

Dual-Physician Marriages: Understanding the Challenges and Rewards



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RESIDENT PEARL

- As more physicians marry other physicians, there is an increasing need to understand the challenges and rewards of these relationships.

Dual-physician couples face challenges achieving synchronization imposed by careers in medicine, such as decreased autonomy over work schedules and training locations, and may have more difficulty achieving work-life balance in their relationships. The benefits of medical marriages are multifold and include increased satisfaction, stability, financial security, shared passions, and mutual understanding.

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Dual-physician marriages are becoming increasingly common. The estimated median age of first marriage has been increasing; the US Census Bureau reported a median age of 30.4 years for men and 28.6 years for women in early 2021.¹ According to the Association of American Medical Colleges 2020 Matriculating Student Questionnaire, the median age at matriculation for medical students was 23 years (N=16,956), and 92.4% (N=15,932) reported their marital status as single and never legally married.² Thus, it is likely that the majority of physicians get married at some point during medical school or residency training. A survey of over 10,000 physicians in more than 29 specialties showed that 24% of female physicians and 15% of male physicians are married to other physicians.³

Challenges

There are common challenges to all dual-career households, including coordinating demanding career schedules that compete with each other, balancing childrearing with career advancement, and harmonizing economic and personal goals. However, there are challenges that can be amplified in and unique to dual-physician marriages.

The Couples Match—Medical students, trainees, and even physicians in later stages of their careers may have less autonomy over their schedules compared to professionals in other fields. An early obstacle that many dual-physician marriages must overcome is navigating the National Resident Matching Program as a couple. The number of individuals participating as a couple in the 2022 Main Residency Match was 2444, and the postgraduate year 1 (PGY-1) match rate for individuals participating as a couple was 93.7%. The overall PGY-1 match rate for MD seniors in the United States was 92.9%.⁴ Thus, entering the match as a couple does not necessarily pose a disadvantage to successfully matching, but these statistics may be misleading. When applicants participate in the Match as a couple, their rank order lists form pairs of program choices that are processed by the matching algorithm to match the couple to the most preferred pair of programs on their rank order lists where each partner has been offered a position. Although many couples coordinate their rank order lists geographically, there is no guarantee that the couple will actually match together in the same city, let alone in the same time zone. Also, the statistics do not take into account if an individual in the couple is only partially matched (eg, if one applicant matches to a preliminary year position but not to an advanced dermatology position). The

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couples' Match is only available to partners in the same application cycle, and couples that are not in sync may be more restricted when applying for residency positions.

Lack of Synchronization—Dual-physician couples are challenged to achieve synchronization not only in their day-to-day lives but also over the course of their careers. After matching to residency, the dual-physician couple faces additional scheduling stressors during training. Varied demanding patient schedules and competing call schedules may take a toll on the ability to spend time together. Coordination between both training programs to ensure weekend schedules and vacations are aligned can be helpful to try to maximize time together. If the couple's education is staggered, their training schedules may not align when proceeding to fellowship or starting off with a new job as an attending. It is not uncommon for couples in medicine to be long-distance for a period of time, and partners may find themselves sacrificing ideal positions or self-restricting application to certain programs or jobs to secure a position near a partner who is already in training in a certain geographic location.

Domestic Work-Life Balance—Juxtaposing 2 highly demanding careers in the same household can be associated with certain tensions, as the weight of household and childrearing responsibilities as well as professional productivity and advancement is divided by the couple. In a 2008 survey of the American College of Surgeons on burnout, work-home conflict, and career satisfaction, surgeons in dual-physician relationships experienced a recent career conflict with their domestic partner and a work-home conflict more often than surgeons whose partners were working nonphysicians.⁵ The hours worked between men and women in dual-physician families differed according to a national sample of 9868 physicians in dual-physician relationships. The study showed that weekly hours worked by women with children were lower than among those without children, whereas similar differences were not observed among men.⁶ It is not understood if this suggests that women in dual-physician families work fewer hours due to the pressures of historical gender norms and increased household responsibilities. A 1988 survey of female physicians (N=382) in which 247 respondents indicated that they had domestic partners showed that women physicians whose partners also were physicians (n=91) were more than twice as likely to interrupt their own careers for their partners' careers compared to female physicians whose partners were not physicians (n=156) (25% vs 11%, respectively). In contrast, the male partners who were not physicians were significantly more likely to interrupt their careers than male partners who were physicians (41% vs 15%, respectively, $P<.05$).⁷

Divorce—There have been mixed reports on the incidence of divorce in physicians compared to the general population, but studies suggest that physicians' marriages tend to be more stable than those of other societal groups.⁸ Of 203 respondents of a survey of female

physician members of the Minnesota Medical Association who were or had been married to another physician, 11.3% (22/203) were divorced, and medicine was reported to play a role in 69.6% of those separations.⁹ A retrospective analysis of nationally representative surveys by the US Census showed that divorce among physicians is less common than among non-health care workers and several other health professions.¹⁰

Rewards

The benefits of medical marriages are multifold and include increased job satisfaction, stability, financial security, shared passions, and mutual understanding. Common passions and interests form the foundation for many relationships, which is true for the dual-physician marriage. In a 2009 study, Perlman et al¹¹ performed qualitative interviews with 25 physicians and their partners—10 of which were in dual-physician relationships—about the challenges and strengths of their relationships. A key theme that emerged during the interviews was the acknowledgment of the benefits of being a physician to the relationship. Participants discussed both the financial security in a physician marriage and the security that medical knowledge adds to a relationship when caring for ill or injured family members. Other key themes identified were relying on mutual support in the relationship, recognizing the important role of each family member, and having shared values.¹¹

Financial Security—The financial security attributed to being in a medical marriage was highlighted in a series of interviews with physicians and their spouses.¹¹ A cross-sectional survey of a random sample of physicians showed that both men and women in dual-physician families had lower personal incomes than physicians married to nonphysicians. However, men and women in dual-physician families had spouses with higher incomes compared to spouses of physicians married to nonphysicians. Thus, the total family incomes were substantially higher in dual-physician households than the family incomes of physicians married to nonphysicians.¹²

Satisfaction—Dual-physician marriages benefit from a shared camaraderie and understanding of the joys and sacrifices that accompany pursuing a career in medicine. Medical spouses can communicate in mutually understood medical jargon. Compared to physicians married to non-physicians, a statistically significant difference ($P<.001$) was found in physicians in dual-physicians families who more frequently reported enjoyment in discussing work with their spouses and more frequently reported satisfaction from shared work interests with their spouses.¹²

Final Thoughts

From the start of medical training, physicians and physicians-in-training experience unique benefits and challenges that are compounded in distinctive ways when 2 physicians get married. In an era where dual-physician marriage is becoming more common, it is important to

acknowledge how this can both enrich and challenge the relationship.

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