Endocrinology / Metabolism Profile

Updated
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General information

Endocrinology and Metabolism is the branch of medicine concerned with the study of the diseases of the endocrine organs, disorders of hormone systems and their target organs, and disorders of the pathways of glucose and lipid metabolism. It encompasses the assessment of patients with such disorders and the use of laboratory methods for diagnosis and monitoring of therapy. It also encompasses knowledge of endocrine physiology, particularly regarding normal control of hormone secretion and action.

Endocrinology and metabolism is a subspecialty of internal medicine. The practice involves the assessment, diagnosis and treatment of patients with diseases of the endocrine glands, disorders of hormone systems and their target organs, and disorders of metabolism.

Source: Pathway evaluation program
General information

Endocrinologists take care of many conditions including:

- diabetes
- thyroid diseases
- metabolic disorders
- over/under production of hormones
- Menopause
- Osteoporosis
- hypertension
- cholesterol (lipid) disorders
- infertility
- lack of growth (short stature)
- cancers of the endocrine glands

This specialty also encompasses the use of laboratory methods for the diagnosis and monitoring of therapy. Endocrinology and metabolism is an intellectually challenging specialty and the patient population is diverse with respect to age, range of diseases and degree of illness. The research orientation of the practice attracts physicians with an interest in science rather than those who prefer more “hands-on” practice.

Source: Pathway evaluation program
General information

After completing medical school, to become a specialist in endocrinology and metabolism requires an additional 6 years. Candidates must first be certified or enrolled in an Royal College-approved training program in internal medicine or pediatrics. All candidates must be certified in their primary specialty in order to be eligible to write the Royal College certification examination in endocrinology and metabolism. Once certified in either of these, physicians must then go on to complete an additional 2 years of approved residency in adult or pediatric endocrinology and metabolism. Training must incorporate the principle of graded responsibility.

For further details on training requirements please go to:
Royal College of Physicians and Surgeons of Canada
Canadian Society of Endocrinology & Metabolism

Source: Pathway evaluation program
## Total number & number/100,000 population by province, 2019

<table>
<thead>
<tr>
<th>Province/Territory</th>
<th>Physicians</th>
<th>Phys/100k pop’n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newfoundland/Labrador</td>
<td>8</td>
<td>1.5</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>12</td>
<td>1.2</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>5</td>
<td>0.6</td>
</tr>
<tr>
<td>Quebec</td>
<td>180</td>
<td>2.1</td>
</tr>
<tr>
<td>Ontario</td>
<td>231</td>
<td>1.6</td>
</tr>
<tr>
<td>Manitoba</td>
<td>15</td>
<td>1.1</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>9</td>
<td>0.8</td>
</tr>
<tr>
<td>Alberta</td>
<td>68</td>
<td>1.6</td>
</tr>
<tr>
<td>British Columbia</td>
<td>61</td>
<td>1.2</td>
</tr>
<tr>
<td>Territories</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>CANADA</td>
<td>589</td>
<td>1.6</td>
</tr>
</tbody>
</table>

Source: 2019 CMA Masterfile
Number/100,000 population, 1995 to 2019

Source: 1995-2019 CMA Masterfiles
Number by gender & year, 1995 to 2019

Source: 1995-2019 CMA Masterfiles
Percentage by gender & age, 2019

Gender
- Male: 39%
- Female: 61%

Age Group
- < 35: 29%
- 35 - 44: 20%
- 45 - 54: 13%
- 55 - 64: 30%
- 65+: 8%

Excludes those where gender or age is unknown.
Source: 2019 CMA Masterfile
Number by gender & age, 2019

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>65+</td>
<td>22</td>
<td>50</td>
</tr>
<tr>
<td>55-64</td>
<td>49</td>
<td>62</td>
</tr>
<tr>
<td>45-54</td>
<td>107</td>
<td>59</td>
</tr>
<tr>
<td>35-44</td>
<td>133</td>
<td>37</td>
</tr>
<tr>
<td>&lt;35</td>
<td>40</td>
<td>6</td>
</tr>
</tbody>
</table>

Excludes those where gender or age is unknown.

Source: 2019 CMA Masterfile
Percentage by main work setting, 2019

- **Academic Health Sciences Centre**: 44%
- **Private Office/Clinic**: 29%
- **Non-AHSC Teaching Hospital**: 7%
- **Other**: 7%
- **Community Clinic/Health-centre**: 4%
- **Community Hospital**: 2%
- **University**: 2%

Source: 2019 CMA Physician Workforce Survey. Canadian Medical Association
Percentage by practice organization, 2017*

- **Solo Practice**: 63%
- **Group Practice**: 4%
- **Interprofessional Practice**: 12%
- **Hospital-based Practice**: 21%
- **NR**: 0%

*Most recent available data for this specialty

Source: 2017 CMA Workforce Survey. Canadian Medical Association
# Hours worked per week (excluding on-call), 2019

<table>
<thead>
<tr>
<th>Activity</th>
<th>Hours worked per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct patient care without teaching component</td>
<td>19.1</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>7.0</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>2.4</td>
</tr>
<tr>
<td>Indirect patient care</td>
<td>9.2</td>
</tr>
<tr>
<td>Health facility committees</td>
<td>1.1</td>
</tr>
<tr>
<td>Administration</td>
<td>2.6</td>
</tr>
<tr>
<td>Research</td>
<td>4.7</td>
</tr>
<tr>
<td>Managing practice</td>
<td>1.1</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>2.5</td>
</tr>
<tr>
<td>Other</td>
<td>0.5</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>50.3</strong></td>
</tr>
</tbody>
</table>

Source: 2019 CMA Physician Workforce Survey. Canadian Medical Association
On-call duty hours per month, 2019

- 70% provide on-call services
- On-call hours = 98 hours/month*
- On-call hours spent in direct patient care = 27 hours/month**

Source: 2019 CMA Physician Workforce Survey. Canadian Medical Association
*Source: 2017 CMA Workforce Survey. Canadian Medical Association
**Most recent available data for this specialty
Percentage by remuneration method

Primary payment method\(^1\) in 2017

- 35% 90% + fee-for-service
- 47% 90% + salary
- 11% 90% + other\(^*\)
- 7% Blended
- 0% NR

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Average gross payment per physician for Internal Medicine & subspecialties in 2017/18 (those earning at least $60,000) = $437,000\(^2\)

Average percent overhead reported by Endocrinology/Metabolism specialists in 2017 = 20%\(^3\)

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*Other includes capitation, sessional, contract and other methods

\(^1\) 2017 CMA Workforce Survey. Canadian Medical Association
\(^2\) National Physician Database, 2017/18, CIHI
\(^3\) 2017 CMA Workforce Survey. Canadian Medical Association
Professional & work-life balance satisfaction, 2019

Balance of personal & professional commitments

- Dissatisfied or very dissatisfied: 33%
- Neutral: 24%
- Satisfied or very satisfied: 42%

Current professional life

- Dissatisfied or very dissatisfied: 11%
- Neutral: 16%
- Satisfied or very satisfied: 73%

Source: 2019 CMA Physician Workforce Survey. Canadian Medical Association
Number of retirees during the three year period of 2016-2018

Source: CMA Masterfile – year over year comparisons

Note: “Retired” is based on giving up licence and therefore excludes those who have retired from clinical practice but are still licensed; those younger than 45 may include physicians who have temporarily given up their licence but return to practice at a later date.
Employment situation, 2017

- Overworked in my discipline
- Employed in my discipline to my satisfaction
- Underemployed in my discipline
- Not employed in my discipline
- No response

Source: 2017 CMA Workforce Survey. Canadian Medical Association
Links to additional resources

- Association of Faculties of Medicine of Canada
- Canadian Institute for Health Information
- Canadian Medical Association’s Physician Data Centre
- Canadian Post-MD Education Registry (CAPER)
- College of Family Physicians of Canada
- National Physician Survey (2004-2014)
- Royal College of Physicians and Surgeons of Canada