Letter to the Editor:
Re-starting the gastroenterology match

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To the Editor: Now that Congress has passed and the president has signed legislation clarifying that the NRMP does not violate antitrust laws (1), and now that the lawsuit against the match has been dismissed (2) (although appeals and other legal skirmishing remain), the debate about whether to reinstate the match can focus on the merits, and how best "to attract the best...without pressure or coercion"(3).

Pardi (4), and Lim and Shah (5) both reflect on the benefits of the match, as found by comparing the fellowship recruiting process when the match was in operation to the market for gastroenterology fellows before the match was instituted, and after its demise (6,7). During the years the match was in operation, gastroenterology fellows had more mobility than before or since. And since the demise of the match, offers have become earlier and more dispersed, giving potential fellows fewer choices and less time for decisions than in internal medicine subspecialties that continue to use a match (but without a substantial effect on salaries).(7,8,9,10).

Both letters also suggested that an interim step that would achieve some of the benefits of the match while the lawsuit played out (and until consensus can be established), would be to fix dates before which offers of fellowships should not be made, and times at which interviews and offers might be coordinated, to give applicants adequate time to make informed career decisions. Now that the legal status of the match has been clarified, such an interim step might not be necessary.

Equally important, the lessons of other markets strongly suggest that most of the benefits of the match cannot be achieved and sustained in this way.

For example, for several years prior to the beginning of the National Resident Matching Program in 1951 (then called the National Intern Matching Program), the market for interns was organized by a series of dates before which offers could not be made, and durations for which offers had to remain open. That market eventually deteriorated to one in which interns faced exploding offers and hasty, limited decisions (11, 12). (Gastroenterology itself had a similar experience. Before the adoption of a match, there
was a period in which guidelines were set for interviews and offers, and it was the failure of this system that led to the adoption of the gastroenterology match. (13)). More recently, the market for clinical psychology interns was organized by a date on which all offers should be made, and it deteriorated into a chaotic market in which applicants were pressured to signal in advance which offers they would accept (14), and from 1999 it adopted a centralized match (http://www.appic.org/match/index.html). And, as we speak, the market in which law graduates are hired by federal appellate judges as law clerks has been trying to regulate itself via a set of dates, the eighth such attempt in the last 30 years (15, 16,), each of which has collapsed under a barrage of exploding offers made despite attempts to prevent them.

The match for residents, the matches for fellowships in other specialties, and the prior history of the gastroenterology match suggest that a well organized match can relieve the problems currently facing the market for gastroenterology fellows. The collapse of the gastroenterology match, in response to the unusual events beginning in 1996 (7), deprived fellowship programs and potential fellows of that relief, and led to the re-emergence of the problems that led to the creation of the match. Now that the legal challenge to the match has been dismissed, gastroenterologists have the opportunity to restore order to the market by taking steps to re-start the match.

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