how every individual perceives and processes external stimuli and then uses that information to make some kind of cognitive judgment. As part of one's overall personality, this judgment guides behavioral preferences in any situation involving other people—like colleagues or patients. The four dimensions measured by the MBTI are:

1. Extroversion (E) versus Introversion (I):

How do you relate to others? Where do you best derive your energy—from yourself or from others? Introverts prefer to focus their interest and energy on an inner world of ideas, impressions, and reactions. Being introverted does not mean being asocial. Instead, introverts

prefer interactions with greater focus and depth, with others who are also good listeners and who think before they act or speak. Extroverts, on the other hand, derive their energy from external stimuli and tend to focus their interest on the outside world. They prefer dealing with facts, objects, and actions. Not all extroverts are the life of the party, however. They simply prefer being engaged in many things at once, with lots of expression, impulsivity, and thinking out loud.

2. Sensing (S) versus Intuition (N):

What kinds of stimuli do you prefer when collecting, processing, and remembering information? Sensors are the ones who are drawn to the hard, immediate facts of life—practical details and evidence that can be taken in through one of the five senses. They are sensible, matter-of-fact people who look at the reality of the world around them, rely on prior experiences, and take things literally. Intuitives, on the other hand, look beyond the facts and evidence for meanings, possibilities, connections, and relationships. They are more imaginative and creative people who like to see the big picture and abstract concepts. Using intuition often means relying on a hunch or gut

feeling rather than past experience. They eschew facts for theories and look beyond simply the obvious.

3. Thinking (T) versus Feeling (F):

How do you make decisions and come to conclusions? This index concerns the kind of judgment you trust when you need to make a decision. Thinkers make their decisions impersonally, based

mainly on objective data that makes sense to them. As analytical people motivated by achievement, they always consider the logical consequences of their decisions. Unlike thinkers, feelers rely on personal, subjective feelings in their decisions. As empathetic, compassionate, and sensitive people, they take the time to consider how their decision might affect others. Feelers like pleasing others and tend to get their feelings hurt rather easily.

4. Judgment (J) versus Perception (P):

How do you order your life? What kind of environment makes you the most comfortable? This index describes how a person deals with the outside world. Those who prefer judgment are serious, time-conscious individuals who live by schedules. They like things orderly, planned, and controlled. Judgers need a world of structure and predictability to have a sense of control over their environment and to be their most organized and productive. Judgers work hard, make decisions quickly and decisively, and sometimes can be closed minded. On the other hand, perceivers are much more open minded, relaxed, and nonconforming. They are much more aware of ideas, events, and things. Their flexibility and spontaneity, however, can sometimes lead to irresponsibility. Although judges need to finish projects and settle all issues, perceivers tend to gather information in a leisurely way before making a final decision. Perceivers prefer to experience as much of the world as possible, so they like to keep their options open and are most comfortable adapting.

According to the theory behind the MBTI, personality type indicates an innate preference (similar to hand dominance) toward one of the two poles in each index, meaning that a person is probably never a 100% introvert, but may lie closer to the introversion pole (the dominant or leading process) on a continuum scale, while still having some qualities of extroversion (which in this case would be considered the nondominant or auxiliary trait). When you take the MBTI, you receive a score that shows the strength and consistency of your natural tendency in each of these four dimensions. It is the interplay between the four poles that ultimately gives us our individual personality and temperament. Thus, the test classifies you as one of 16 different personality types combinations: INTP, ESTJ, ENFJ, ISTP, and so on. A complete description of the 16 personality types can be found on the web site of the Center for Applications of Personality Type.

How the MBTI Can Work for You

At this point, you are probably thinking “Enough with all this psychology stuff! How does this help me choose a specialty?” The best approach is to take the MBTI and identify your specific personality type. Use the expert feedback and interpretation of your results to learn more about the types of people with whom you work best. Then, as you rotate through the different fields of medicine during the junior year, look closely at each specialist and try to discern their personality type. Do pediatricians seem more like introverts? Are surgeons judges or perceivers? What do specialties chosen by your personality type have in common? The overall goal is to make sure you know yourself well before determining which specialty is right for you.

Ideally, medical students should think about taking the MBTI more than once, because personality type may change over time (especially in young people). Personal growth and new experiences can often change the way a person interacts. Introverts may become more extroverted, or thinkers might become feelers from one year to the next. In fact, one study compared MBTI results in a group of medical students who took the test during their first and fourth years of school.³ The authors found that nearly 57% of students had changed their personality type preferences on one or more of the MBTI indices.

The MBTI has been studied quite extensively within the medical profession to draw conclusions about the relationship between personality type and career choice. One study examined whether the results of the MBTI taken in the first year of medical school accurately predicted the choice of medical specialty in the postgraduate year.⁴ The authors found that three out of the four type indices (SN, T-F, J-P) were predictive of future specialty choice: Students who were sensing, feeling, and judging types selected family practice. Students who were sensing, thinking, and judging types chose obstetrics and gynecology. Students who were intuitive, feeling, and perceiving types undertook careers in psychiatry.

Another study looked closely at the association between these two variables for medical students deciding between primary care and non-primary care specialties.⁵ The authors found that the extroversion-introversion (E-I) and thinking-feeling (T-F) axes were the most statistically significant MBTI predictors with regard to specialty selection. Introverts and feelers were more likely to choose primary care, a highly service-oriented area of medicine with the rewards of longterm patient relationships. For graduates who chose non-primary care fields, extroverted thinkers preferred surgical specialties, which is to be expected given the nature of surgical practice—high patient volume, less long-term continuity of care, and clinical situations that require rapid decisions based on facts.

Recently, researchers at Louisiana State University updated the original longitudinal study done by Myers in the 1950s (see Table 4-1) with new data on doctors graduating between 1988 and 1998.⁶ They, too, found that I-N types are more drawn to fields like internal medicine and neurology, whereas surgical specialties attract E-S types. Introverts and feeling types are more likely to choose primary care because of its nurturing, compassionate aspects. Within primary care, feeling types are more likely to choose family practice over internal medicine (which has a more technological focus). Anesthesiology seems to attract more ISTPs and ISFPs, and pediatrics appeals more to ESFJs and ESTJs. Sensors—who love more technological, direct

approaches with well-learned skills—are more common in surgery (general and orthopedic) as well as obstetrics-gynecology. Intuitives prefer complex diagnostic challenges and problems with subtle nuances, so they are more likely to become psychiatrists. INT types, who enjoy the challenge of medicine without ever seeing a patient, are attracted to pathology and research due to their ability to detach personally. Thinking types prefer caring for patients where impartiality and stamina are required. They also flock to the surgical specialties, where rapid decisions are needed based on hard evidence and facts.

MEDICAL SPECIALTIES BY TEMPERAMENT

Introverted–Sensing–Thinking–

Judging (ISTJ)

Dermatology

Obstetrics-gynecology

Family practice

Urology

Orthopedic surgery

Introverted–Sensing–Feeling–

Judging (ISFJ)

Anesthesiology

Ophthalmology

General practice

Family practice

Pediatrics

Introverted–Sensing–Thinking–

Perceptive (ISTP)

Otolaryngology

Anesthesiology

Radiology

Ophthalmology

General practice

Introverted–Sensing–Feeling–

Perceptive (ISFP)

Anesthesiology

Urology

Family practice

Thoracic surgery

General practice

Introverted–Intuitive–Thinking–

Judging (INFJ)

Psychiatry

Internal medicine

Thoracic surgery

General surgery

Pathology

Extroverted–Sensing–Thinking–

Judging (ESTJ)

Obstetrics-gynecology

General practice

General surgery

Orthopedic surgery

Pediatrics

Extroverted–Sensing–Feeling–

Judging (ESFJ)

Pediatrics

Orthopedic surgery

Otolaryngology

General practice

Internal medicine

Extroverted–Intuitive–Feeling–

Perceptive (ENFP)

Psychiatry

Dermatology

Otolaryngology

Psychiatry

Pediatrics

Introverted–Intuitive–Thinking–

Judging (INTJ)

Psychiatry

Pathology
Neurology
Internal medicine
Anesthesiology

**Introverted–Intuitive–Feeling–
Perceptive (INFP)**

Psychiatry
Cardiology
Neurology
Dermatology
Pathology

**Introverted–Intuitive–Thinking–
Perceptive (INTP)**

Neurology
Pathology
Psychiatry
Cardiology
Thoracic surgery

**Extroverted–Sensing–Thinking–
Perceptive (ESTP)**

Orthopedic surgery
Dermatology
Family practice
Radiology
General surgery

Extroverted–Sensing–Feeling–

Perceptive (ESFP)
Ophthalmology
Thoracic surgery
Obstetrics-gynecology
Orthopedic surgery
General surgery

**Extroverted–Intuitive–Thinking–
Perceptive (ENTP)**

Otolaryngology
Psychiatry
Radiology
Pediatrics
Pathology

**Extroverted–Intuitive–Feeling–
Judging (ENFJ)**

Thoracic surgery
Dermatology
Psychiatry
Ophthalmology
Radiology

**Extroverted–Intuitive–Thinking–
Judging (ENTJ)**

Neurology
Cardiology
Urology
Thoracic surgery
Internal medicine

The MBTI is a useful tool for identifying aspects of your personality, which can help you to find a compatible medical specialty. Remember—the more you understand your temperament and motivations, the less likely you will allow other variables (such as those discussed in Chapter 3) to overshadow them. At the same time, medical students should not rely too heavily on personality type. Simply be aware that working with people with the same personality preferences is an important variable to consider. Typically, a physician who switches to a new specialty chooses one in which his or her own personality type is much more common. After all,

LOOKING AT THE BIG PICTURE

medicine is a wonderfully broad profession in which there is an appealing specialty for every personality type!

