European Academy of Paediatrics meeting, Brussels 12 & 13th Dec 2008

This report summarises the European Academy of Paediatrics’ meeting held in Brussels on 12 & 13th December 2008.

1. General overview: The European Academy of Paediatrics

The European Academy of Paediatrics (EAP) www.eapaediatrics.eu exists to promote the health of children and young people in Europe. It aims to improve standards in training, service and research & to represent the professional interests of paediatricians working in the EU. It incorporates the Section of Paediatrics of the European Union of Medical Specialists (UEMS) and therefore has influence in the political arena to advocate for children and young people as well as for the profession.

The EAP is run by an executive committee accountable to the General Assembly which represents the membership. It includes the European Board of Paediatrics. There are 3 groups consisting of members who are paediatricians working in primary, secondary and tertiary care respectively. The General Assembly consists of 2 delegates from every European country, delegates from the groups and a representative from every European specialist paediatric society. The General Assembly elects the executive committee and meets twice a year.

The EAP has now outgrown its limited manpower & also needs to increase its financial resources. It has new statutes (2008) approved by the Belgium Court of Commerce.

The European Board of Paediatrics is a standing committee of the EAP. It serves the educational interests and needs of European Paediatrics and concerns itself with training assessment and continued medical education. Its aims include:

- to harmonise training programmes in all member countries so that all specialist in Europe have the same competencies
- recommend minimal standards
- assess the quality of training
- institute both formative (in-training) & summative (exit) examinations.
- curriculum and visitation programme (by tertiary sub specialty groups)

The SSIEM is recognised by the EAP as the specialist professional body within Europe for Paediatric Inherited Metabolic Disease. As such the SSIEM sends a representative to the tertiary care group and the general assembly. The representative is the chairman of the SSIEM’s Educational & Training Advisory Group (ETAC).

2. Medicines for children working group

- A paediatric committee (PCDO) has now been established with the European Medicines Advisory Committee (EMEA) (http://www.emea.europa.eu/htms/general/contacts/PDCO/PDCO.html). All new products are subject to a paediatric investigation plan (PIP) or, if
thought not relevant to children, are subject to a waiver or deferral. The PDCO has a number or roles for example to assess PIPs, waivers & deferrals and data compliance with the agreed PIP. Since its establishment the PDCO has assessed over 200 PIPs and over reviewed 300 waivers.

- **ERA-NET (European Research Area by means of Networking between research funding organisations has been established to enable cooperation between funding bodies thro’ out Europe.**

- **PRIOMED (Priority Medicines For Children) (www.priomedchild.eu) has been established to accelerate the development of evidence based medicines for children, stimulate cooperation, set up a European Research Agenda and to place the topic of medicines for children on the political agenda. Every partner (currently 10 countries, including the MRC from the UK) is required to put money into the pot. PRIOMED was establishes in Jan 2007 & funded by Framework 6. Work is currently divided into 6 work packages (WP1-WP6) (eg WP2 benchmarks national programmes). Next steps to include defining research themes, allocating national research budgets and launch a call for proposals.

3. **UEMS-EACCME. This body provides CME registration for course. The provider of the course applies on-line. The request is forwarded for assessment to the national accrediting authority or specialist society for approval. If approved the UEMS-EACCME sends a certificate to the provider. There is a cost which depends upon the number of expected delegates. For further details see [http://www.eaccme.eu/Help.aspx](http://www.eaccme.eu/Help.aspx).**

4. **COST (European Cooperation in Science & Technology) (www.cost.esf.org) is a body within the EU that aims to strengthen scientific & technical research. It supports networking but does not fund research directly. One of its sections is Biomedicine & Molecular Biosciences.**

5. **Tertiary care meeting**

- **Syllabi**
  Over the past 10 years syllabi have been developed for all 11 sub-specialities within the EAP. It is planned that when revised these syllabi should follow a basic template in a modular form.

- **Visitations Programme**
  This is only usually used when there is no national visitation programme. Allergology have approved 5 training centres in Spain. [Allergology have also certified individuals – but not under the auspices of the EAP. [The SSIEM has previously undertaken 2 training centres assessments – Heidelberg & Prague. However ETAC has not received any formal requests for additional visits]

- **Mastercourse**
  In order to improve harmonisation a ‘common trunk’ is being developed (see later)
• Chair – currently Dr Stefanidis who will be standing for re-election next year. On the executive committee of EAP are 2 representatives from the tertiary group.
• 3rd Congress – (Nice 2008) 2700 delegates. In future will be called the Congress of the European Paediatric Societies. Strong science theme but also strong support for primary & secondary paediatrics.

6. EAP-EBP plenary meeting

External affairs
• UEMS. Have approved change of name from CESP to EAP providing that UEMS- Section of Paediatrics is also used. The key actions of the UEMS include increasing the political significance of specialities, harmonising post graduate training, coordinating CME/CPD in Europe, providing quality assurance, and a leadership & managerial role.
• American Academy of Pediatrics) AAP. There is increasing cooperation with the AAP.
• International Paediatric Association. Collaboration has been suggested by the EAP but nothing formal is happening as yet.

European Board of Paediatrics
• Primary aim is harmonisation of training in paediatrics within the EU
• Oversees development of syllabi and recommends standards for training.
• Currently developing a Paediatric EuroMasterCourse based on the MRCPCH Master Course (2 volume text with DVD). This edition will be revised to be relevant to all EU countries but with national specific information on a web site. Cost will be €120 to 150. Due to be launched 2010.
• Training centres. The EBP is responsible (through it sub speciality groups) for recommending minimal standards for tertiary training centres but in future plans to do the same with secondary training by working with national bodies.
• The EBP will implement 2 exams. 1st will be an in-training exam and 2nd an exit exam. May be cooperation with the AAP. The aim is to access strengths and weakness in core areas of general paediatric knowledge.

Archives of Diseases in Childhood (ADC).
• The ADC is now the official journal of the EAP.

Finances & Membership
• The EAP is now actively recruiting individual members. The cost of membership enables access to the online version of ADC. The cost is €80 for 1 year or €120 for 2 years. Membership is open to any board-certified paediatrician or equivalent. Affiliate membership is open to paediatric trainees, allied health care professionals & paediatric nurses (€30 for 1 year without online ADC, €70 with ADC)
• The EAP has financial contributions from member countries (from their national paediatric societies). The contribution is based on the population, income per inhabitant and number of specialists. Current income from this is €30,000 per year.

Dr John Walter
Chairman, Education & Training Advisory Group