

# RE: A Comparison of Performances of Consultant Surgeons, NCHDs and Medical Students in a modified HPAT examination

## Abstract:

Sir

Hot on the heels of the study on the profile of students who scored well in the UK Clinical Aptitude Test (UKCAT) carried out by Professor David James et al of Nottingham University<sup>1</sup> published in the British Medical Journal (white males from professional or managerial backgrounds with independent or grammar school education scored best marks) comes an interesting survey carried out on the Health Professionals Aptitude Test (HPAT) by members of the Departments of Surgery RCSI in Beaumont Hospital and at the Mater Misericordiae University Hospital<sup>2</sup>.

Consultants, Non-Consultant Hospital Doctors (NCHDs), 5th year medical students, 1st year Graduate Entry Students (GEP) and Integrated Graduate Entry Students had the HPAT test sprung on them one morning at five centres across the country. There was, therefore no time for preparation to take the multichoice test. While there were no statistical differences between the groups, the graduate entry students outperformed the other groups. These were the only people who would have done such a test before. Indeed, it is likely they had practiced such tests many times. Grind schools here and international studies exhort students to do so. It does improve results. It costs money to take the HPAT exam (€95). It costs a great deal of money to go to grind school HPAT courses (€ several hundred euro for two day courses. It costs even more money to repeat a year to try to get a better HPAT score. Graduate medical school entrants have to pay very high fees (€ 25,000 - 30,000) but we seem to have plenty of students seeking to take up these places, be they from well-off families or by means of a loan. (The latter is unlikely to be given to students from poorer families nowadays due to the perilous situation on our banks.) When I wrote on this issue in a letter in the Irish Times last year another correspondent castigated me for concentrating on the gender issue (€ I had said girls would be disadvantaged, which is true. He said students from lower socio-economic backgrounds would be discriminated against as well. He is right. We are both right which is very satisfactory. The only free of fees places are those for undergraduates. Girls and those from lower socio-economic backgrounds are now less likely to get these places. Well-off males are well represented in the graduate places already.

The Beaumont and Mater study ends by saying (€ The traits that are required to be a pathologist, surgeon or paediatrician are as varied as the traits required for any other profession and we would caution that the HPAT, as it stands does not allow for this diversity.€ Clever, poorer girls in particular will be kept out of medical schools. Is this what HPAT was designed to do?

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## References

1. D James, J Yates, S Nicholson. Comparison of A Level and UKCAT performance in students applying to UK medical and dental schools in 2006: cohort study. BMJ 2010; 340: c478.
2. A Quinn, MA Corrigan, J Broderick, G McEntee, ADK Hill. A Comparison of Performances of Consultant Surgeons, NCHD and Medical Students in a modified HPAT Examinations. Ir Med J. Vol 103: 172-3.

Comments: