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Title

Predictors for success and failure in international medical graduates: a systematic review of prognostic factor studies

Priority 1 (Research Category)

Systematic review, meta-analysis, or scoping review

Presenters

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Abstract

Introduction

International Medical Graduates (IMG) are an essential part of the international physician workforce, and exploring the predictors of success and failure for IMGs could help inform international and national physician labour workforce selection and planning.

Method

We searched 11 databases, including Medline, Embase and LILACS, from inception to February 2022 for studies that explored the predictors of success and failure in IMGs. We reported baseline probability, effect size in relative risk (RR), odds ratio (OR) or hazard ratio (HR) and absolute probability change for success and failure across six groups of outcomes, including success in qualifying and certificate exams, successful matching into residency, retention in practice, disciplinary actions, and outcomes of IMG clinical practice.

Result

Twenty-five studies (375,549 participants) reported the association of 93 predictors of success and failure for IMGs. Female sex, English proficiency, graduation recency, higher scores in USMLE step 2 and participation in a skill assessment program were associated with success in qualifying exams. Female sex, fluency in English, previous internship and results of qualifying exams were associated with success in certification exams. Retention to work in Canada was associated with several factors, including male gender, graduating within the past five years, and completing residency over fellowships. In the UK, IMGs and candidates who attempted PLAB part 1, ≥4 times vs first attempters, and candidates who attempted PLAB part 2, ≥3 times vs first attempters were more likely to be censured in future practice.

Patients treated by IMGs had significantly lower mortalities than those treated by US graduates, and patients of IMGs had lower mortalities [OR: 0.82 (95% CI: 0.62, 0.99)] than patients of US citizens who trained abroad.

Conclusion

This study informed factors associated with the success and failure of IMGs and is the first systematic review on this topic, which can inform IMG selection and future studies.