

## Letter to the Editor

# Letter to the editor regarding "Analysis of cardiovascular surgery specialization theses and their publication rates"

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### Dear Editor,

I would like to provide feedback on the article 'Analysis of Cardiovascular Surgery Specialization Theses and Their Publication Rates' [1] recently published in the Turkish Journal of Vascular Surgery. The article analyses the publication rates of cardiovascular surgery specialisation theses in Türkiye and the difficulties encountered in this process. However, I would like to draw attention to the following points and make some suggestions.

A doctoral thesis in a medical field, initiated in response to a question, provides an opportunity to acquire research skills and to develop in this field [2]. Although completed theses are available in local databases, they are generally read by fewer people than scientific articles. It is important to turn theses into scientific articles in order to increase their contribution to science and to provide access to a wider audience. However, theses are studies that resident physicians should continue while continuing their daily work. This situation creates a dilemma between the speciality thesis being a scientific study and being only a way to become a specialist. Theses resulting from an irrelevant research question or hastily determined study designs have been described as missed opportunities for publication [3].

The fact that 83.3% of the speciality theses analysed were from three major cities is obviously related to the fact that the number of institutions providing speciality education and the number of resident physicians are higher in these cities. However, an important result to be considered here is the number of theses

according to years. These numbers also show the number of new specialised physicians in the current year. Although the quotas for resident physicians have been increased in recent years, the number of cardiovascular surgery residents was low in the years analysed in this study. This situation increased both the number of shifts and the workload of the residents during working hours and forced them to complete their speciality theses in limited time intervals.

Another issue is the necessity for the specialisation thesis to be transformed into a scientific publication. Between 2015 and 2020, when the speciality theses were examined in this study, it was sufficient for the criteria for associate professorship that the speciality thesis was only a full-text oral presentation. The ease of conversion of speciality theses into oral presentations and their rapid presentation and publication in a shorter time may have been one of the obstacles to their conversion into scientific studies.

Rahman et al. showed that most of the speciality theses were retrospective studies. This may again be thought to be due to the intensive working conditions of cardiovascular surgery residents because experimental studies and prospective studies are types of studies that need more time. The high number of retrospective studies may be one of the reasons for the low number of theses turned into scientific publications.

In conclusion, this study provides an important contribution to understanding the publication rates of theses in cardiovascular surgery speciality training and the obstacles encountered in this

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process. A better understanding of the factors preventing the transformation of speciality theses into scientific studies may increase their contribution in the scientific field.

Thank you for the opportunity to provide feedback on this important work.

Yours sincerely,

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## Rahman et al.'s Reply

We would first like to thank the author for their valuable comments on our article titled "Analysis of Cardiovascular Surgery Specialization Theses and Their Publication Rates."

The author attributed the reasons for the failure of specialization theses to be converted into scientific publications to the insufficiency in the number of resident physicians and the heavy workload.

Indeed, the number of physicians during the years included in the study was insufficient and may be one of the primary factors contributing to the increased workload. As highlighted in the article, the specialization thesis is often the first scientific study for candidates pursuing cardiovascular surgery. Therefore, they have a high need for effective guidance and mentorship. Although the author addressed the workload of resident physicians, the workload of thesis advisors is equally significant at this point. Consequently, the inability to receive sufficient support from thesis advisors due to mutual workload pressures may negatively impact the quality of the theses, thereby reducing the likelihood of their publication.

The author similarly emphasized that the predominance of retrospective study designs might also be associated with this issue. The Board for Curriculum Development and Standard Setting in Medicine (TUKMOS) recommends that the thesis topic for resident physicians be determined starting from the 30th month of residency [1]. Delaying the selection of the thesis topic to later stages and making rushed decisions inevitably leads to retrospective studies. Adhering to TUKMOS's timing recommendation would facilitate the conduct of prospective studies. We believe that this would naturally contribute to the publication of specialization theses.

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