

Personality changes in medical students: causes, consequences and proposed solutions

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Madam, globally, the aim of medical education is to produce knowledgeable,¹ competitive, and professional brains implemented to cushion the ill individuals, advance the field of medicine and to boost the quality of life.

Medical students who are trained and groomed to be skillful professionals have to undergo consistent stress right from their undergraduate years or even before that period. A great majority of the students imbibe this stress in a positive way and nurture their performance while acquiring dexterity. However, a few individuals are unable to cope up with this substantial stress.¹

Although medical profession is humanity serving profession with the major goal to treat a patient's mental as well as physical health. But unfortunately, the sentinel dilemma is that a few medical students themselves get a great personality distress.¹ It has been rightly said, 'When you first treat a disease, first treat the mind'. In contrast to the above mentioned statement, considerable number of medical students during their training become victims of such mental and physical stress.

The major culprit encompasses and revolves around certain environmental as well as professional circumstances that back stabs a medical student's mental status which has a very catastrophic effect on their personality.

Studies suggest that increasing academic pressure, substantial workload, never ending financial debts, competitiveness among students, excessive class content, exposure to cadavers deprive the students from their psychological steadiness right from the beginning.¹⁻⁴ The adversities do not simply lessen during the clinical years

where professional jealousy and cynicism seize them in its brutal claws making them liable to substance abuse, depression, anxiety and even suicide.¹

According to a research done in Pakistan, individuals were more prone to anxiety and depression who were on substance abuse and had a family history of depression.⁵ Pakistan, although being an underdeveloped country is well aware of this fact and has taken steps to overcome this huge problem faced by the students.

In my view, health facilitators should realize the etiology and outcome of the student distress as it hinders the learning and cognitive development resulting in higher rates of medical school dropouts.⁵

Therefore, it is the responsibility of the concerned authorities to take measures regarding the evaluation of the extent of stress¹ and related personality disorder undergone by medical students and to introduce peer group counseling, support and rehabilitation programmes.⁵ Setting of priorities, avoidance of comparison, respecting one's limits and introduction of leisure and physical activity would improve the quality of life of both patients and medical professionals.^{1,3}

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