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LETTER TO THE EDITOR

The importance of safe working legislation for neuroradiologists

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We read with interest the parallels drawn between the working patterns of air-traffic controllers and neuroradiologists by Reicher and colleagues.¹ We support their conclusion that more robust legislation should be established to allow safer working practices by neuroradiologists, in line with the aviation industry. From our observations, we present two further factors that underline the importance of reducing fatigue-related errors from unsafe working patterns amongst neuroradiologists.

Firstly, the on-call burden of neuroradiologists in the United Kingdom is particularly onerous. Patient load and complexity from tertiary centres with large neurosurgical, stroke, neurology and neurocritical care departments mean that neuroradiologists need to be called upon frequently overnight. For example, the increasing use of the National Institute of Health and Care Excellence (NICE) guidelines on the role of mechanical thrombectomy in the management of stroke will increase demand for out-of-hours input from neuroradiologists. Sleep deprivation from the workload and frequency of such shifts will significantly affect performance.² Secondly, in addition to spending time performing cognitively demanding tasks using data from computer screens,

neuroradiologists often perform a range of practical procedures (such as myelography and angiographic procedures), train specialty registrars and lead clinico-radiological meetings. Indeed, a report on safe working by the British Society of Neuroradiologists (BSNR) has outlined the increasing time commitments required for these duties.³ This variety in work schedules may be a key difference between air-traffic controllers and neuroradiologists. Whilst the effect of task shifting on cognitive and motor performance is not entirely clear, it is reasonable to conclude that adequate rest periods may improve performances across the board.

To conclude, the aforementioned report on safe working by the BSNR reflects Reicher and colleagues' concerns but has not provided recommendations on breaks, reporting periods and shift patterns. We advocate that the publication of specific guidance on what is deemed safe practice is an important first step towards formulating adequate, specialty-specific legislation. However, stakeholders will need to be aware of the challenges in implementing such legislation in the context of ever-increasing demand from a finite pool of neuroradiologists, reflected in the recent workforce planning report by the Royal College of Radiologists.⁴

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Response to letter: “The importance of safe working legislation for neuroradiologists” by Ramachandran *et al*

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The authors would like to thank Ramachandran and colleagues for their interesting contribution.

We wholeheartedly concur with their conclusions in relation to the pressing need for official determination of guidelines for safe reporting practice. We support their points regarding the additional challenges posed by neuroradiologists' varied workload and increasingly onerous on-call commitments.

They hint that non-radiologist stakeholders might take a different view, demanding ever-greater reporting output from the limited workforce. This emphasises the necessity of developing and entrenching safe working practices in an increasingly pressurised working environment.