

# Opinion

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## You Have What It Takes

Three residents approached me after the L.E.A.P. Forward program, an annual leadership forum for ophthalmology residents that is held during the Mid-Year Forum in Washington, D.C. One of them asked, “Have you ever had Imposter Syndrome?”

The question gave me pause, and I’ve been thinking about it since. When I was a resident and a young ophthalmologist in clinical practice, very few things we experienced were described as a syndrome, and it was even less likely that we would talk about our feelings. It was work, after all. But thankfully, things have changed.

So, what is Imposter Syndrome? First described in 1978, Imposter Syndrome is a psychological pattern in which a person doubts his or her accomplishments and has an internalized fear of being discovered as a fraud.<sup>1</sup> Although it is commonly experienced by high-achieving women and minorities, most people—up to 70%—will experience it at some point in their careers, especially during times of stress, anxiety, or depression.

Kathryn Colby, MD, PhD, gave a talk on Imposter Syndrome at last year’s Women in Ophthalmology clinical meeting, so I asked her about it. Kathy is an ophthalmology superstar. Among other accomplishments, she is chair of the Department of Ophthalmology at the University of Chicago and president-elect of the Cornea Society.

Kathy pointed out that moments of self-doubt are ubiquitous among successful people, and she acknowledged that she has dealt with them herself. For instance, last year, Kathy gave an invited talk on ocular surface tumors in children at the 2018 World Ophthalmology Congress. Looking out at the audience, she spotted four experts on the topic, several of whom she was referencing. Her inner voice said, “OMG, how can I be standing up here?” But her well-trained second reaction was to identify the thought as a manifestation of Imposter Syndrome. She chuckled internally and gave a terrific talk.

Her advice for dealing with these episodes: “The most important thing is to recognize these feelings when they arise.” Then, she said, the thoughts can be redirected, thus allowing the person to visualize a successful outcome. Kathy pointed out that perfectionism is the enemy of professional

development, while a growth mindset is its greatest friend. Acquiring new professional skills requires us to step outside of comfort zones. “One of the most important projects for professional (and personal) growth is coming to terms with one’s imperfections and using failures as the fuel for learning and change,” Kathy said. She cited the burgeoning body of work that supports the concept of neuroplasticity and suggested that ophthalmologists consciously work on rewriting their inner scripts.

When I think about this process, I remember a night when my husband and I had the kitchen table at Charlie Trotter’s, a famous Chicago restaurant. Midway through our remarkable meal of complex and artistically prepared food, the room took on an electric feel when Charlie walked in. When he stopped by our table, I commented that he must be a perfectionist. He responded, “No, I’m an excellentist.”

I think this is how to transcend Imposter Syndrome. My ophthalmology colleagues, we are excellentists. Each of us isn’t perfect, isn’t the only expert, and doesn’t have all the answers. But we each have the courage to take on professional challenges, the ability to learn new skills, and the capacity to be leaders.

So, to the residents who asked about Imposter Syndrome: It’s normal. It has a name, but it need not have any power. You’re excellentists. You have what it takes.



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<sup>1</sup> Clance PR, Imes SA. [www.paulineroceclance.com/pdf/ip\\_high-achieving\\_women.pdf](http://www.paulineroceclance.com/pdf/ip_high-achieving_women.pdf). Accessed April 30, 2019.

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