EFIM right now. Our reality and thaughts..

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Dear colleagues, dear friends,

I would like to take advantage of the Portuguese Society of Internal Medicine's kind invitation to inform you about the facts and projects of European Federation of Internal Medicine (EFIM), our young organization that is working hard to develop Internal Medicine (I.N.) and to harmonize their practice in all their countries members.

We are steadily growing, now we are 28 national Societies of Internal Medicine (table), and so, we are grouping more than 35.000 Internists. It is incredible which is our importance on clinical practice, research or ethical behaviour.

Our main activities have been focused to develop I.M. through:

- a) to improve clinical practice
- b) to help the personnel development for Internists
- c) to promote research

A – to improve clinical practice

We are working to elaborate a *White book on I.M.* that allows us much better known the reality of I.M. departments, I.M. training, and Internists feeling about their specialty: With this information we would like elaborate some proposals for a more coordinated development of I.M. The preliminary results should be presented during this meeting.

A working group on *Quality in I.M.* try to expand the "quality philosophy" as an habitual tool in our way of working. We have started with a project on *the patient discharge process*, which is now in progress.

All our clinical practice is full of ethical contents. We have developed The *Professionalism Project*, in collaboration with the foundation of the I.M. Board of U.S.A. and American College of Physicians. It should be an ethical light-house for doctors in their relation with patients. A few months ago it has been published in EJIM, Lancet and Annals of Internal Medicine with warm editorials. Now we try to spread their contents in our countries. It is being translated to other languages and published in the journals of many European countries.

On this field we are now involved in leadering a new project, either more ambitious one: to elaborate a code on *Human Health Rights*, we pretend to write a document able to define both rights and duties of doctors (sanitary professionals), patients (citizens) and society (namely politicians, sanitary and factory managers) on the health-illness binomial,

B – to help the personnel development of Internists

The *European School of I.M.* – Almost 65 I.M. residents and 25 teachers from all european countries, Israel, U.S.A. and Australasia, attended every year to the courses organized by this Autumm school. These courses lasting one week allow the attendees to be updated on some I.M. relevant topics but, more important, it is an unique experience to meet internists from other countries, to know much better how is I.M. in these countries and really to make friends. Now the 6th course entitled *New challenges in I.M.* is ready to begin, as usual in Alicante, but at the end of October.

Continous medical education programme (CME) – We have planned a CME programme we try to develop with (UEMS). The programme will last four years including three

Table – Actual National members of EFIM

Algerian Society of Internal Medicine,

Austrian Society of Internal Medicine,

Belgian Society of Internal Medicine,

Czech Society of Internal Medicine,

Danish Society of Internal Medicine,

Estonian Society of Internal Medicine,

Finnish Society of Internal Medicine,

French Society of Internal Medicine,

German Society of Internal Medicine,

Hellenic Society of Internal Medicine,

Hungarian Society of Internal Medicine,

Association of Physicians of Ireland,

Israeli Society of Internal Medicine,

Italian Society of Internal Medicine,

Latvian Society of Internal Medicine,

Lithuanian Society of Internal Medicine,

Luxembourg Society of Internal Medicine,

Association of Physicians of Malta,

Netherlands Society of Internal Medicine,

Polish Society of Internal Medicine,

Portuguese Society of Internal Medicine,

Slovak Society of Internal Medicine,

Slovenian Society of Internal Medicine,

Spanish Society of Internal Medicine,

Swedish Society of Internal Medicine,

Swiss Society of Internal Medicine,

Turkish Society of Internal Medicine,

Federation of Royal College of Physicians of UK

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issues per year, everyone of them devoted to one of the I.M. sub-especialties. Its issue will be focussed in 25-30 main topics, that would be updated. We pretend to inform more in deep on the two first issues (cardiovascular and infectious diseases) during the Congress.

A course on Methodology of Clinical Research to be developed in France will be offered in the next future.

The European certification on Internal Medicine — We have happily set up a board with UEMS who enable us to develop some projects in a "more official" way. So, we have designed an european certification for those internists belonging to the EFIM National Societies members who voluntarily want to do it. The exam will consist in an objective test, written in English to be fulfilled in every country. We are now elaborating their contents and we will inform you on it at the Congress time.

The Young Internists' exchange scheme — Under coordination of Prof. J. Schifferli this programme has a great tradition. It allows the Internists residents make a part of their training programme in other European country, based on an exchange basis and working with full responsibility.

EFIM congresses – Congresses are, with no doubt, an excellent CME system. Berlin is our 4th offer. The organizers have carefully worked to offer an excellent program to reach this goal.

Continuous professional development (CPD) – In the board with UEMS we pretend to elaborate some guidelines to be useful for those countries not having it yet, and trying to do this in a more armonic way among EFIM countries.

Nomination of *fellows and honorary fellows* – This is the way EFIM has created two recognize merits and to honour outstanding people who had develop relevant activities to promote I.M.

C - to promote research

European Journal of Internal Medicine — Our journal is an excellent way to show the results of our research activity but also it is something more. The journal is our voice and an excellent vehicle for CME. It is continuously growing. Now we are publishing 8 issues per year. It has reached a very high quality and we are working to produce its electronic version. We have got a good agreement with our publisher in order to offer all the internists the possibility to have an open access to the full text, and at the same time to keep the paper version, both subscriptions at a very low fee.

Working group on research – Prof. L. Guillevine is strongly pushing this activity. Some countries have proposed some multicenter-studies to be developed, and many other ones have accepted to participate. The list of accepted on going trials is: Atherosclerosis; European register of rare diseases; HBV associated polyarteritis nodosum; vaccination in autoimmune diseases; epidemiology of autoimmune diseases.

EFIM Congresses - As I told before, our congresses are

an excellent tool to promote research. More than 650 originals have been submitted to this congress.

To develop all these activities EFIM has created

EFIM Foundation – Under the initiative of Prof. Jaegger our foundation has initiated its activities. We consider the foundation a very useful tool to obtain new resources to develop EFIM projects.

Newsletter – Twice a year we produce a newsletter. With this, we try all our internists members were well informed about our projects. We have changed the initial paper version to a more versatil Internet one: you can have all this information through our...

EFIM web – Our web (*www.efim.org*) is linked with many webs of the european Societies on I.M. We pretend to create a network allowing us to be informed about the different activities offered to the european internists.

A *role of Ambassador* – The members of EFIM board have attended many European I.M. meetings. Our aim has been to offer a most closer and real information on our activities on the spot, and to establish tightened friendship links.

An spanish poet said: "the way is done at the time we walked in". We are doing the way, and I feel we do the way in the right way. The board has pretended to enlarge I.M. activities, but keeping our most outstanding character, to put the patients well-being over other considerations, with a real humanistic approach to them. In our work searching for the excellence, doing it with the highest quality, being cost-efficient and acting with a very high ethical approach

The heritage we have received has been great. Our task is to enlarge it and offer it to our sucessors. All the internists should be proud on our way of being professionals. I hope we will be able to offer a great heritage to the young generations.

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■ PONTOS DE VISTA