The COVID-19 pandemic changed everything for retina specialists: clinical operations and productivity, continuing education, family schedules, and personal health measures, to name only a few.

Recent reports show that fewer than 20% of retina specialists are women, many of whom are early in their careers and developing their practices while caring for young families at home. Women, who are traditionally the primary caregivers in the home, have had the hardest time finding balance during the pandemic, and it has been particularly challenging for women physicians.

This article discusses the challenges that women in retina faced and highlights the changes that practices, communities, and institutions implemented to meet their needs.

Several leaders in the field shared their insights for this article:

- Audina M. Berrocal, MD, was the first surgeon to treat the youngest patient in the United States with the first FDA-approved gene therapy. She is a professor of Clinical Ophthalmology, the director of Pediatric Retina and Retinopathy of Prematurity, and Vitreoretinal Fellowship co-director at Bascom Palmer Eye Institute in Miami. She also devotes time to teaching and supporting women in retina.

- Grace Chang, MD, PhD, completed her ophthalmology residency and retina surgery fellowship at the Massachusetts Eye and Ear Infirmary. She is an industry executive and has served as chief medical officer at Oxurion and Notal Vision. She continues to practice at the University of Southern California in Los Angeles.

- Alice Zhang, MD, completed her ophthalmology residency at McGill University and her retina fellowship at Wilmer Eye Institute. She is a retina surgeon, an assistant professor of Ophthalmology, and the residency director at the University of North Carolina at Chapel Hill.

Clinical Operations

With the closure of schools, daycares, and places of worship and the limited exposure to family, many parents had to find a new support network and, more often than men, women had to rearrange their schedules. Luckily, all of us experienced instances of support from our work communities.

Dr. Berrocal noted that, initially, clinic volumes were low, and patients often did not come in or presented too late with complications, which was a notable challenge. She worked throughout the pandemic and created contingency plans (including isolation and decontamination strategies) with her husband (also a physician) in case they were required to provide emergency medical services to the community. She said that Bascom Palmer was very supportive during what she calls “the most challenging time of her life” and provided the flexibility she needed to care for her children and support virtual learning. “Thanks to virtual support from family and friends and a great support team at work, I was able to navigate those challenging times,” she said.

At a Glance

- Women physicians have had the hardest time finding balance during the pandemic.

- Planning gatherings and other activities was challenging, despite the fact that a global pandemic is when such forms of support are most needed.

- Women in retina are finding support and flexibility in their practice environments and through their offices, communities, and national societies.
RESIDENT AND FELLOW EDUCATION

Despite a history of lower surgical volumes by women trainees within ophthalmology residency training programs, at Bascom Palmer Eye Institute, Dr. Berrocal did not feel that the pandemic resulted in any negative experiences for women trainees. "Both male and female residents were working equally hard in clinic and in the operating room," she said. "We had some fellows and residents with pregnant partners, and this came with challenges, but these trainees had the full support of the institute." Dr. Berrocal felt that Bascom Palmer made great efforts to promote personal and mental health among trainees and staff.

Program Director Dr. Zhang said she "focused more on inspiring residents and taking care of them," as many were unable to travel to see family and friends. "The pandemic has led to a lot of events that affect a trainee’s morale," she explained. "During the pandemic, there were moments of interruptions of surgical training due to OR ramp downs related to staffing shortages. The international rotation has been on hold since 2020, and this was a portion of their training that residents looked forward to the most." She added that planning gatherings and other activities was challenging, despite the fact that a global pandemic is when such forms of support are most needed. During periods of unsafe travel, trainees’ academic communities were likely an important source of daily support and encouragement.

Dr. Zhang added that with reductions in clinic volumes, it was more important to be flexible and open-minded, and to change rotation structure and content as needed to improve trainee exposure. Communication and managing expectations was crucial in this respect.

THE PANDEMIC AND JOB PROSPECTS

In an era where private equity has an increasing footprint in the retina community and the practice environment is constantly changing, the pandemic had the potential to constrain employment options for new hires.

Dr. Berrocal believes this may have led to a change in priorities. Many women may have had to prioritize living near family and consider the value of time and lifestyle moreso than compensation or the prestige of a practice. "The pandemic was eye-opening for many," she said. Like many women forced to reconcile a passion for their work and responsibilities to their family, she personally adopted new work hours, eschewing Monday morning clinics to focus on herself and family. This led her to question the need to hold traditional hours, especially considering patients are also sometimes unable to schedule appointments between 9 AM and 5 PM. "We need to adapt to meet the needs of our families and patients, many of whom are busy women themselves," she noted. "Because of the need to prove ourselves, the demands of challenging work, and the physical and emotional demands of childbirth and parenting, many women are at risk of becoming overworked and emotionally exhausted trying to conform to a world designed by men, who are less likely to be primary caregivers."

INDUSTRY AND CLINICAL RESEARCH

Like many others, Dr. Chang has long noticed that women frequently bear a disproportionate burden in child rearing and household management. This workload worsened during the pandemic, when access to traditional support systems (grandparents, school systems, and faith-based communities) was limited. During the pandemic, Dr. Chang noticed that many of the women she worked with had a harder time replying to emails or scheduling meetings due to the demands of in-home schooling and childcare. When asked about the retina industry, she reported that there were huge upheavals due to the pandemic, including "increased costs of clinical trials, missed timelines in trials due to lagging enrollment by patients, high turnover in qualified personnel to execute the trials, and interruptions due to staff illness."

Nonetheless, industry was accommodating in many ways. She was able to work from home during the pandemic, which enabled her to continue working and collaborating, but "limited the kinds of chance interactions that spur inspiration." The pandemic certainly created challenges, but also changed perspectives, she said. For example, a distant job opportunity was only possible due to the fact that the pandemic has made it acceptable to work remotely. "Companies are adapting," she said. And this may mean more domestic and global career opportunities for women in the long-term.

WAYS TO CONNECT

The COVID-19 pandemic has been difficult, and it is not yet over. Many women in retina are finding much-needed support and flexibility in their practice environments and through their offices, communities, and national societies such as the American Society of Retina Specialists, which offers virtual and in-person mentorship through its Women in Retina Section.


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