

Cite as: Hudson J. Advocating for policy that promotes and maintains urologists of all genders. *Can Urol Assoc J* 2026;20(6):E231 <http://dx.doi.org/10.5489/cuaj.9795>

See related article at [cuaj.ca](http://cuaj.ca)

# Advocating for policy that promotes and maintains urologists of all genders

I enjoyed this month's article by Khan et al,<sup>1</sup> and I am grateful that I practice in a time when these discussions take place in the *CUAJ*. Given that women compose 50.6% of our Canadian population and 50.1% of CARMS applicants, why are we seeing the trends noted in Khan et al, and how can we develop and advocate for policy that promotes and maintains urologists of all genders throughout their careers?

While I appreciate the intentions of the authors, I find that the article's attention to reverse bias puts the success of men and women urologists in tension. Attention to reverse bias distracts from potentially larger triggers for burnout in career urologists of all genders, such as stress points in career paths that distract from scholarly visibility, interactions with industry, and academic promotion.

In their article, Khan et al make transparent and specific recommendations that would benefit all Canadian urologists and patients. To these, I would add two more.

First, we need to ensure that the responsibility of teaching, department committees, and administration is tracked, remunerated, and weighted equally among

members when we evaluate urologists for career advancement and promotion.

Second, the article highlights a preference of female patients for gender-concordant urologists. If we believe this preference is an important factor in quality patient care, then fee structures, payment models, and resource allocation should reflect the time and complexity of the triage, evaluation, and eventual surgery of these patients. This model is being acknowledged and studied in recent contract negotiations (New Brunswick).

I am hopeful that the discussions around these issues will lead to improved patient access to care and long-term urology career viability.

COMPETING INTERESTS: The author has no competing personal or financial interests to disclose.

## REFERENCE

1. Khan MZ, Ismail A, Kotb A. Re-examining equity in urology: Evaluating the emergence of unintended bias against male clinicians and academics. *Can Urol Assoc J* 2026;20:E222-30. <http://dx.doi.org/10.5489/cuaj.9463>

CORRESPONDENCE: Dr. Jill Hudson, Fredericton, NB, Canada; [jjoyhudson@gmail.com](mailto:jjoyhudson@gmail.com)