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PERSPECTIVE

Professional Exodus among Medicos: A Matter of Concern

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Abstract

The phenomenon of sudden professional dropout from the medical field is a multifaceted issue influenced by personal, systemic, and societal factors. Physicians and healthcare workers face unparalleled demands, including prolonged work hours, emotional exhaustion, and significant responsibility, which often contribute to burnout and work-life imbalance. The overwhelming academic pressure, parental and social expectations, limited opportunities at elite medical universities, job market challenges and economic inequality, high living costs and unattainable aspirations, rebellion against the work culture, disillusionment with social mobility and the influence of social media and pop culture lead to professional exodus

Keywords: Professional exodus, Burnout, Involution, Chokubi phenomenon, rotting

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Professional exodus metamorphosis that can happen at any time - during student days while working as a junior doctor or as a postgraduate student. Good and sincere medicos suddenly snap up, get tired of the rat race, and simply give up. In every batch of MBBS students, there will be some who keep on failing in semester exams and end up completing their 5-year MBBS course in 10 or more years, that too when their examiners get truly merciful. They have embraced this lifestyle of simply giving up and making no effort to improve their performance by studying, attending classes and clinics, and discussing their difficulties with teachers. classmates. This is also not typically an Indian phenomenon, in recent years, a growing number of young people in China have been embracing this lifestyle which they call 'bai lan', or "let it rot." This term reflects a mindset of giving up on societal expectations and opting out of the traditional rat race. It follows the earlier Chinese attitude called "tang ping," or "lying flat," a where individuals movement. minimalism and rejected overwork. The term bai lan, refers to the act of willingly stepping back from chasing certain goals after realizing they are simply too challenging to accomplish.

This trend of "rotting" among youth is a reaction to mounting societal pressures and economic challenges. This lifestyle reflects a conscious decision to give up on traditional success markers and societal expectations. A study found Internal medicine and family practice physicians accounted for more than 16,000 of the 71,309 doctors who left the field by 2022

[1]. Another study from Puerto Rico found that the island lost 46 % of doctors in 13 years [2]. There can be many causes of this

1. Overwhelming Academic Pressure

Our education system is one of the most competitive in the world, and young people often face immense stress from a very young age. 10-1200,000 students appear for JEE and only 10,000 get selected in 23 IITs of India. The NEET 2023 statistics show that there were 20,38,596 examinees out of 20,87,462 registered candidates for 41,388 government medical college seats and 76,928 private seats [3]. Students spend years in preparation, often sacrificing social lives and personal growth. For many, failing to excel can feel like a permanent setback. leaving them disillusioned and burned out.

2. Parental and Societal Expectations

Indian parents often place immense pressure on their children to succeed academically, viewing education as the primary pathway to upward mobility. This high-stakes environment creates a "sink or swim" mentality.

3. Limited Spots at Elite Medical Universities

With millions of students competing for a small number of spots at top-tier medical universities, many feel they are stuck in an unforgiving system that rewards only a select few. For those who fail to meet these expectations, embracing "rotting" can be a way of rejecting the unrealistic demands placed on them. The National Eligibility cum Entrance Test-Post

graduation (NEET PG) 2024 saw a total of 2,16,136 candidates appearing from 416 centers spread across 170 cities in 31 states for just 70,645 postgraduate seats.

4. Job Market Challenges and Economic Inequality

Even for those who excel academically, the transition to the workforce presents its own set of hurdles.

- (a) Hyper-Competitive Job Market: Medical College graduates often find themselves competing for a shrinking pool of desirable jobs in government hospitals or in corporate hospitals. Many are left underemployed or working in jobs far below their qualifications. Those with overseas university degrees find it even more difficult to compete. This leaves many young people feeling pessimistic about their future prospects.
- (b) Rise of "Involution": This is a term that has gained popularity in China, and it describes a situation where individuals are forced to work harder without achieving meaningful progress or rewards [4]. There is not enough value for the effort they are putting in. Many workers feel trapped in a cycle of overwork and diminishing returns. These economic pressures lead many young people to adopt "rotting" as a form of silent protest or a way to cope with the frustration of an unfair system.
- (c) Economic inequality: When medical graduates look back at their schoolmates, and find that those who fared poorer than them academically, and could not get through the tough medical entrance

test, are faring much better economically and enjoying a better-quality life, they feel frustrated and disillusioned. This can be the inception of 'rotting'.

5. High Living Costs and Unattainable Aspirations

Young doctors are increasingly finding it difficult to achieve traditional milestones of success, such as owning property, starting a family, or building a stable career due to compensation dissatisfaction [5].

- (a) Skyrocketing Housing Prices: In major cities like Delhi, Mumbai, Bangalore and Chennai real estate prices have soared, making homeownership virtually unattainable for many young people. The high cost of living adds further strain.
- (b) Cultural Norms and Family Pressure: In Indian culture, owning property and achieving financial stability are often prerequisites for marriage. Many young doctors feel unable to meet these expectations, leading to frustration and disengagement.
- (c) Delayed Life Milestones: As a result of these pressures and wanting to achieve more in life, more young doctors are delaying marriage and parenthood, choosing instead to focus on their immediate personal needs or simply opting out of the system altogether. The rotting" mindset can be seen as a rejection of the societal narrative that links happiness and self-worth to material achievements.

6. Rebellion against the Work Culture

Junior doctors in India have no fixed working hours, and duty hours can often stretch to 36 hours with very little relaxation time in between. This has faced increasing backlash in recent years about the workplace culture due to the health care worker shortage [6].

- (a) Exhaustion and Burnout: Overcrowded government hospitals and busy corporate hospitals demand grueling work hours, leaving junior doctors with little time or energy for personal pursuits. Burnout is rampant, leading these young doctors to question whether such sacrifices are worth it.
- (b) Limited Rewards for Hard Work:

 Despite their best efforts in an understaffed hospital, many doctors feel they are not adequately compensated.

 Stagnant wages, coupled with rising living costs, create a sense of futility.
- (c) Cultural Shift: The younger generation of doctors are increasingly unwilling to prioritize work over their well-being. Thev are challenging the older generation's emphasis on self-sacrifice and instead embracing a mindset of selfminimalism. care and "Rotting" represents a rebellion against this toxic work culture, prioritizing mental health and personal contentment over relentless ambition.

7. Disillusionment with Social Mobility

The promise of upward mobility—a cornerstone of India's economic boom in previous decades—now feels out of reach for many junior doctors. They feel their

classmates from school, who chose other professions, are earning much more, and the exalted stature that the doctor once had in society is also not to be seen, particularly if one is not economically well off.

- (a) Income Inequality: The wealth gap in India has widened significantly. Young doctors from middle- and lower-income families often feel that their chances of improving their socioeconomic status are slim if they do not get a good consultant position.
- (b) Perceived Futility: With societal structures favoring the wealthy and well-connected, many feel that hard work and talent are no longer enough to succeed in the medical world.
- (c) Generational Differences: Previous generations grew up in a time when there was enormous respect and reverence for doctors. Today's doctors face a much more stagnant and uncertain landscape. Physical violence and verbal aggression against them are common as the newer generation of patients are prepared to spend money but expect a guaranteed cure. Faced with these realities, "rotting" offers a way to disengage from what feels like an inherently unfair system.

8. Influence of Social Media and Pop Culture

Social media platforms like WhatsApp, Facebook and X have amplified the "rotting" mindset, allowing young doctors to share their frustrations and form communities.

- (a) Collective Identity: Online forums provide spaces where individuals can commiserate and validate each other's feelings of disillusionment, normalizing the choice to "rot."
- (b) Satirical Content: Memes, videos, and other content mocking societal pressures have become hugely popular, spreading awareness of movements like "bai lan" and "lying flat" (tang ping).
- (c) Cultural Heroes: It is trendier to be Munnabhai MBBS than a serious doctor in social media. The rise of minimalist lifestyles in pop culture—such as characters who reject societal norms—has also inspired young people to question traditional paths to success.

9. Impact of the COVID-19 Pandemic

The pandemic has accelerated disillusionment among India's young doctors. They had risked their lives and helped the country to fight the pandemic with the sincerity of soldiers guarding the frontiers of our country, but they feel they were not duly rewarded. They now have time to reflect on their lives and question their priorities. Was it worth risking our lives for a society of people who still abuse us at the flimsiest pretext, they wonder. This introspection often led to a reevaluation of societal norms. Those young doctors who had started new practices felt the economic brunt of unpaid mortgages and are yet to recover from it. The pandemic also shone a spotlight on the importance of mental health, prompting many to prioritize their wellbeing over external achievements.

The Way out of the problem

This attitude of giving up and rot is very dangerous and potential threat to economic growth and social stability. In Japan, the aging population, low birth rates, and economic pressures is forcing young physicians to choose non-insured aesthetic medicine immediately after their mandatory 2-year residency, thereby bypassing further training in other specialties, a phenomenon known as 'Chokubi phenomenon' [7]. Efforts are urgently required to address the underlying issues, such as implementing policies aimed at reducing work hours and promoting mental health awareness and government appreciation of the junior doctors for their contribution to fighting the Covid pandemic. A preferential selection for post-graduate degree or diploma courses may be very encouraging. Workplace security and stringent government laws for the safety and security of junior doctors and a secure and safe working environment for them is mandatory.

The "rotting" phenomenon among our young doctors is a multifaceted response to the immense academic, economic, and cultural pressures they face. It reflects a broader reevaluation of values, with the younger generation starting to prioritize personal fulfillment, mental health, and work-life balance that makes sense to them over the traditional markers of success. While it has not yet sparked concern among older generations and the government, "rotting" highlights a growing demand for systemic change in our social and economic structures. Only the future will tell if that change is coming in this burnout and

stressed toxic culture for the medical fraternity.

Authors Contribution

Conception and design of the study – SB, NB; Acquisition of data- SB, NB, NB; Brafting of the article – KB, NB, NB, SB; Critical revising – SB, NB; Final approval- KB, NB, NB, SB

Statements and Declarations Conflicts of interest

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