Internal Medicine in Europe: past, present and future

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EFIM

• The European Federation of Internal Medicine (EFIM) is a scientific organisation founded in 1996 from the Association Européenne de Médecine Interne (AEMI)
• EFIM was formed by bringing together the national societies of internal medicine in each of the European countries, both inside and outside the European Union.
• EFIM is aimed to re-emphasise the central role of internal medicine in the era of complexity

History of (Young) AEMI(E) and the EFIM. UEF Carcassi, JWF Elte, C Davidson Eur J Int Med 2007; 18: 26-30.
Origin of EFIM

• Founder members:
  - Yves Le Tallec, France (deceased)
  - Ugo Carcassi, Italy
  - Christopher Davidson, England
  - Philippe Jaeger, Switzerland
  - Jaime Merino, Spain
  - Michel Lambert, Belgium
  - (Jan Willem Elte, The Netherlands)
The beginning of EFIM in 1996 (from AEMI)
The original signatures
EFIM composition

- 35 National Societies
- Executive Committee
- Administrative Council
- FDIME
- Working groups
- Secretariat (Brussels)
EFIM

- EFIM = 35 member countries
- 35 countries = 35 health care systems
- 35 health care systems = 35 laws and regulations about medical specialties
- 35 laws and regulations = 35 lists of competencies
- 35 lists of competencies = 35 training programs
- 35 training programs = 35 different ways to become board certified
Different ways of practicing Internal Medicine in Europe

• in the hospital
• in the hospital and in outpatient medicine
• as a consultant
• as a primary care physician
• in acute medicine
• as a general internist
• as an internist with subspecialty
• as an internist with a special field of interest
• as a specialist with an interest in internal medicine (?!)

EFIM Missions

• To uniform the vision of Internal Medicine in Europe
• To revitalize the role of Internal Medicine in the European Health Systems taking into account the actual population
• To interact with the European committees and to promote scientific projects in internal medicine
I wish there were another term to designate the wide field of medical practice which remains after the separation of surgery, midwifery and gynaecology. Not itself a specialty, (though it embraces at least a dozen), its cultivators cannot be called specialists, but bear without reproach the good old name physician, in contradistinction to general practitioners, surgeons, obstetricians and gynaecologists

W. Osler, Internal Medicine as a vocation, in Aequanimitas, 133
The essentials of Internal Medicine (EFIM strategy document)

- Patient care
- Medical knowledge
- Communication skills
- Professionalism
- Academic activities
- Organization and leadership
Definition and mission statement of Internal Medicine

- Internal medicine is the core medical discipline that is responsible for the care of adults with one or more complex, acute, or chronic illnesses, both in the hospital and in the community.

- It is patient-centred, scientifically based and committed to ethical, scientific and holistic principles of care.

*EFIM working group on professional issues in internal medicine in Europe*
Definition and mission statement of Internal Medicine (2)

• Internal medicine, a clinical and scientific discipline, creates and promotes medical knowledge, methods and clinical abilities.

• It analyzes the findings of other medical specialties and integrates them into strategies for diagnosis, treatment and care for the individual patient.

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Definition and mission statement of Internal Medicine (3)

• Specific fields of interests include:
  - problems caused by polymorbidity
  - patients with difficult and complex diagnoses
  - preventive, acute, chronic and palliative care
• Internists are able to translate their knowledge into patient care
• Internists cope with the challenge of developing standards, decision-making, quality improvement and patient safety tools, and integrated health care delivery systems

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Internal medicine is:

- a cornerstone of any modern health care system
4. Concluding remarks

European countries need integrated healthcare systems which allow efficient coordination of the various medical specialties and their ever growing diagnostic and therapeutic armamentarium.

Medical care has to be optimized, not maximized. Internists are patient-centred specialists, who can fulfill this task. As generalists they have a broad knowledge of all aspects of medicine for adults, which put them in the lead to provide and coordinate medical care.

Therefore, internal medicine is a cornerstone of every national health care system.
The practice of internal medicine in Europe: organisation, clinical conditions and procedures

Mark Cranston, Colin Semple, Roger Duckitt, Moshe Vardi, Stefan Lindgren, Christopher Davidson, Runolfur Palsson, for the European Board of Internal Medicine Competencies Working Group

European Journal of Internal Medicine 24 (2013) 627–632
What are European internists like?

![Bar chart showing the percentage of internists specializing in internal medicine alone versus internal medicine plus a specialty across different European countries.]

Courtesy of Runolfur Palsson
The practice of internists

• In 8 countries, the majority of internists practice only Internal Medicine
  – Austria, Czech Republic, France, Germany, Greece, Portugal, Romania and Spain
• In 8 countries, 30-50% of internists practice Internal Medicine and a subspecialty
• A minority of internists practice only a subspecialty
• The majority of internists are hospital-based
• At least half of internists in Germany, Greece, Poland, Slovakia and Switzerland practice exclusively in an office setting
What we need?

- Medical care has to be optimized, not maximized
- Europe`s health care systems need patient-centred generalists who have a broad knowledge of all aspects of medicine for adults
- Good coordination of all services must have an impact on health care quality, on access to medicine, on the rational use of the resources and on providing cost effective care.
• It is time to redesign postgraduate training in internal medicine
How to achieve that?

- Working together under EFIM umbrella for achieving the adequate recognition of Internist’s role in health care system and to redesign a common training curriculum in Internal Medicine
- Working group with UEMS and EBIM
Original article

Postgraduate education in internal medicine in Europe

Mark Cranston, Monique Slee-Valentijn, Christopher Davidson, Stefan Lindgren, Colin Semple, Runolfur Palsson for the European Board of Internal Medicine Competencies Working Group

‘EFIM offers some tools to improve Medical Education’

• EJIM
• ESIM
• Congresses
• Young internists
• Research course
• Foundation
• Exchange programme
• …

‘It is time to develop a common competency-based Curriculum for IM training programmes in Europe’
EFIM SCHOOL

• The European School of Internal Medicine was born in 1998 from a proposal from the Spanish Society of Internal Medicine.

• The primary goal was to promote good quality continuous medical education for young internists from our member societies.

• Second, and no less important, was to make the School a meeting point for European residents - a place for exchange and friendship.

• From 2011 we have planned to run 2 ESIM courses per year, with the first Winter School taking place in Switzerland in January 2011.
Internists: specialists for integrated health care

• the training of internists is focused on integrated patient care
• internists are trained in collaborative team work and in a multidisciplinary approach
• a patient with several health problems may need several specialists and may need the support of other health professionals ....but he urgently needs an internist who coordinates them all
• Integrated health care means cost and resource effective health care in the inpatient and in the outpatient setting
Internal medicine: cost effective diagnostics, treatment and care

• In the hospital and in outpatient care increasing costs represent an ever growing problem

• Rational decision making, coordination of diagnostic and therapeutic procedures, and control of effectiveness will help to make wise use of the resources

• These are precisely the core competencies of internists.
Internal medicine: cost effective diagnostics, treatment and care

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‘Internists will contribute to a new profession for a new society’

- A commitment to:
  - professional competence
  - honesty with patients
  - confidentiality
  - excellent patient-doctor relationships
  - quality assurance
  - efficiency
  - new medical knowledge
  - declare conflicts of interest
  - accountability
  - access to health care
Internal medicine should be the cornerstone of every national health care system.
To increase the activities: create subcommittee

- Communication
- ECIM:
- ESIM
- Scientific projects:
- EU affairs
- Fellowship
EU Affairs

• Informing national societies about EU decisions that could affect their members, and becoming a trusted source of information on EU matters.

• Becoming the voice of Internal Medicine in Europe by promoting Internal Medicine at EU level.

• Improving the financial situation of the organisation by getting access the EU funds to finance some of EFIM’s projects.
Possible actions

- Targeted introduction programme
- EU Roundtable event
- Commenting on green papers and consultations
- Participating in policy seminars
- Meeting with relevant EC officials, MEPs and Member States officials
- Proposing amendments
- Forging alliances with other stakeholders
- Drafting and communicating positions
- Opinion articles in leading publications (IHT, FT, European Voice…).
The Journal: EJIM

European Journal of Internal Medicine

Impact factor 2011: 2.0

Flagship of the European Federation of Internal Medicine and the journal for the National Societies
“The good physician treats the disease; the great physician treats the patient who has the disease”

William Osler
The EFMA "Exchange Working Group" would like to introduce you to this Project. The aim of this Programme is to promote short internships of approximately one month among our European specialists' training centers, which will take place in Internal Medicine Units of other EFMA member countries.

- The "Exchange" is open for Internal Medicine trainees in their third to fifth year with a good command of the English language.
- Each National Society will select their candidate with a maximum of 5 per country for the year 2013.
- EFMA will sponsor 12 scholarships of € 600, which number could be increased at the discretion of and sourcing by the National Society.

DO NOT MISS THE OPPORTUNITY TO PARTICIPATE IN THIS GREAT EXPERIENCE!

For further details please visit the EXCHANGE webpage:
http://www.efma.org/en/european-exchange-programme-980

CURRENT PARTICIPATING CENTERS: FRANCE, ISRAEL, ITALY, LUXEMBURG, PORTUGAL, SLOVAKIA, SLOVENIA, SPAIN, TURKEY
The future of IM in Europe

EFIM Young Internists Group