

Child Psychiatry Is Amazing

Brian D. Smith, MD | Sep 12, 2012

Practically no one enters medical school with the goal of becoming a child psychiatrist. Medical school gives you limited exposure to the field of child psychiatry. It often gets short shrift in the curriculum, and some students are dissuaded from going into psychiatry by peers, family, and even faculty physicians; both mental health patients and their providers are sometimes stigmatized.

But I'm here to tell you that the field of child psychiatry is wonderful. It is the best-kept secret in medical school -- and you'll have to discover it for yourselves.

Child psychiatry is admittedly different in some ways from other specialties. Even though child psychiatrists adhere to the medical model and highly value evidence-based medicine, many of us don't perform physical examinations with any regularity, only occasionally wielding our stethoscopes. But child psychiatry is a good kind of different.

Child psychiatry is a great career option because in many ways, it's medicine's "fountain of youth." Unlike plastic surgeons, child psychiatrists can't superficially turn back the clock by erasing crow's feet or obliterating double chins. Instead, we work on a much deeper level.

I love working with children. But I chose child psychiatry over pediatrics because I preferred to focus on connecting with my patients interpersonally, rather than giving shots and holding them down to look in their ears.

Children, especially teenagers, have exciting, rapidly changing lives of promise, and working with them keeps me young. Most child patients, especially in this age of fragmented families, seem to value the chance to connect with a responsible adult.

I am always honored and humbled by how much of their inner lives they choose to share with me. My patients have also taught me more about *The Hunger Games* and "Team Edward vs Team Jacob" than I ever expected to learn. In no other field do you get to spend so much quality time with conscious patients.

As a child psychiatrist, you have the opportunity to successfully intervene at the first signs of mental illness. The success rate is astounding; I expect nothing less than for my patients to recover. Cases aren't always straightforward, like guessing what a flower will eventually look like by viewing the bud, but the hard work pays off with the reward of happy and functioning patients.

Child psychiatrists then have the privilege of growing up with their patients. Unlike in pediatrics, where patients are shown the door at age 18, my patients never age out; I have the option of also seeing adult, or even elderly patients, if I so choose. I've had patients whom I first evaluated in their early teens return a decade later for guidance on the safety of medications during pregnancy and breastfeeding.

Child psychiatry training follows adult psychiatry training (adding only 1 additional year to the total adult residency time when taken without interruption), and I have a deeper understanding of my adult patients because of this developmental perspective.

The variety in child psychiatry also keeps it fresh. A typical week may involve school consultations, delivering care over great distances through telepsychiatry (a secure, more high-tech version of Skype), learning about the latest developments in brain research, teaching medical students and residents, treating Medicaid patients at a rural or urban mental health center, and assisting local pediatricians with complicated cases.

As a child psychiatrist, you are needed and do valuable work. There is a severe shortage of child psychiatrists in the United States, and this means that all patients you care for as a child psychiatrist are technically "underserved" -- some more so than others. Because of the demand for child psychiatrists, your skills are highly marketable, and you should be able to

practice in any locale of your choosing with patients lining up around the block for your services.

Child psychiatry also is a chance for career renewal and rebirth for many physicians who didn't fully appreciate child psychiatry as a career option until after choosing a different specialty. I personally know scores of former surgeons, obstetricians, family doctors, pediatricians, and emergency medicine physicians who have switched into adult and child psychiatrists.

One reason for switching is that child psychiatrists have great self-care, with healthy schedules (similar to the 8 AM-to-5 PM work hours of the outside world) and low burnout. We are not anxiously counting down the days to retirement. As child psychiatrists, we recognize the importance of families and practice what we preach with our own family relations, achieving life balance. Others switch because child psychiatrists are trained to treat the types of chief mental health complaints that frequently first present to perplexed pediatricians and family doctors.

This career is not for everyone. I encountered a physician shortly before she left the field who told me, "I just don't like talking to patients." Child psychiatry, or most other fields requiring live patient interaction, was not the right fit for this individual. If you cannot live on a salary in the low 6 figures -- we don't make as much as the surgical specialties -- or if you thrive on performing hands-on procedures, then child psychiatry may not be a good fit. And if your main interest is psychotherapy, we still teach and perform that, but not as much as in the past.

The time demands and patient loads are reasonable in child psychiatry, but there are other challenges. I'm always asked, "Can you stand working with the parents?" Although some of the parents are difficult, most are great and provide invaluable assistance with their child's mental health care.

Occasionally your heart is broken -- a child is abused, or you get a call from the emergency department that your patient has overdosed -- and you need to remind yourself that you didn't cause these problems, but are doing your best to help. It's a small price to pay for a job where you care.

Child psychiatry is an emotionally and intellectually enriching career. It is a way to save the lives of patients without sacrificing your own. I strongly recommend that you learn more about child psychiatry so that you can make a fully informed decision when choosing a specialty for yourself. And please, pass along the secret.

Have more questions about child psychiatry? Ask them in our Medscape Connect med student [discussion forum](#).

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