

Academic Medical Leadership: An Overview of the Emerging Concepts and Ideas

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Abstract

There has been an overwhelming demand to improve medical practices and services through using evidence-based medicine, and leadership has been increasingly recognized as an important contributory factor to the success of academic medical and healthcare organizations and institutions.

Keyword: improve medical practices; academic medical; evidence-based medicine

Introduction

There has been an overwhelming demand to improve medical practices and services through using evidence-based medicine, and leadership has been increasingly recognized as an important contributory factor to the success of academic medical and healthcare organizations and institutions. Therefore, there has been an increasing interest in the practices of medical leadership and academic medical leadership, and also in identifying the qualities of the genuine medical and academic medical leaders. The use of bibliometric indices has been suggested to quantitatively and qualitatively assess scientific productivity of medical leaders and academic medical leaders [1-11].

Dr Luis Ignaro is one of many examples of well-recognized medical leaders who were capable to make the difference in healthcare. He shared a Nobel Prize in medicine with two of his colleagues for his research on the role of nitric oxide in the reduction of cardiac diseases. Dr Luis used the new information he discovered with his colleagues in the prevention of cardiovascular heart disease. His work represented a breakthrough in heart disease prevention. On the contrary to academic medical leadership, medical leadership is not all about making scientific discoveries through research, but it is all about introducing discoveries and innovations into healthcare and practice. The scientific discoveries of Luis Ignaro made him an academic medical leader, but his ability and work to transfer new knowledge and discoveries into healthcare, into his practice made him medical leader [4, 5, 6, 7].

Academic medical leadership or academic leadership in medicine is the leadership in an academic medical institution, organization or setting. It has emerged as a distinctive variation of leadership and medical leadership in general.

Academic leadership is the superior ability, competence and function in higher education institutions organizations, and settings. Therefore, Academic medical leadership involves the superior ability, competence and function in higher education institutions, organizations, and settings including colleges of medicine, teaching and university hospitals' clinical

departments, specializations and sub-specialization boards, peer-reviewed medical journals, and training centers.

Academic leadership in general is a leadership that involves the roles of creating vision and mission based on science and research data for the organization, and introducing creative and innovative ideas, and also establishing the environment of teamwork. Therefore, academic medical leadership is concerned with establishing vision and mission based on scientific evidence and research evidence for colleges of medicine, teaching and university hospitals' clinical departments, specializations and sub-specialization boards, peer-reviewed medical journals, and training centers. Academic medical leadership involves introducing creative and innovative ideas, and inspiring teamwork.

Leadership aptitude attainment help organizations in the achievement of their missions and establishing vision that pave the road for introducing innovations which enable the organization in reaching higher organizational outcomes [1,2,3,4].

Academic medical leadership has been increasingly linked with academic productivity is correlated in many academic institutions throughout the world with academic promotion and the acquisition of academic leadership positions. Research publication is probably the most important measure of academic productivity, and thus of academic medical leadership. However, the mere number of research publications has not been taken as a satisfactory measure of Academic medical leadership because this number dose not give a clue to the validity and importance of the published research work.

Leaders in the academic medical fields emerge or selected from the faculty members of academic organizations and institutions, and therefore the emergence of a genuine academic medical leaders demands the appropriate selection of adequately qualified physicians for faculties' positions in academic medical organizations or institutions. Several studies showed that the Hirsch index (h-index) is a useful tool for the evaluation of academic productivity of physicians, and it is dependent on

academic rank, and increases progressively with academic rank, and thus can be used to determine academic leaders [12,13,14,15,16].

In 2014, Gast, Kuzon, and Waljee showed that a faculty of academic plastic surgery department in the United States included published authors with eight of them were winners of the American Association of Plastic Surgeons Research Achievement Award. In this department, faculty members' bibliometric indices, including the Hirsch index (h-index), and number of peer-reviewed publications were correlated with academic rank suggesting that the faculty members were originally selected based on their research and publication records.

Cutoffs for academic promotion to academic ranks were directly correlated with the Hirsch index (h-index), and number of publications. Hirsch index (h-index) of 8.5 and publication number of 29.5 were correlated with promotion to academic ranks of associate professor, while h-index of 14.5 and publications number of 48 was correlated with promotion to academic ranks of professor [12].

In developed countries like the United States academic medical leadership studies has showed a correlation between the acquisition of academic leader position (Chair) in academic departments with number of scientific publications and h-index suggesting that one of the important qualities of academic medical leader is to be research minded and a strong inclination to document practices in scientific publications. In a study of the qualities of academic medical leaders (chairs) of United States academic ophthalmology departments in 2018, Dotan, Qureshi, and Gatton found that academic medical leaders tended to be research minded, highly productive authors and the mean number of publications per academic medical leaders was 108 publications [13].

In an other US bibliometric included 366 full-time academic hand surgeons (4% instructors, 28% assistant professors, 40% associate professor, and 22% professor); the mean h-index was 10.2 ± 9.9 and was strongly correlated with academic rank. The Hirsch (h-index) was found to have a high sensitivity and specificity for predicting academic rank, and the authors concluded that the Hirsch index (h-index) is a reliable tool for quantitatively assessing research productivity and should be used in academic rankings [14], and is therefore it is useful for identifying real academic leaders.

In a developing county like Iraq, non-governmental academic organization such as Iraq Headquarter of Copernicus Scientists International Panel has been keen in selecting its leadership based on the reputable academic output, and the current head of Iraq Headquarter of Copernicus Scientists International Panel is the Iraqi pediatrician and hospital based clinician with the highest H-index on Scopus. On the contrary, governmental academic organizations and institutions remained for many years appointing heads of academic departments in medical colleges, teaching hospital directors, deans of medical schools, and heads of boards of medical specializations have in most instances regardless of their professional and scientific qualifications. The vast majority of academic leaders in these governmental academic organizations and institutions don't even have Hirsch index (h-index) in Scopus. This situation resulted to large extent from the fact governmental academic organizations and institutions remained for many years appointing faculty members regardless of their professional, research and academic records [10, 17, 18, 19,20].

In conclusion academic medical leadership used to be more related to teaching at medical institutions and medical school during the twentieth century, while during it has become more related to medical research during the previous two decades.

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