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Changes in Physician Work Hours and Implications for Workforce Capacity, 2001 to 2021-Reply

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To the Editor:

We thank Drs. Chiu, Chiang, and Hsu for their thoughtful letter. They argue that the rapid growth of hospital medicine as a sub-specialty may account for the decreasing gender gap in weekly physician work hours that we identified in our study.¹

Our data, the Current Population Survey (CPS), lacks information on physician specialty, and so we were unable to analyze the impact of specialty or longer-term changes in specialty mix on physician work hours. However, we do not believe that the growth of specialization in hospital medicine is likely to explain our findings. Using our estimates of the total number of active physicians in the U.S. in 2019 as a denominator (945,320 million), hospitalists represented less than 5% of practicing physicians that year (approximately 44,037).² Approximately 36% of hospitalists are women,³ similar to the proportion of women (38.4%) across all physicians in our CPS data from 2019–2021. Given that only 1.8% of all U.S. physicians are women hospitalists, we think this small proportion is unlikely to explain the closing gender gap in physician work hours, a trend we also identified among non-physician holders of doctoral and professional degrees. We believe other explanations, such as changing attitudes toward work-life balance among Americans with doctoral and professional degrees, may be more likely drivers of our findings.

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