

EUROPEAN UNION MEDICAL SPECIALISTS (UEMS/EUMS)

MEETING OF THE SECTION AND BOARD OF ANAESTHESIOLOGY

Saturday, December 13th, 2008, Riga, Latvia

MINUTES

Board Meeting SATURDAY, Dec 13th, 2008, RIGA:

In attendance:

Iuri Acalovschi, Romania
Seppo Alahuhta, Finland - **Vice-president**
Grethe Astrup, Denmark
Zuhay Aykac, Turkey
Doris Balogh, Austria
Guttorm Brattebo, Norway
Christer Carlsson, Sweden
Leon Drobniak, Poland
Robert Fitzgerald, Austria
Zeev Goldik, Israel
Maria Janecsko, Hungary
Dorthe Keld, Denmark
Hans Knappe, Netherlands
Sean McDevitt, Ireland,
Jannicke Mellin-Olsen, Norway - **President**
Ellen O'Sullivan, Ireland - **Secretary/Treasurer**
Vesna Paver-Erzen, Slovenia
Monika Paulikova, Slovakia
Margarita Puig, Spain
Edoardo deRobertis, Italy
Ivan Smilov, Bulgaria
Stefan Trenkler, Slovakia
Peteris Tomins, Latvia
Elizabeth Van Gessel, Switzerland.
Laszlo Vimlati, Hungary
David Whitaker, UK
Edwin Borman, UEMS
Mikael Forslund, PWG REP, Sweden



Photo: Jānis Birks (specialist of anaesthesiology) – the Mayor of Riga, and participants of the Meeting of the Section and Board of Anaesthesiology

Opening, new members, roll call

Dr. J. Mellin-Olsen

Agenda Modification

Dr. J. Mellin-Olsen

Correspondence

Dr. J. Mellin-Olsen

Correspondence Section and Board of Anaesthesiology – all distributed via e-mail earlier.

President's report

Dr. J. Mellin-Olsen

UEMS Meeting on CME/CPD

This was held in November. Dr Edwin Borman was present. The Advisory group consists of National Representation, representation from the Sections and Boards and EACCME.

Key Points

EACCME is in good health.

Adoption of Accreditation criteria for e-CME by UEMS and the criteria for e-learning will be stricter. The system hopes to go live from January 1st 2009. A task-force has been formed to improve the quality of EACCME and this will be chaired by Dr Edwin Borman. This task force will be interim. ???

DURATION OF TRAINING

Dr Mellin-Olsen referred to the threat to reduce training time in Latvia to three years. In an EU directive there is an opening to interpret training duration as three years. This needs to be amended. Two countries said they have a training duration of 4 years, Spain and Bulgaria. A minimum of 5 years would be reasonable. CONSENSUS VIEW –5 Years training is minimum and this is stated in the EBA guidelines. Dr Mellin-Olsen to write to UEMS in this regard. HIGH ON AGENDA.

JUNIOR DOCTOR REPRESENTATION

Dr Mellin-Olsen welcomed Dr Mikael Forslund to his first meeting and thanked him for his contribution. This section and board to be congratulated on being the first to have a trainee representative.

CO-OPERATION with the ESA

VISIBILITY

This is a constant challenge. ESA has a very successful CONGRESS, runs an examination and publishes a journal. Dr Mellin-Olsen stated that EBA guidelines are published on the ESA website with no reference to the EBA. In the European anaesthesiology world, they are referred to as “ESA guidelines”. It would be helpful for the EBA visibility if ESA does not omit the fact that they are EBA guidelines, i.e. credits EBA for them on the web-page where one can find them ACTION-Write to Benedict Panner to request an EBA/UEMS seminar at every ESA congress.

WEBSITE

Dr Carmel Abela, who was unable to attend the meeting, has begun work on our website and requests that ALL members contribute.

EBA MEMBERSHIP

It is important that all members are aware that the term as a member of EBA is four years initially followed by a second four year term if necessary. It is important to get new people involved. The duration of membership of the ESA council is four years.

The role and activities of the National Anaesthesiology Societies' Committee. The most functional relationship between EBA/ESA and the national societies must be defined. Representatives of EBA, ESA National and ESA Council should be in close contact and communicate regularly

Guidelines

Dr Mellin-Olsen is representing us on the ESA guideline committee. The EBA intends to continue publishing the European guidelines in the EJA. ESA is working on guidelines for anaesthesiology in the next few years. However the EBA is also responsible for guidelines. As it would be counterproductive if the two organisations do not work together, the position paper that was planned in June should now be worked out as soon as possible. EBA and ESA should make a joint guidelines group. EBA should emphasize political, educational, training guidelines, etc, whereas scientific guidelines - clinical/ treatment are more the domain of the ESA.

The Guideline group met in November. It is chaired by Paolo Pelossi.

Two topics emerged as priorities

- Preoperative evaluation including fasting.
- Neuroaxial anaesthesia and anticoagulation. Hugo Van Aken has done a lot of research on the latter and hopes to finalise the document in six months.

Hans Knape mentioned the high cost of writing guidelines. He also said that they are planning joint guidelines on preoperative evaluation of cardiac patients for non-cardiac anaesthesia which is nearing publication. It is important to continue co-operation on guidelines.

Invitations to Board Meetings

This was very well received by the EBA. It was unanimously approved at our precious EBA meeting that the ESA President is invited to all EBA meetings.

Patient information and Consent-

This item led to a discussion on how different countries deal with Informed Consent and whether we should get separate consent etc. Dr O'Sullivan informed the committee of the work done by the AAGBI and the Royal College of Anaesthetists on this matter. She passed a copy of the Patient Information leaflet to all members to view. There is also a very detailed website with different specific leaflets available to download, copyright –free. If anyone wishes to find out more they can contact Dr. O'Sullivan directly. It will be kept under review.

Financial report

Prof. H. Knape

Prof Hans Knape presented the accounts. There is a balance of 10.300 euro. These monies have been transferred to the Treasurer, Dr O'Sullivan. Prof Hans Knape addressed the ESA finances. He said the number of activities and grants have increased. The net profit from meetings is decreasing. However the financial position of the ESA is solid. Prof Hans Knape was thanked for all his hard work as Treasurer.

Subcommittee meeting reports:

Standing Committee on Continuous Medical Education/continuous professional development Dr. G. Astrup

This subcommittee is working with CME possibilities on the web. They have attached an update of the former list of CME on the web, which has been distributed to our section members. They are also working on developing a portfolio for CME/CPD.

Dr Astrup outlined problems with the EACCME system. She said they need to expand their group because of the workload and also need French speakers. Dr DeRobertis volunteered to join this group.

CME-CPD (Dr Borman): There are currently surveys going on concerning differences between the EU-countries. A glossary is under preparation. Please let Dr. Borman know of any problems.

The EACCME has improved, especially as it is now possible to apply for CME-points on-line; a web-based application form is operational since 15.1.2008. The web-site itself was launched in 2007. Accreditation of e-learning programs will be possible from 2009. There was some discussion on CORE TOPICS which should be an essential part of everyone's CME. Dr Borman asked all to encourage organisations to approach the UEMS for accreditation.

Standing Committee on Education and Training

Prof. Ch. Carlsson

Dr Carlsson discussed the European Examination. Part I of the EDA is very popular and numbers are increasing. However only 25% go from Part I to Part 2. A discussion followed on the reasons for the small uptake for Part 2. Dr Goldik indicated that it is a two part examination and felt that reduction of fees for part 2 was an option. Dr Mellin-Olsen wondered if cost was the only barrier. Dr Goldik stressed that the European Diploma is not a licence to work. It is a badge of excellence.

ACTION—To write a letter supporting Dr Goldie's proposal to accept the Glasgow Declaration i.e. that anaesthesiologists of every nationality can sit the European Diploma if they are specialists in their own countries.

The issue of European examinations of specialists has been addressed in the so called *Glasgow Declaration*. In February 2007 a number of Sections (more than 20) which are organizing European examinations met in Glasgow in order to harmonize their procedures, which resulted in this document. It can be found on the UEMS home-page.

Edwin Borman addressed some points. 1. UEMS considers examinations as only part of a continuous assessment process. 2. CESSMA (Council of European Speciality medical assessments) UEMS wants to expand this process.

Working party on Fellowship European Board of Anaesthesiology

As previously discussed, the ESA is going to do the administrative work for this and has set up a commercial body to deal with it. A handling fee of euro 350 per application has been agreed upon by the ESA board. This decision was made pending a lot of uncertainties with respect to the number of applicants and the uncertain consequences for the administrative office of ESA. Professional handling is associated with euro 250 and administrative handling is associated with a euro 100 fee. This last fee can be waived for ESA members. Prof Knapé suggested an Advisory Board. The ESA deals with the obvious applicants whilst the EBA Advisory Board advises on the more difficult applications.

Accreditation and Visitation Working Party

Prof. L. Drobnik

The process has a new set of templates and is more transparent. The report from Bursa, Turkey will be awarded at the ESA meeting in Milan.

Working party on Quality in Anaesthesia

Dr. D. Whitaker

Dr Whitaker presented a power point presentation on the World Alliance for Patient Safety initiative entitled "Safe Surgery Saves Lives". This initiative involves checklists, sign in, time out and sign out. The checklists were piloted in 8 cities in eight countries. The results were collated and published in the New England Journal of Medicine end of January; the results show a fall in mortality and in morbidity following surgery in the pilot sites. The European Launch of this initiative, which is led by Professor Atul Gawande, is to be held in London in January. Dr Whitaker invited representatives of the EBA to attend the launch day on 15.01.2009, and offered all complimentary registration at Winter Scientific Meeting in London which is on at the same time. He suggested that every National Society tries to get at least one hospital in their country to sign up and introduce the checklist.

Dr Whitaker also discussed colour-coding of cylinders which varies from country to country. He suggested standardisation of this.

Working party on Manpower

Dr. D. Balogh

Concerned from this committee were raised re the poor language and communication skills of some immigrant doctors. Regulators can set examinations in their own countries e.g IELTS, International English Language Testing System, which is used in the UK. It is the employer's responsibility to check that all doctors can communicate.

Prof Hans Knapé proposed that this group looks at a continuous evaluation of migration. Perhaps an ANNUAL SURVEY of migration in Europe. Perhaps an Annual questionnaire to all societies every year. Dr Balogh mentioned the difficulty in carrying this out with our assistance.

Emergency medicine

Prof. E. De Robertis

The meeting of the Multidisciplinary Joint Committee on Emergency Medicine (MDJCEM) on Nov 28th in Brussels was successful according to Professor DeRobertis. The meeting was constructive and attended by delegates from more UEMS boards than before, including surgery, orthopedics, pediatrics. During the meeting a final version of the draft of the European Core curriculum on EM was presented. Amendments made by our delegates including one recent modification made by professor DeRobertis have been accepted. Next meeting will be in May 2009. Prof Robertis and his subgroup would like to write an Editorial, possibly to be published on EJA, about the position of anaesthesiology regarding EM. This suggestion was approved by the board.

Worrying news was heard from several Eastern European countries. In Hungary emergency medicine has been a primary speciality for several years (Prof. Maria Janecskó and Prof. Lázló Vimpláti). Also in Slovakia emergency medicine is a primary speciality (Dr. Stefan Trenkler). In Rumania emergency medicine will become a new speciality within a couple of years (Prof. Iurie Acalovschi). Frequently anaesthesiologist's knowledge and experience is being used as they are acting as trainers and tutors for others within emergency medicine.

Postoperative care

Professor Vimlāti has polished the paper on guidelines for High Quality Postoperative Care. It will be distributed to the members for comments within a couple of weeks and then it can be submitted for publication.

Pain

An invitation sent to the sections of various specialties involved to participate a constitutive meeting on a multidisciplinary joint meeting on training in pain medicine (MDJCPM) has not resulted in any feedback. MDJCPM was approved by the UEMS council a couple of years ago. A letter on the issue will be sent to the presidents of the sections involved in pain medicine.

Minutes of the meeting in Copenhagen, June 2008

Approved.

Any other business

Professor Drobnik asked for patronage of the Section and Board to a journal entitled Anestezjologia i Ratownictwo and permission to use the UEMS logo. As the Section and Board is not the body which is allowed to give permission for the use of the UEMS logo, Prof. Drobnik will write a letter which will be supported by the EBA and submitted to UEMS centrally.

Professor Vesna Paver-Erzen was thanked by the President for her many contributions during her membership of the Section and Board.

Date and venue of the 2009 meetings:

**Milan, Italy, Saturday, June 6th 2009
London, UK, November 27th, 28th 2009**

Future Meetings

Malta 2010

Date: February, 2009

**Dr. Ellen O'Sullivan
Honorary Secretary and Treasurer**

**Dr. Jannicke Mellin-Olsen
President**