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Clinician-scientists play a pivotal role in the gap between biomedical research and clinical practice, formulating important patient-focused research questions and then translating novel findings back to the clinic. There has been increasing documentation and dialogue over the last three decades around the decline in the number of clinician-scientists as well as a shift of focus, for those still actively engaged, away from patient-based investigation.<sup>1</sup> One can appreciate the growing concern of stagnation in an exclusively technical expertise, particularly in surgical specialties, without the constant reconstruction afforded by the development and implementation of novel clinical and basic science knowledge. Although postulated explanations for the decline of the clinician-scientist are multiple and varied, most have revolved around issues of training/mentorship, time and financial disincentives. Many of these perceived barriers seem to start early with several published reports documenting the ambivalent attitude towards the value of biomedical research in both medical school and residency training.<sup>2</sup>

However, many initiatives in Canada may have started to address this disinclination towards research endeavors by practicing physicians. Some of these include increasing early exposure to research at the medical school level, initiating medical scientist training programs, fostering research in sub-specialty fellowships and developing essential Canadian Institutes of Health Research (CIHR) and other non-for-profit clinician-scientist awards. Mirroring some optimistic reports from the United States, Lander and colleagues recently reported a study suggesting that Canadian clinician-scientists are awarded an increasing proportion of CIHR research grants and salary awards.<sup>3</sup> Although this study paints a fairly optimistic picture, the barriers to most of our newly minted surgical-scientists are still significant with, at best, ad hoc university resources to address issues of protected time from clinical responsibilities and salary support without well-defined, coordinated national policies or programs.

The Canadian Urological Association Scholarship Fund (CUASF) was established in 1973 as a means of supporting promising Canadian urologic researchers and therefore to facilitate Canadian urology research productivity. This early career award plays a vital role within our specialty, enabling young clinical-scientists get their foot in the door with respect to peer-reviewed support and financial backing at a critical point in their careers. Over the last 28 years, the CUASF has supported more than 91 academic urologists, as well as many community-based and international physicians, with a commitment to advancing biomedical research in urology. Reviewing this month's *CUAJ*, it is notable there is at least one previous CUASF scholarship recipient listed as an author in every article. With an increasing impact factor (most recently 1.72), *CUAJ* is proud to contribute to the mission of the urological research community in Canada. As Associate Editor of *CUAJ* and the Chair of the CUASF, I would like to acknowledge and congratulate this year's CUASF scholarship winners:

- Frederick Pouliout – Université Laval
- Sero Andonian – McGill University
- Rodney Breau – University of Ottawa
- Naji Touma – Queen's University
- Blayne Welk – University of Western Ontario
- Jennifer Mickelson – University of British Columbia

## References

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3. Lander B, Hanley GE, Atkinson-Grosjean J. Clinician-Scientists in Canada: Barriers to Career Entry and Progress. *PLoS ONE* 2010;5:e13168. doi:10.1371/journal.pone.0013168.