



# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

*Association internationale sans but lucratif  
EU Transparency Register 219038730914-92*

*International non-profit organisation*

RUE DE L'INDUSTRIE, 24  
BE- 1040 BRUSSELS  
VAT n° BE 0469.067.848

T +32 2 649 51 64  
[www.uems.eu](http://www.uems.eu)  
[coordination@uems.eu](mailto:coordination@uems.eu)

## UEMS 2024/25

### MEETING OF THE UEMS ADVISORY BOARD

#### DRAFT MINUTES

Friday 26<sup>th</sup> April 2024  
15:00 – 17:30 CET

Meeting held live at:

#### Maison des Associations Internationales

Rue Washington, 40  
B-1050 Brussels,  
Belgium



# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

Association internationale sans but lucratif  
EU Transparency Register 219038730914-92

International non-profit organisation

RUE DE L'INDUSTRIE, 24  
BE- 1040 BRUSSELS  
VAT n° BE 0469.067.848

T +32 2 649 51 64  
[www.uems.eu](http://www.uems.eu)  
[coordination@uems.eu](mailto:coordination@uems.eu)

## UEMS Advisory Board meeting, 26<sup>th</sup> April 2024

### Roll-call of Sections

15:00

*Dr Patrick Magennis  
Chair of the AB – Chair of Grouping I*

Dr Magennis conducted the roll call.

With 30 sections present or represented, the majority was established at 16.

### 1. Approval of the agenda \*\*

*Dr Patrick Magennis  
Chair of the AB – Chair of Grouping II*

The Agenda was unanimously approved.

### 2. Approval of the minutes of the October 2023 AB \*\*

*Dr Patrick Magennis  
Chair of the AB- Chair of Grouping II*

The Minutes of the previous AB Meeting (Malta, 2023) were unanimously approved.

### 3. Reports from the UEMS Groupings

#### 3.1. *UEMS Grouping I*

*Prof. Lampros Michalis  
Chair of the Grouping*

Prof. Michalis reported on Grouping I, highlighting the need to discuss the Grouping's role within the UEMS. The meeting commenced with the election of the Chair, where Prof. Michalis was unanimously elected. Prof. Michalis emphasized the importance of adopting and integrating the EPAs concept into the revised ETR structure. Training is based on very regular assessments, and it was suggested that a survey be conducted to determine the necessity of training within the UEMS.

The implementation of UEMS terminology was also discussed. Another key point raised was the need to strengthen the role of EACCME, which serves as the backbone of our organisation. It is essential to ensure that medical training accreditation remains unbiased and independent of pharmacological and industrial influences.

Additionally, we must strengthen our relationship with the Scientific Societies across all Sections and ensure they understand the pivotal role of the UEMS.

#### 3.2. *UEMS Grouping II*

*Dr Patrick Magennis,  
Chair of the Grouping*



# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

Association internationale sans but lucratif  
EU Transparency Register 219038730914-92

International non-profit organisation

RUE DE L'INDUSTRIE, 24  
BE- 1040 BRUSSELS  
VAT n° BE 0469.067.848

T +32 2 649 51 64  
[www.uems.eu](http://www.uems.eu)  
[coordination@uems.eu](mailto:coordination@uems.eu)

Dr Magennis reported on Grouping II. The QR code for the *SEVE Project* of the Surgery Section was presented, offering attendees quick and easy access to detailed information about the initiative. The SEVE Project, originating from Spain, was introduced and elaborated upon. While its primary focus is on surgical practices, many of its components are adaptable and could be effectively implemented by other related specialties that involve a significant number of procedural activities. This cross-specialty applicability highlights the project's potential for broad impact and utility within the medical community.

Nine Sections attended the Grouping II Meeting.

The Grouping II also discussed the ETRs on the Agenda and overall support was expressed.

### 3.3. UEMS Grouping III

*Prof. Thomas Griesbacher  
Chair of the Grouping*

Prof. Griesbacher reported on Grouping III. The meeting began with the election of the Bureau, where Prof. Griesbacher was elected as Chair and Prof. Vesna Kusek was elected as Secretary of Grouping III.

- 13 out of 16 sections represented.
- The proposed ETRs were discussed: the group reached a consensus that the ETR for the specialty of ER is exceptionally well-crafted. The ETR for Endocrinology serves as a syllabus and a curriculum for the specialty.
- There remains some uncertainty about how the Sections should integrate the *Position Paper on Planetary Health*. The proposed Climate Change Curriculum was also a topic of discussion. The general sentiment was that time would be necessary to evaluate how these elements would function overall.
- Grouping III eagerly anticipates next day's presentation on the new UEMS platform and is keen to explore how the Sections can integrate their current websites into this new system.

## 4. Reports from the 5 Working Groups

### 4.1. WG Common Projects

Prof. Papalois provided an update on the *UEMS Common Projects*, noting that the initiative is still a work in progress, with the most significant development being the introduction of the new platform. This platform is being expanded and enhanced with a variety of applications.

We have also upgraded the Liaison Officer's office to focus on European and International Affairs, overseen by Dr Marc Hermans, who will present updates from the department tomorrow.

The President of the UEMS highlighted three major directions for common projects:

1. Conducting a comprehensive mapping of specialties across Europe, detailing the semantics used in each country. We have received a detailed plan from our colleague, the HoD of the Dutch NMA, Prof. Armand Girbes (Project: *MaMoms*).
2. Further developing and engaging with the fellowship program to enhance our work.



# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

*Association internationale sans but lucratif  
EU Transparency Register 219038730914-92*

*International non-profit organisation*

RUE DE L'INDUSTRIE, 24  
BE- 1040 BRUSSELS  
VAT n° BE 0469.067.848

T +32 2 649 51 64  
[www.uems.eu](http://www.uems.eu)  
[coordination@uems.eu](mailto:coordination@uems.eu)

3. Creating an Alumni group to engage colleagues who have completed their terms or retired, ensuring their continued involvement.

The idea of a UEMS Congress was as well discussed: this would encompass both the UEMS ETR Conference and the EACCME Conference. Additionally, there is a proposal to create a UEMS *eJournal*, focusing on professional medical matters, including opinion papers. This journal could become a significant source of income for the UEMS. We welcome credible proposals from colleagues for this initiative.

Dr Dias (Psychiatry) proposed starter grants for any UEMS bodies, particularly for those Sections that do not currently run exams. These grants would help develop exams, with the expectation that the funds would be repaid once the examination is launched. This initiative would ensure that UEMS work, such as developing ETRs, is implemented and gains visibility. The President of the UEMS noted that while we have informally supported such initiatives, formalising this process is an excellent idea. CESMA could assist with the statistics and the start-up of an examination, ensuring all necessary components are in place.

Dr Patil (IR) suggested that fellows should become chapters in different countries, and we should invest in them. This idea was also welcomed by the UEMS President.

## **4.2. WG Finances**

Dr Magennis (OMFS) presented the report, highlighting the successful developments. He also addressed several items of unfinished business:

- Review of management fees.
- UEMS-badged exams that do not contribute to UEMS.
- Funds for common projects.

Additional points discussed included: consultation on the management fee; review of new accounting processes; establishment of best practices for UEMS-badged exams; proposals for linking individuals and organisations to UEMS.

## **4.3. WG Links to ESSs/NSSs** – report was not presented due to time constraints.

## **4.4. WG Promoting EACCME**

Prof. Ricci, UEMS Vice-President, presented an update on the working group participants and reviewed the previous meeting's minutes, prepared by the Secretary General, Dr Grenho. Key proposals included:

- Promoting EACCME locally through NMAs, Local Medical Chambers, and National Scientific Societies etc.
- Appointing National Delegates as EACCME representatives at the local level.
- Enhancing social media presence with clear messaging.

EACCME has established a social media presence and a newly revamped website. Recent highlights include the UEMS-Uemo agreement and a successful EACCME 3.0 Conference.

Proposals to further promote EACCME in UEMS member states include organising sessions such as '*EACCME meets Italy, Belgium, Greece, Portugal*' during CME conferences, Councils, and potentially CESMA meetings.



# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

Association internationale sans but lucratif  
EU Transparency Register 219038730914-92

International non-profit organisation

RUE DE L'INDUSTRIE, 24  
BE- 1040 BRUSSELS  
VAT n° BE 0469.067.848

T +32 2 649 51 64  
[www.uems.eu](http://www.uems.eu)  
[coordination@uems.eu](mailto:coordination@uems.eu)

**4.5. WG Quality Indicators** - Dr Magennis presented the Quality Indicators document, explaining the significance of the colour coding and encouraging UEMS Bodies to test and implement it. He also announced plans to conduct a survey next year to assess the practicability of the Quality Indicators.

## 5. Specialist issues

### 5.1. Update on UEMS Investment Plans

Item will be presented during the Council Meeting.

### 5.2. European Training Requirements

#### 5.2.1. Conclusions and next steps following First UEMS-ETR Conference

Prof. Nada Čikeš  
Chair of the UEMS ETR RC

In the initial section of her presentation, Prof. Čikeš outlined the conclusions and future steps stemming from the *First UEMS - ETR Conference*.

Basis for future work:

- Study on the implementation of ETRs in UEMS member countries - Qualitative analysis with AI summaries.
- Results of the Pannel discussions at the 1st ETR conference – CHAT GPT analysis.
- Lancet Commission document: Health professionals for a new century: transforming education to strengthen health systems in an interdependent world - [https://www.thelancet.com/article/S0140-6736\(10\)61854-5/fulltext](https://www.thelancet.com/article/S0140-6736(10)61854-5/fulltext) .
- UEMS S&B published experience of writing, adopting and implementing ETRs (example: Brittlebank, A., Hermans, M., Bhugra, D. *et al.* Training in psychiatry throughout Europe. *Eur Arch Psychiatry Clin Neurosci* **266**, 155–164, 2016)
- Principles of modern Competence based medical education etc.

In the second part of her presentation, Prof. Čikeš spoke about the roles and responsibilities of the ETR Review Committee, highlighting the crucial task of modernising the ETR Template, creating guidelines aligned with CBME principles, introducing the new ETR RC composition, and outlining future steps for UEMS Bodies and NMAs.

Prof. Čikeš also highlighted that five countries have commendably implemented CBME, serving as role models for other NMAs.

The article "Train the Trainers" was discussed, emphasizing the importance of encouraging countries to adhere to a structured curriculum and produce ETRs. Recommendations for the "Train the Trainers" initiative were also presented.



# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

Association internationale sans but lucratif  
EU Transparency Register 219038730914-92

International non-profit organisation

RUE DE L'INDUSTRIE, 24  
BE- 1040 BRUSSELS  
VAT n° BE 0469.067.848

T +32 2 649 51 64  
[www.uems.eu](http://www.uems.eu)  
[coordination@uems.eu](mailto:coordination@uems.eu)

## 5.2.2. Training Requirements for the Specialty of Emergency Medicine\*\*

Dr Ruth Brown

President of the UEMS Section of Emergency Medicine

Dr Brown delivered the presentation of the ETR for EM. The President of the EM Section outlined that this discipline is relatively new in many countries. The EU curriculum has been in place since 2002, and the first ETR was adopted in 2019, project that reunited education and exam committees, as well as the EM Section and Board, and EM trainees. Countries have generally responded positively to the ETR, appreciating the recognition of variation and the 'gold standard' it provides for transitioning to a primary specialty. Specific feedback included suggestions to base the new specialty training on the ETR outline, with a focus on the number of trainees per supervisor.

Key updates include:

- Adapted structure and training requirements for trainees
- Integration of CanMeds competencies
- Translations into the syllabus
- Clear development of trainee independence, with a focus on bedside teaching and regular clinical assessments
- Recommendations for assessment, evaluation, and trainer requirements etc.

Summary points include: revision of clinical content; inclusion of growing independence and professional competencies, moving towards EPAs; clarity on training locations, etc.

Dr Riklund (Radiology) raised concerns about the demanding list of 69 diagnoses, with 56 required at level 4, and the feasibility of meeting these expectations for EM residents.

Prof. Papalois praised the ETR for both its content and the thorough 18-month consultation process, noting its importance in advancing EM specialty across Europe.

Mr Felice (EBS) inquired about the status of EPAs, to which Dr Brown responded that they have been postponed but may be included in the next revision.

The discussion followed: Dr Curtain (Ophthalmology) recommended including microscopy in the EM. Dr Joris (Radiology) questioned the incorporation of radiologists and CT procedures, comment that was accepted. Prof. Ricci (Radiology) disagreed with allowing trainees to dismiss patients without a CT and opposed other specialists encroaching on radiologists' duties. Dr Magennis (OMFS) stated that radiologists should always be consulted and emphasized that the ETR must address all such scenarios, reflecting European standards.

The ETR for EM was supported with 25 votes in favor, 2 against and 3 absentions.

## 5.2.3. Curriculum and Syllabus for the Specialty of Endocrinology

Dr Maeke Durkan  
UEMS Vice-President

Dr Durkan presented the Curriculum and Syllabus for the Specialty of Endocrinology.





# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

Association internationale sans but lucratif  
EU Transparency Register 219038730914-92

International non-profit organisation

RUE DE L'INDUSTRIE, 24  
BE- 1040 BRUSSELS  
VAT n° BE 0469.067.848

T +32 2 649 51 64  
[www.uems.eu](http://www.uems.eu)  
[coordination@uems.eu](mailto:coordination@uems.eu)

The first iteration, developed around 6 years ago, was approved in Marrakesh and created in close collaboration with the European Society of Endocrinology (ESE). This joint Curriculum and ETR document, with significant input from Prof. Anton Luger, former President of the Endocrinology Section, covers various areas including diabetes, nutrition and obesity, hormonal disorders, endocrine diseases, and sexual disorders. Diabetes remains a key component of the endocrinology curriculum.

As the development of specialist training is ongoing, the curriculum undergoes periodic reviews to stay aligned with current practices. Delegates from the Section and Board contributed to the drafting, and the document has been accepted for publication in the European Journal of Endocrinology. It also incorporates EPAs.

Prof. Papalois clarified that the document is presented not as an ETR but as an exemplary syllabus, acknowledging it as a high-quality work.

## 5.3. Presentations and updates from UEMS Bodies

### 5.3.1. PDM for Pain Medicine for Anaesthesiologists

Prof. Oleg Sabelnikovs  
President of EBA

Prof. Sabelnikovs presented the *Professional Development Module for Pain Medicine for Anaesthesiologists*, explaining that this is a continuation of the ETR for the Specialty of Anaesthesiology. The EBA President explained that there is a **continuum** from undergraduate medical education (UGE) through postgraduate training (PGT) to continuing professional development (CPD). The PDM proposed comprises two sections:

Part 1. General information about the European PDM for anaesthesiologists.

Part 2. Domains and competencies in the PDM Pain Medicine for anaesthesiologists.

Domains of specific pain states: acute, chronic, neopathic.

Domains of specific patient groups: pain medicine in cancer patients; pain, palliative and end of life care; pain medicine in infants, children and adolescence; pain medicine in intensive care medicine.

Prof. Christodoulou (MJC Sports Medicine) inquired about the current inactivity of the MJC in Pain Medicine. Prof. Sabelnikovs explained that the continuation of the ETR is intended to address the gap for advanced medicine, offering an opportunity for already specialized medics rather than residents. The President of EBA acknowledged participation in the MJC PM, but noted its lack of activity, suggesting this initiative could serve as a stimulus.

The UEMS President clarified that Prof. Sabelnikovs was not presenting an ETR but discussing post-specialization matters. It was confirmed that the MJC in Pain Medicine is indeed inactive and expressed hope that the initiative would reignite discussions on pain medicine. Two objectives were outlined: reenergizing the MJC and using this opportunity to plan the way forward after the ETR.

Dr Firth (Pathology) suggested that the PDM should include provisions for adolescents and aspects regarding safeguarding for those lacking capacity, whether adults or children. Prof. Sabelnikovs expressed gratitude for the comments and indicated they could be incorporated.



# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

Association internationale sans but lucratif  
EU Transparency Register 219038730914-92

International non-profit organisation

RUE DE L'INDUSTRIE, 24  
BE- 1040 BRUSSELS  
VAT n° BE 0469.067.848

T +32 2 649 51 64  
[www.uems.eu](http://www.uems.eu)  
[coordination@uems.eu](mailto:coordination@uems.eu)

## 5.3.2. Report from UEMS Urology Section and Board

Prof. Jeroen van Moorselaar  
President EBU

Prof. Van Moorselaar provided a comprehensive report on the UEMS Urology Section and Board (EBU), highlighting the activities of its three key committees: Examination, Certification, and Accreditation. The EBU President noted that a 5-minute timeframe was insufficient to cover all details, given the breadth of the EBU's work, which spans 30 countries, with the UK having recently withdrawn.

The EACCME remains very active in supporting these efforts. The residency training program in urology includes 65 accredited training centers across 19 countries, with a dynamic examination process in place.

The FEBU fellowship, established in 1992, now has around 7,000 fellows. While it was previously awarded for life, it is now granted for a five-year term. The program is expanding internationally, with exams taking place in Egypt and India, though these candidates do not receive the FEBU title.

Televic has become the new exam provider, and the ETRs in Urology was adopted in April 2023. Discussions are ongoing about core procedures in collaboration with ESU, ESRU, and EBU.

VP congratulated the EBU for their outstanding achievements.

## 5.3.3. Report from MJC Adolescent Medicine

Prof. Lina Zabuliene  
President of the MJC Adolescent Medicine and Health

Professor na Zabuliene expressed her gratitude to Amelia from the UEMS Office, to Maeve Durkan and to her colleagues, Anna Gutniak and Bernarda Vogrin. She explained that the team is new and presented the report from the MJC Adolescent Medicine and Health. She inquired if anyone in the audience has children aged 12-24 years. She emphasized the importance of their services, stating that the health and well-being of young people are crucial. The chair of the MJC emphasised that **youth** is a vulnerable population with unique health needs and challenges, predicted by biological, psychological and social development. She highlighted the need to understand how to handle the attitudes and behaviors of adolescents and young adults and stressed the significance of parental involvement.

She also discussed social development and the social determinants of health, such as media, peers, employment, and education. Professor Zabuliene elaborated on adolescent medicine, distinguishing between transition and transfer, and explained that health care transition involves moving from a child/family-centered model to an adult/patient-centered model.

Prof. Zabuliene further presented the **EuTEACH Summer School**, taking place in July, as well as the other upcoming events on the agenda of the MJC AMH.

Prof. Zabuliene concluded her presentation by extending an invitation to the audience to join the MJC of Adolescent Medicine.





# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

Association internationale sans but lucratif  
EU Transparency Register 219038730914-92

International non-profit organisation

RUE DE L'INDUSTRIE, 24  
BE- 1040 BRUSSELS  
VAT n° BE 0469.067.848

T +32 2 649 51 64  
[www.uems.eu](http://www.uems.eu)  
[coordination@uems.eu](mailto:coordination@uems.eu)

## 5.3.4. Report from MJC Breast Care

*Prof. Florentia Peintinger*  
*President of the MJC Breast Care*

Professor Florentia Peintinger, a gynecologist and breast cancer specialist, presented the recent work of the MJC BC. The focus of the Breast Cancer Specialist Trainings is to assess the current standards of breast cancer evaluation in Europe, with the primary goal of identifying the professionals involved in diagnosis and treatment.

The chair of the MJC BC provided an overview of the assessment of current standards in training and practice, which involved an online questionnaire consisting of 20 questions. This effort was conducted in cooperation with EUBreast. The results of the questionnaire highlighted the specialties most involved in breast cancer care, with gynaecology being prominent.

Key findings included that 39.3% of respondents reported their centres treated a maximum of 150 cases per year, not meeting the EUSOMA caseload criteria. Additionally, 32% of respondents had not participated in any peer-reviewed publications in the last three years, and 37.6% had engaged in training or continuing medical education (CME) and continuing professional development (CPD).

In summary, Professor Peintinger recommended optimizing CME and CPD. She suggested publishing these findings to raise awareness of the disparities in breast cancer care among specialists and requested the support of the UEMS Section.

## 6. AOB

- Dr Magennis presented and asked for feedback on a couple of matters such as: management fees changed into '*funds*'; feedback on the new accounting processes; budget Summary Report for UEMS Bodies; new Software module creates opportunities (website) etc.

*Items in italic with \*\* require a vote or a decision.*

Delegates were invited to attend the UEMS Gala Dinner, at the *Le Châtelain Brussels Hotel*.