



Trends in Gender Representation at US Dermatology Grand Rounds (2000-2025): A Cross-Sectional Study

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Introduction

Over the last two decades, female dermatology trainees have outnumbered male trainees. However, women are still underrepresented in academic leadership positions [1]. Grand rounds (GRs) are forums for showcasing research and clinical insights, playing an important role in career advancement. Gender disparities among GR speakers have been reported in cardiology and orthopedic surgery [2,3]. Therefore, we sought to evaluate gender representation of dermatology GR speakers in the United States to determine alignment with current dermatologist gender distribution.

Findings

Dermatology residency programs listed in the American Medical Association's FRIEDA directory were reviewed for publicly available GR records 1/2000-2/2025. Speaker

demographics and lecture topics were collected from program websites. Publication number was determined by PubMed search prior to lecture date. Comparisons between speaker genders were performed using Chi-square or Fisher's exact test.

Overall, 1380 lectures were included in our analysis, with 826 (59.9%) delivered by male speakers and 554 (40.1%) by female speakers. The proportion of female speakers increased from 33.2% to 58.5% between 2016–2020 and 2021–2025, respectively ($P<0.001$). Male vs. female speakers more often held senior academic positions, including Chair (20.3% vs. 3.8%) or Professor (34.7% vs. 28.3%) (both $P<0.001$) and had greater publication numbers (59.3% vs. 37.7% above median, $P<0.001$). There was a greater proportion of female vs. male speakers in the West (25.8% vs. 17.9%) and Northeast (43.1% vs. 39.2%) but lower in the Southwest (9.8% vs. 21.7%) (all $P<0.001$) (Table 1).

Table 1. Speaker Characteristics for Male and Female Speakers.

Characteristic	Male Speakers	Female Speakers	P Value
No. of lectures	826 (59.9%)	554 (40.1%)	
Speaker academic rank			<0.001
• Assistant professor	193 (23.4%)	182 (32.9%)	
• Associate professor	112 (13.6%)	144 (26.0%)	
• Professor	287 (34.7%)	157 (28.3%)	
• Chair	168 (20.3%)	21 (3.8%)	
• Other	66 (8.0%)	50 (9.0%)	
Speaker field			<0.001
• General dermatology	647 (78.3%)	388 (70.0%)	
• Pediatric dermatology	17 (2.1%)	41 (7.4%)	
• Surgical dermatology	42 (5.1%)	40 (7.2%)	
• Dermatopathology	20 (2.4%)	13 (2.4%)	
• Medicine	40 (4.8%)	29 (5.2%)	
• Pediatrics	4 (0.5%)	4 (0.7%)	
• Other	56 (6.8%)	39 (7.0%)	
Speaker publications			<0.001
• < total median	336 (40.7%)	345 (62.4%)	
• ≥ total median	490 (59.3%)	209 (37.7%)	
Speaker region			<0.001
• Northeast	324 (39.2%)	239 (43.1%)	
• Southwest	179 (21.7%)	54 (9.8%)	
• West	148 (17.9%)	143 (25.8%)	
• Southeast	103 (12.5%)	64 (11.6%)	
• Midwest	64 (7.8%)	49 (8.8%)	
• International	8 (1.0%)	5 (0.9%)	
Lecture topics			<0.001
• Medical dermatology	159 (19.2%)	100 (18.1%)	
• Oncodermatology	76 (9.2%)	53 (9.6%)	
• Hair/nail disorders	9 (1.1%)	24 (4.3%)	
• Dermatopathology	121 (14.6%)	64 (11.6%)	
• Pediatric dermatology	10 (1.2%)	23 (4.2%)	
• Social	175 (21.2%)	85 (15.3%)	
• Patient cases	39 (4.7%)	11 (2.0%)	
• Other	237 (28.7%)	194 (35.0%)	
Lecture year			<0.001
• 2000-2005	2 (0.2%)	0 (0.0%)	
• 2006-2010	6 (0.7%)	2 (0.4%)	
• 2011-2015	67 (8.1%)	44 (7.9%)	
• 2016-2020	364 (44.1%)	184 (33.2%)	
• 2021-2025	387 (46.9%)	324 (58.5%)	

Female vs. male speakers more often lectured on pediatric dermatology (4.2% vs. 1.2%) and less often on quality improvement, innovation, and health systems (6.5% vs. 14.8%) (all $P < 0.001$) (Figure 1). A greater proportion of female vs. male speakers were pediatric dermatologists (7.4% vs. 2.1%, $P < 0.001$) (Table 1).

We showed an increase in representation of female dermatology GR speakers over the study period, with female vs. male speakers having lower academic rank and fewer publications. Similarly, in a cross-sectional study of 3806 cardiology GRs, female vs. male speakers less often held senior academic positions (37.9% vs. 45.3%, $P < 0.001$) [3].

Furthermore, a review of dermatology journals reported that female editors comprised only 22% of editorial board positions [4].

We also identified a greater proportion of female vs. male speakers from the West and Northeast. Notably, a cross-sectional study including 11,911 dermatologists reported a tendency for female dermatologists to cluster in counties with more equal female to male earning ratios ($r = +0.11$, $P < 0.001$), which may partially explain our findings [5]. In addition, a greater proportion of female vs. male speakers were pediatric dermatologists, and females spoke more frequently on pediatric dermatology, consistent with

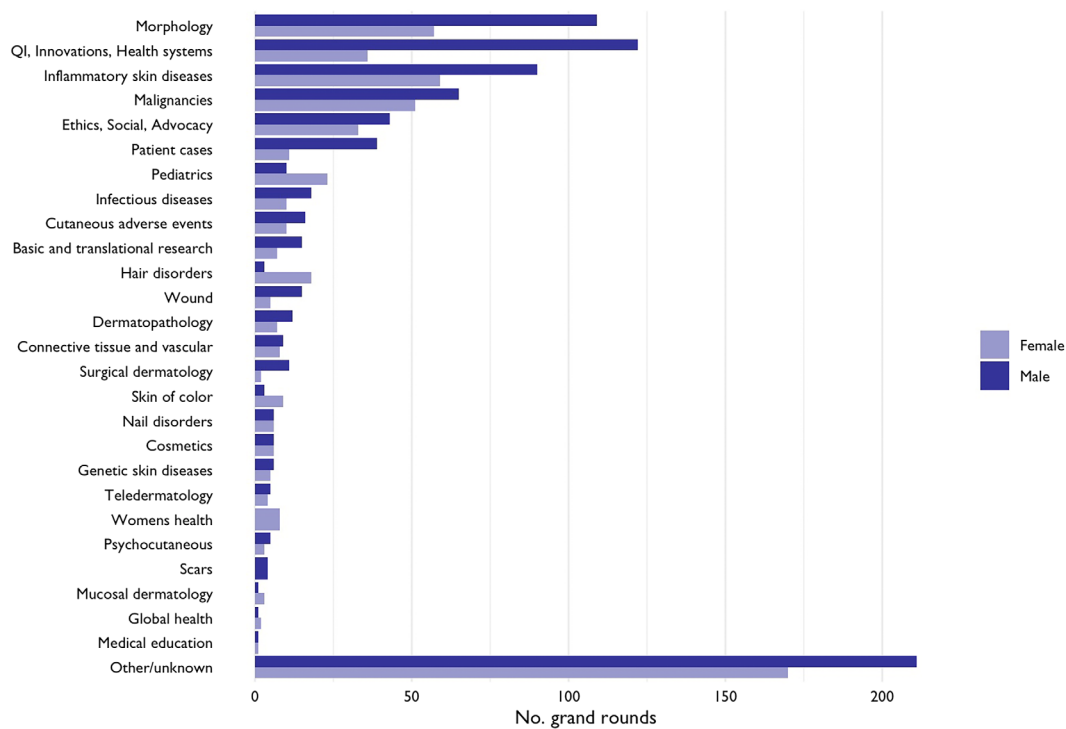


Figure 1. Dermatology Grand Rounds Stratified by Lecture Topic and Speaker Gender.

demographics that most pediatric dermatologists are female (76.8% in 2021) [6].

Limitations include incomplete access to public GR records and incomplete lecture topic data. Gender was determined by name and excluded nonbinary gender identities. We could not account for declined speaker invitations.

Conclusion

Gender diversity in GR speakers has improved over time, though there are persistent disparities by academic rank. As the number of female dermatology trainees increases, continued efforts are needed to increase speaking opportunities for women to advance in academic medicine.

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