Balancing Act: Married in Medicine

What happens to career paths when AAN member neurologists marry other doctors? Ganesh Asaithambi, MD, and Kavisha Shah, MD, can tell you. When they met in medical school, they were three years apart academically. Their union would result in marriage, a search for aligned career opportunities, relocations, time away from one another, and a son, now age two. But in the face of decisions and changes, Asaithambi, a stroke neurologist based partly in St. Paul, MN, at United Hospital, and Shah, a pediatrics fellow at Arkansas Children’s Hospital in Little Rock, have stayed focused on their respective career targets. Their strategies have included a nanny, two sets of nearby grandparents, and doses of realism and compromise.

“We’re both very goal-oriented and had these high aspirations,” explains Asaithambi. Even as he balances a rotating schedule that brings him to Minnesota one week a month while his wife completes her pediatric fellowship near their Arkansas home, Asaithambi says there was never a “‘My career goals take precedence over yours’ mentality. There are sacrifices here and there,” he says, “but ultimately we were both able to get what we wanted.”

The couple’s challenges mirror those of other physician duos who seek residencies, fellowships, and professional positions—then have to make decisions about couple time, having children, where they’ll live and, perhaps, whose career takes precedence. When erratic, seemingly ceaseless work hours are added to the mix, it can be daunting to talk about these issues, much less plan for them. Spousal empathy, support and sacrifice help. So, too, do help and wisdom from family, friends, and colleagues. With these elements, what looks impossible can be doable.

Take, for example, Alexis Lizarraga, MD, and Karlo Lizarraga, MD. They began their engagement with a separation of 1,500 miles while Alexis finished her first fellowship. Now they are both at the University of Miami (UM), where she’s a neuroimmunology fellow and he’s a fourth-year resident due to start a neurophysiology fellowship in 2016. Alexis says the couple has made the decision not to be separated again, which means that each may face limitations in their options for future work and training. Last year, she returned from Boston for Karlo; then Karlo pursued a UM fellowship to be with his wife. If they had not been romantically attached, says Alexis, Karlo likely would have applied at other places as well.

Even so, Alexis doesn’t necessarily count the limitations as a disadvantage to their careers. “When you’re compelled to think narrowly and geographically, a lot of opportunities can arise that you don’t expect,” she notes. At UM, they’re subspecializing in areas she says are vital to their current department. Alexis also is serving as an instructor at the school; like her spouse, she’s leaning towards academic neurology for her career path. The Lizarragas hope that when Karlo pursues his second fellowship—in movement disorders, at a location to be determined—their “two-for-one” package will again be an asset, depending on an organization’s needs.

Currently, Alexis is further along career-wise than Karlo, but when children enter the picture, she plans for her husband’s career to take priority. Their timeline for children is uncertain, partly because their families aren’t nearby. “Karlo and I have had some talks,” she says. “It’s very intimidating to have full-time jobs in academic neurology and have no family support. I think it is affecting our choices.”

However, Alexis says, their mutual emotional support—the ability to relate to the stresses of the day—is plentiful. “There is a lot more understanding in general when one of you says, ‘Okay, honey, I’m not going to be home until 8:00 tonight,’” she says.

Sleep medicine fellow Rachel Ziegler, MD, agrees that mutual support is key. It’s an even more precious commodity since she and her husband, fifth-year University of Minnesota orthopedics resident Jacob Ziegler, had a daughter last year. Now expecting their second child, they say their main hurdle is finding quality childcare and unearthing family time amidst long, disordered hours.

Direct conversation between her and her husband, she explains, lays the foundation for their decisions: “How much call do I take? How chaotic do I want my hours to be?” says Ziegler, who’s with Hennepin County Medical Center in Minneapolis. “Jake and I take a lot of time talking through things if our plans change, or if we want to make a career move. Overall, we are very supportive of each other. It’s easier for us than people would imagine.”
Perhaps that is because the couple chose to wait until Rachel’s residency ended to start a family, to ensure sufficient parenting time. The two also wanted one of them to have a fairly consistent schedule, which influenced Rachel’s choice of sleep medicine, while Jacob shelved a trauma subspecialty pursuit due to its frenzied hours. Her schedule is more stable, so she usually makes the “daycare runs.” Their provider is an extended family member who expects occasional tardiness—a lifesaver since the Zieglers lack other family nearby. “We’re very fortunate,” she says.

It’s an arrangement that will need to shift not long after their second child is born. That’s because Jacob will begin a joint replacement fellowship in August at New York University, where Rachel is exploring a medical simulation fellowship. Based on recommendations from medical professionals in New York City, the couple has opted to find a full-time, live-in nanny, either arranging for someone in Minneapolis to go with them, or hiring someone once they’re settled. Whether or not Rachel lands an NYU fellowship, she’ll accompany her husband while he completes his training. “While I definitely hold my career as having high priority, right now being a parent is the biggest priority,” she says.

This pattern of making tough decisions is a common theme among couples with dual medical careers, often providing valuable clarity for the partnership. “Assess what’s important,” is Alexis Lizarraga’s advice to other physician couples. “Move forward with the plan, and don’t doubt your decisions.”

Those decisions may involve sacrificing—what Asaithambi calls an important concept among couples pursuing medical careers. His wife, he says, sacrificed when she accepted a residency in Florida to be with him during his fellowship, moving away from her close-knit family in the process. Now, he sacrifices by traveling back and forth for his job between Little Rock and St. Paul.

“I’m doing that to ensure that she is getting the best training where she wants to do it, where she fits best,” he explains. “You want to ensure the success of the person you care about, that they are as successful at pursuing their dreams. Ultimately, it’s a very intricate balance between two people. You want to do everything you can for your career, but you’re going to have a life outside of it.” •