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# "The work/life balance in this specialty is very good overall and often the envy of colleagues in other specialities!"

Dr Richard Gale is a consultant in medical ophthalmology, working at York Teaching Hospital NHS Foundation Trust. He is the Chair for the Specialist Advisory Committee on medical ophthalmology for the Joint Royal College of Physicians' Training Board (JRCPTB).

# **Dr Richard Gale**

#### Consultant in medical ophthalmology

#### **Employer or university**

York Teaching Hospital NHS Foundation Trust

Salary range Over £65K Dr Richard Gale

# Getting into medical ophthalmology

# Expand / collapse

I studied at Leeds Medical School and intercalated in chemical pathology. During my medical training I spent time in Cheltenham, Cambridge and then came back to Yorkshire where I was the first person in the area to train in medical ophthalmology. I also spent a year as a clinical fellow in London – at Moorfields Eye Hospital and the Medical Eye Unit at St Thomas'. Eventually I became involved in setting up the Yorkshire medical ophthalmology training programme.

Medical Ophthalmology has a good balance between general medicine and being a specialist in eye disease. It is a fascinating specialty as many diseases affect the eye;

diseases such as rheumatoid arthritis and bowel disease. What I like about it is that it's easy to see the pathology, for example you can see inflammation in the blood vessels of the eye. Treatments are at the fore front of medicine with the use of biologic agents and the technology for imaging and laser is very progressive. The work is often quite predictable in its nature with a limited amount of out of hours work.

Ophthalmology is a fascinating area and although it is a niche specialty, in addition there is a general medical feel to the role. Medical Ophthalmology is also at the forefront of technology in terms of the new techniques and laser technology and advances in medicines. You also have a good level of life/work balance. I would thoroughly recommend the specialty.

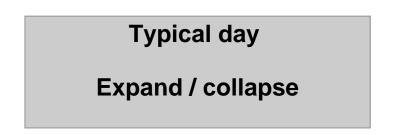
### **Skills and attributes**

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You need to be able think like a physician and be quite meticulous. In addition you need to be quite determined to complete the training programme and it is ideal to obtain a broad experience in teaching and research in addition to clinical experience. Medical ophthalmologists have traditionally often had an academic interest but this is less so the case now. Research papers can help make you an attractive candidate for this specialty. There are several general ophthalmologist journals in which you can get published.

Management skills can also be important as some medical ophthalmologist may have a management role such as managing a high volume AMD or diabetic retinopathy screening service.

You do not currently need a PhD/MD to become a consultant.



I have consultant meetings/ research meetings often first thing in the day. I attend two teaching sessions over lunchtime per week. Typically I will have a clinic in the morning and then a supporting session (where I catch up with paperwork) or a second clinic in the afternoon. Some clinics are specific e.g. in the Medical ophthalmology clinic I may have 20-25 patients with uveitis, scleritis of neuro-ophthalmological conditions to be seen by my team of three people. I also have a clinic where patients often have the same disease e.g. AMD; here my team would see up to 50 patients and I would oversee the work of six

optometrists and a Clinical Fellow or Trainee. I would have responsibility for the overall supervision of the team and supervise the most challenging cases.

Work/life balance	
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There are no acute on-calls for my role and the hours are predictable. I can balance family life (I have young children) and also enjoy sport. I am a member of a running club and the regular hours mean that I can attend this weekly.

Some medical ophthalmology posts do offer some on-call duties, and some do not. I will only occasionally get an out of hours' phone call.

Career	opportunities
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There are opportunities for private practice, especially in the areas of macular degeneration and diabetes. There are also opportunities in managing inflammatory eye disease but to a lesser extent.

I travel nationally for College work, research conferences and lectures. I have also travelled overseas, for example I have delivered presentations in the USA at the American Academy of Ophthalmologists meeting and at the Euretina Conference which is the European equivalent.

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