

Establishment of Medical Oncology Section within European Union of Medical Specialists: A Collaborative Effort for Achievement of Better Standards

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Abstract

Introduction: The Medical Oncology is a more recently recognized specialty that serves cancer patients through the course of their illness. It is not as yet fully recognized in some European countries and foundations.

Method: An initiative to establish Medical Oncology Section within UEMS is started in December 2014 by Turkish National Medical Association.

Results: These efforts succeeded with the fair cooperation at General Council and the section gained full function in April 2015. Cooperative efforts to reach mutual goals with ESMO started immediately.

Conclusion: The mutual respect and constructive cooperation within UEMS and later with ESMO gaining momentum to improve the quality of training and patients services for cancer patients within Europe.

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Introduction

The Medical oncology is a relatively new medical subspecialty. Medical oncologists provide healthcare to cancer patients through their course of illness, starting from diagnosis until terminal stage of their life. The creation of this subspecialty is established toward the late 20th century and pioneered in United States. The responsibility for the care of cancer patients in Europe is not homogenous. In some countries, surgical or radiation oncology specialists are trained in administering chemotherapy and assume responsibilities of Medical oncologists in some centers for a particular cancer. The examples are not limited to but include Breast cancer management by Surgeons and Head & Neck cancer treatment by Radiation Oncologists [1].

European Union of Medical Specialists (EUMS or UEMS in French) is established in 1958, represented by 37 European states, up to 1.6 million specialists in 42 medical specialties and based in Brussels, Belgium. There are 28 National Medical Associations of 28 European Union Member States and three countries from European Economic Area including Iceland, Norway and Switzerland. In addition, 3 National Medical Associations of Council of Europe: Armenia, Israel and Turkey are Associate

Members and 3 National Medical Associations are observers: Georgia, Lebanon and Morocco [2].

The objective of UEMS is to promote free movement of doctors across Europe through harmonization of the highest level of specialist training and medical care. Set standards in post-graduate training, continuing medical education and professional development and quality assurance in specialist medical practice.

In addition to Advocacy, the UEMS structure is established to have Specialty representation and standard setting with involvement of 42 Specialists sections and European boards, 21 divisions within sections, 10 Multidisciplinary Joint Committees (one in Oncology) and 3 thematic federations. There is also a Specialist Accreditation duty focusing in Accreditation of Continuing Medical Education (CME) by EACCME, Accreditation of Postgraduate Training (PGT) by ACAMSQ and Accreditation of Quality Assurance by EACQM.

UEMS sections are created by and reports to UEMS Council. It is composed of practicing medical specialists. Its creation requires nomination by one National Member Association and aims to improve the quality of care provided to patients. The objective of each section is to set standard of medical training at the European level, promote the discipline and raise awareness on the needs and expectations of the specialists. Liaise with relevant

European Scientific Societies and engage in fruitful cooperation is also a main objective.

EUMS is advocating for high quality training requirements for specialist medical training since 1970 by setting a common European Curriculum, Training Syllabus and Training Requirements. It also dedicated its efforts to develop common European Specialty Examinations by cooperating with European Scientific Societies to set higher standards and better quality control. Integration of this exam with National training and accreditation requirements are also on the agenda.

Another aspect of EUMS activity is to provide "Continuing Medical Education" accreditation for international conferences and meetings. This sets the basis for the robust accreditation of the educational meetings.

Through all these, EUMS is voicing the medical specialists' needs and expectations at European level. This unified voice provides a better international representation of the specialists and greater strength through mutual cooperation. This is expected to bring international excellence in key areas of relevance to the medical profession and effective interaction with individual specialties and National Medical Associations.

Addressing interdisciplinary issues in emerging areas of specialist medical practice and developing new, harmonized models for the training of the next generation of medical specialists are the added values of the EUMS.

Method

The criteria and procedure to create a Section in any specialty is defined in the statutes as below:

"Creation and winding up of a Section

Ref: Statutes art. X; RoP Article VI

Criteria to create a section

The UEMS Council is the only UEMS entity entitled to create a Specialist Section. Article X.1 of the Statutes provides that "Any specialty may apply to Council to create its own Section if it is recognized as an independent specialty in at least 1/3 of the Member States" and Article V.I.2 of the RoP details the criteria:

In order for a discipline to be recognized as a specialty by UEMS, with a view to forming a Section, it must be recognized as an independent specialty by more than one third of the EU Member States, must be registered in the Official Journal of the EU and fulfil the following conditions, as laid down by the Council on 3 November 1979:

- The specialty must be effectively carried on as such, essentially in exclusive practice, by competent specialists in the country of a full UEMS Member;
- The number of these specialists must be sufficient to establish, from among their members, panels of examiners or recognition Committees in that discipline in the country of a full UEMS Member;
- The specialty must be practiced in institutions with sufficient training facilities available for them to be

designated as training centers. These institutions must be controlled by specialists of such seniority and experience as to be acknowledged as directors of training (D 7927) in the country of a full UEMS Member."

It derives from the UEMS Statutory documents that any specialty that aims to become a Specialist Section has to meet 5 criteria:

- Recognized as an independent specialty in at least 1/3 EU
- Registered in the EU Official Journal (Directive 2005/36/EC)
- Practiced in exclusive practice by trained medical specialists
- Practiced by a significant number of medical doctors
- Practiced in recognized training institutions

The list of officially recognized specialties at the European level is inserted in the annex V.2 of the Directive on mutual recognition of professional qualifications (2005/36/EC).

Any specialty willing to submit an application to create a UEMS Section should check whether it meets those criteria and must provide evidence supporting the request.

The name of the Section has to contain the denomination in the Directive on mutual recognition of professional qualifications (2005/36/EC).

Procedure to create a section

Article VI.1 of RoP details the procedure to create a Specialist Section: "The Council shall create Sections according to the following procedure:

1. Its formation must be proposed by a National Association, which is a Member of UEMS and accepted by two thirds of the voting Members of the Council.
2. The Council may seek the views of Sections affected by the formation of the new Section, and report the result to the next meeting, to which two fully mandated members of these Sections should be invited and heard, before the final vote. It may also empower the Secretary General to conduct an enquiry to ensure that the Specialty in question fulfils the criteria laid down by UEMS for recognition of a Specialty.
3. The Council may further propose, in certain cases, that the newly formed Section should be linked to an already existing Section, provided that the latter accepts the proposal.

Such a linkage implies collaboration across areas shared by the two Sections such as, for example, a common-trunk training period."

A request to create a Specialist Section must be officially submitted to the UEMS Council by a UEMS MA.

A formal letter from the UEMS MA has to be sent to SG together with relevant supporting documents explaining the rationale underpinning the request. This letter must be sent to SG at least two months before the UEMS Council Meeting.

The SG will check whether the 5 criteria listed above have been

met and will confirm the receipt of the request. The UEMS MAs and structures will be informed of the request to create a Section and asked for their opinion. If the criteria have been met, the SG will add this item to the agenda of the Council meeting.

The applicant will be invited to make a short presentation during the Council to support the request and answer questions from Members of the Council.

Fulfilling all the criteria does not imply that a Section will automatically be created. The UEMS Council will vote on the request and might refuse the creation of a new Section or request additional evidence. To create a new Section the proposal has to obtain votes in favor from at least 2/3 of UEMS Members entitled to vote, present or represented."

Results

All requirements for establishment of Medical Oncology as a section within EUMS is met with the presentation of the following evidence:

1. Medical oncology must be recognized as an independent medical specialty: This is sufficiently established as elaborated in a recent Position Paper by ESMO in 2014 [3].
2. The European Parliament and the Council directive must register Medical Oncology in the EU Official Journal: As of September 7th, 2005, it is registered [4].
3. Medical Oncology must be officially recognized: It is officially recognized by European Union as an independent medical specialty in March 2011.
4. The number of Medical Oncologists must be sufficient enough to establish the practice: The body of European School of Medical Oncology with over 9000 members together with national representatives from 41 European countries proving that there are sufficient Medical Oncology specialists exists.
5. Medical Oncology must be practiced in recognized training institutions: A Phase III Medical Oncology Status in Europe Survey (MOSES) commissioned by ESMO reported in September 2008 that comprehensive cancer centers exist in 82.9% of the surveyed countries.

The conclusion of presentation to the UEMS Council was that: The recognition of Medical Oncology as a Section by UEMS will be an opportunity for structural improvement of the medical oncology field for better specialty education and ultimately patient care in Europe.

The council voted in favor of the creation of Medical Oncology section upon this presentation in December 2014 Granada meeting. A Medical Oncology section is established in next scheduled UEMS meeting in Brussels on April 10, with participation of eleven Medical Oncology representatives from 7 countries. Once the probable responsibilities and goals of the Medical Oncology Section is established, the following decisions are made by the group:

1. Contacting the National Medical Associations of the countries not attended or not nominated a representative, to find out the reasons and see whether anything can be done to achieve stronger participation.
2. Contacting European Society of the Medical Oncology (ESMO) to seek the areas of collaboration and contribution [5].

Upon these decisions, the ESMO secretary is contacted first and a meeting scheduled during World Cancer Congress in Barcelona for initial exchange of ideas for collaboration. A warm welcome from ESMO end caused an invitation for UEMS to be an observer in a major educational event, ESMO Academy in Oxford England in August. Then UEMS delegate is invited to ESMO Education Committee Meeting during 2015 ESMO Congress in Vienna to present the two areas of collaboration that came forward during initial meetings: endorsement of ESMO Global Curriculum and appraisal of ESMO Board Exam by respective UEMS bodies. Upon presentation of these processes by UEMS representative, the Educational Committee find these endeavors worthy of consideration and decided to ask the ESMO Board of Directors for a final decision during the most recent scheduled meeting in early 2016.

Also on the issue of representation, many member countries responded warmly to nominate their representatives for the UEMS Medical Oncology section. Before the second meeting scheduled to be convened in Warsaw in Mid-October and during the writing of this manuscript, 15 countries with 25 representatives were already involved and numbers were steadily going-up.

Conclusion

A constructive and cooperative effort within the UEMS caused successful launch of Medical Oncology section. Later on, similar mutual efforts with ESMO have initiated early signs of fruitful collaboration. All these work eventually expected to improve quality of Medical Oncology doctors' standards and cancer patient's care in Europe.

References

- 1 Popescu RA, Schäfer R, Califano R, Eckert R, Coleman R, et al. (2014) The current and future role of the medical oncologist in the professional care for cancer patients: a position paper by the European Society for Medical Oncology (ESMO). *Ann Oncol* 25: 9-15.
- 2 <http://www.uems.eu/>
- 3 <http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex:32011R0213>
- 4 <http://www.esmo.org/Policy/Recognition-and-Status-of-Medical-Oncology/Status-of-Medical-Oncology-in-Europe>
- 5 <http://www.esmo.org/>