Why no Nobel prize for surgical papers?

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Dear sir,

The Nobel Prize is an esteemed award that recognizes outstanding achievements in Physics, Chemistry, Medicine or Physiology, Literature, and Peace. The will of Nobel states that ‘prizes to those who, during the preceding year, shall have conferred the greatest benefit on mankind in the field of medicine and physiology’(1). Despite the significant contributions of surgery to the advancement of medical science, only five surgical papers have been awarded the Nobel Prize (Table 1).

One reason for this is that surgical papers tend to focus on technique-based advancements rather than fundamental discoveries in medicine or physiology. While surgical techniques can be innovative and improve patient outcomes, they may not be applicable to a wide set of patients, and their effectiveness may depend on the skill of the operating surgical team. This makes it difficult to establish a universal standard of evaluation for surgical papers(2).

Moreover, there is a high risk of selection and reporting bias in surgical papers. Surgeons may choose to report on their successes and not their failures, making it challenging to assess the true efficacy of a surgical technique(3). Additionally, an alternative surgical technique may already be established, rendering the new technique less impactful.

It is worth noting that ground-breaking surgical research can still be impactful and recognized in the field of medicine. For instance, if a surgical research study can demonstrate a significant improvement in patient outcomes or revolutionize the practice of surgery, it may be considered for recognition. Moreover, surgical research that incorporates the latest advancements in technology, such as AI, nanotechnology, tissue engineering, and gene therapy, can also be impactful. These advancements have the potential to improve surgical techniques, increase the accuracy of diagnoses, and enhance patient outcomes.

Additionally, the practice of basic translational research in surgery, which aims to translate basic scientific discoveries into clinical applications, can be valuable. Research studies that explore the molecular cross-talk between different cell types and the signaling pathways involved in tissue repair can provide insights into the mechanisms of disease and lead to the development of novel surgical interventions. It is essential to recognize that a researcher’s ultimate goal should not be to win the Nobel Prize. While it is a prestigious award, it should not be the primary motivation for conducting research. Instead, a researcher should strive to adhere to ethical standards and follow in the footsteps of great Nobel laureates who have made significant contributions to science and society.

A surgeon’s focus should be on conducting meaningful research that can have a positive impact on patient well-being. Ethical research practices that prioritize patient safety and respect for human dignity are crucial. Moreover, the research should be designed to address important medical problems, and the results should be applicable to a broad population of patients. While the Nobel Prize is undoubtedly the greatest honor, the real prize for surgeons is transforming patient care and improving the lives of individuals suffering from disease and illness. The blessings of patients and their families, as well as the recognition and respect of
one’s peers, seniors and colleagues, are far more valuable than any award.

The surgeons should strive to conduct ethical research that can make a meaningful impact on patient well-being. While the Nobel Prize is a significant recognition, the true prize for researchers is improving patient care and earning the respect and gratitude of those they serve.

References


Table Legend: Table 1: Nobel prize for surgical papers

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<table>
<thead>
<tr>
<th>Surgeon</th>
<th>Year</th>
<th>Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theodor Kocher</td>
<td>1909</td>
<td>Thyroidectomy</td>
</tr>
<tr>
<td>Alexis Carrel</td>
<td>1912</td>
<td>Vascular suture and organ transplant</td>
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<td>Antonio Egas Moniz</td>
<td>1949</td>
<td>Leucotomy</td>
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<td>Werner Forssmann</td>
<td>1956</td>
<td>Cardiac catheterization</td>
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<tr>
<td>Joseph Murray</td>
<td>1990</td>
<td>Organ transplantation</td>
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