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from the UEMS Constituency



Neurology

This paper was written by Wolfgang Grisold and David Vodusek. Material was used from the UEMS protocols, the UEMS/EBN website and several websites and publications have been used.

Website: <http://www.uems-neuroboard.org/ebn/>

The UEMS /EBN works within the UEMS structures which are defined by the UEMS council, board and sections and the national delegates. As a medical doctor representation the UEMS serves the ultimate purpose of improved neurological care for patients provided by optimally prepared medical fields (sections). It uses several methods to achieve this, but the intensive connection and representation of UEMS in national medical societies serves both the propagation of the UEMS activity and conversely is a potent feedback loop from national societies and practiced medicine.

The UEMS/EBN is aware of its important role, and the important mission of the UEMS within the enlarging Europe. The UEMS/EBN mission was primarily aimed to establish minimal achievable standards in neurology, as the core curriculum and also the chapter 6. Increasingly the UEMS EBN takes on more proactive missions as the visitation of departments, the future board examinations and several other missions which will be described subsequently.

Is there a need for the activity of the UEMS /EBN in the light of national neurological societies and large neurological European societies as the ENS and the EFNS?

This questions needs to be answered in more detail: Neurology is still has a heterogeneous representation in Europe. Several publications ("One Europe, one neurologist"; Grisold 2007),

have demonstrated, that depending on the medical system of a country the number of neurologists, the number of neurological beds, the characteristics of in- outpatient services can be defined. There are gross differences in Western Europe, more in the new EU states and even more in other European states not belonging to the EU yet. To help to facilitate the achievement of modern standards is an important aim. b) The ENS and EFNS serve the main purpose to be scientific societies which is performed by a yearly congress organisation, teaching courses and increasingly the support of education activities as travel grants or fellowships.

Although the EFNS with its council of delegates has a strong political function, the EFNS also engages in educational activities. A joint work of the UEMS/EBN with the education committee of EFNS has provided guidelines for CME and has published the core curriculum (Cellos Pontes 2005), which is a strong move for common educational activities in European neurology. Both scientific societies however lack comparable political mission and competence of the UEMS which by its definition and position is able to represent neurology in this European setting.

At present the ENS can be considered an individual based European neurological Society, and the EFNS a federal, membership based neurological society. Other European Societies as Epilepsy, Stroke, Movement Disorder, Neurooncology (EANO) , MS , Headache are also important representations, but are scientifically more specialized and so far do not express general political activities.



This short outline emphasizes, that the role of the UEMS/ EBN is clearly within the scope of the UEMS, serving with its competence and structure the development and maintenance of neurology within the European countries. As this body it will cooperate with all European neurological scientific societies in matters of science, education or important neuropolitical issues.

W. Grisold, R. Galvin, V. Lisnic, J. Lopes Limad, E. Mueller, St. Oberndorfer, D. B. Vodusek and UEMS-EBN and EFNS Education Committee. One Europe one neurologist ? European Journal of Neurology 2007, 14: 241-247

C Pontes. Recommended core curriculum for a specialist training program in neurology. European Journal of Neurology 2005; 12: 743-746

Development:

The UEMS EBN had a constant development since the middle of the 90 es. At this time the UEMS/EBN was well established and represented the working group of the national professional and scientific societies. The contents of the discussions were educational, scientific and quality issues, and already in 1995 a visitation program of neurological training centres was suggested, which never advanced. At this time the two big European neurological societies, the ENS had already well developed and the EFNS (which was at this time a fairly young society) formed and it was a matter of many debates on how and whom with the UEMS EBN section of neurology should cooperate. It soon became clear that the EFNS, as the democratic federation of neurological societies seemed more suitable for common interests as regarded, postgraduate education and CME and "neuropolitical" issues. Finally it was decided, that the EFNS was granted a permanent observer in the UEMS /EBN meetings, which however was not granted reciprocally to the UEMS/EBN from the EFNS until now. Jointly several programs were developed, and resulted in common publications as the

neurological core curriculum (Celso Pontes 2005) , CME accreditations (Vodusek 2004) , finally in the invitation to the EFNS to join the UEMS review system , the UEMS - EACCME as a part of the accreditation commission.

A joint program of exchange of trainees OFTEN was developed jointly and also published (Gilhus 2002). For some reason or other it never became very popular, and is now managed by the YNT (<http://www.eaynt.org/>) as a database for neurologists interested in exchange or collection experience in a different health system or medical affairs.

Gilhus NE, Frederico A, Grisold W, Müller L, Lopes Lima JM
Open facilities for training in European Neurology (OFTEN): a European Board of Neurology initiative.
Europ J Neurol 2002; 9 : 349-352

The UEMS EBN- Meetings and structure

The UEMS /EBN has two representatives from each member state. Observers from interested non-member states, and other medical societies are welcome. Election and office times are regulated by internal rules.

The UEMS/EBN has a spring and an autumn meeting each year. For some time, the spring and autumn meetings took place either within the EFNS management committee, or during the EFNS congresses. Some years ago it was decided to change the pattern of spring meetings into a meeting taking place jointly with an inviting national neurological society. In this way, the local national society would be able to learn about the UEMS activities and also new connections could be established (these meetings were held in: Athens, Cork, Cyprus and Luxemburg and in Porto in 2008).

For several years, the EFNS main office in Vienna was able to manage the UEMS /EBN agenda, meeting organisations and also the EACCME accreditation, which was at the time a fruitful cooperation for the UEMS /EBN and the EFNS. As the EFNS expanded, there were

less and fewer capacities and interest for the growing UEMS/ EBN administration and two new additional independent structures were established:

- a) The UEMS EBN website (<http://www.uems-neuroboard.org/ebn/>) which serves the members as a virtual office, with documents, exchange of correspondence and discussion documents for members.
- b) In 2007 the Vienna medical academy was contracted (www.medacad.org) by the UEMS EBN for secretarial and organisational work in the sense of society management.

The website as a virtual office and the WMA office are complementary and have enough capacity for the future expanding tasks of the UEMS/EBN which will be the visitation of departments and the establishment of European board examinations in the near future. Both of these activities need a structured administrative approach, which need professional assistance and maintenance.

Work with other societies and sections:

The work and collaboration with other sections, MJC's and other medical societies is an important concept for the UEMS/EBN. Subsequently examples of cooperation with sections and societies will be briefly described:

Neurology and **psychiatry** both have a long tradition. In most member states there is a separation of both societies- Recent development of biological psychiatry will again need strong links between each other. Neurology and Psychiatry have a mutual interest in brain diseases, which take up a great proportion in chronic diseases. The European Brain Council (<http://www.europeanbraincouncil.org/>) is actively pursuing these important aspects.

The growing awareness of **neurorehabilitation** needs to incorporate neurorehabilitation into many medical national neurological societies.

The European Brain Council has analyzed the burden of disease caused by brain disease in Europe (Costs of Disorders of the Brain in Europe; EUROPEAN JOURNAL OF NEUROLOGY. Volume 12, Supplement 1, June 2005).

Several attempts were made between the section of neurology and the section of physical medicine and rehabilitation (<http://pagesperso-orange.fr/pmrboard/index.htm>) to increase awareness and attention for each other, and ultimately join forces in neurorehabilitation. It is hoped that in the future a common platform between the two sections can be established to aim at a common effort to establishing scientific and practical common projects.

Neurosurgery, Oncology. Radiotherapy

Traditionally neurology and neurosurgery (Ilona.Anders@med.uni-muenchen.de) have close links in regard to diseases of the brain and spinal cord. In the past years a mutual exchange of observers at UEMS/EBN or neurosurgery meetings has been fruitfully established.

Neurooncology is appearing as a new interdisciplinary field dedicated to patients with brain tumours and also secondary effects of cancer as metastases or therapy related effects. In the future a subspecialty of NO consisting out of neurologist, Neurosurgeons, general oncologists, radiotherapists will be developed to meet the need of patients with an interdisciplinary effort. In the US neurooncology has already been established as a "subspeciality" of neurology.

Child neurology

The neurological care of children with neurological diseases is handled in different settings in Europe. The spectrum reaches from the inclusion of child neurology within neurology to The complete absorption of child neurology in (neuro) paediatrics. After long negotiations it was agreed to create paediatric neurology within paediatrics, with an equal access of both neurologists and paediatricians. Neuroradiology



Over the years several societies of neuroradiology developed suggesting the need for an own (sub-) speciality. Among other considerations a subsection within neurology, neurosurgery and radiology was seriously discussed. Finally it seems to become a subsection of radiology.

Neuropathology:

Neuropathology has been sending observers to the UEMS/EBN traditionally. As this field is positioned between neurology and pathology, important inputs can be expected. In some European countries historically neuropathology and clinical neurology still have a strong common link.

Clinical Neurophysiology

In the past years the section of clinical neurophysiology developed as an independent section. And is practiced in several European countries as a speciality, distinct from neurology. A European Core Curriculum of clinical neurophysiology has been published (http://www.apeegnc.org/HTMLobj-187/Curriculum_for_Europe__1_.pdf). Neurologists in several European countries are living in an association with Clinical Neurophysiology, in others these investigational tasks are done by neurologists. This means that acceptance and cooperation is still a process, which is often up to the national situation, and will a matter of negotiations in years to come. In the US recent approvals of subspecialty designations for neuromuscular pathology have become a reality.

Intensive care medicine

Presently there is a strong movement to make intensive care medicine a new specialization within medicine. Neurology, which is involved in all types of intensive medicine, from anaesthesiology, neurosurgery, internal medicine etc does not support this move.

In recent years the UEMS has suggested the development of Multidisciplinary Joint Committees (MJC). Access into a MJC can be granted to sections of the UEMS to develop a

joint committee on interdisciplinary issues. The UEMS EBNS has actively expressed interest in Genetics and in Immunology.

The permanent working group of European junior doctors (PWG) (<http://www.juniordoctors.eu/pwg/site/index.php?lnk=about.uems>) has a representative in the UEMS/EBN to advice and give opinion from the position of trainees and young neurologists.

YNT is an independent group representing the interests of trainees in neurology and of young neurologists. Their ideas and suggestions are welcome.

In Europe in the moment two large scientific neurological societies, the ENS (<http://www.ensinfo.com/>) and the EFNS (www.efns.org) exist. With both societies relations exist.

Education:

From the classical concept education can be divided into pregraduate education and postgraduate education, which consist of training and continuous medical education (CME/CPD). The UEMS/EBN has fruitfully developed the basis of educational procedures, mostly in cooperation with the education committee of the EFNS:

Pregraduate education:

The document, published under the chair of Lopes Lima, is a multinational consensus on the importance of pregraduate university training in neurology. It gives the minimum requirements of neurology teaching, number of cases and diseases to be discussed in modern university curricula. This paper is an important step in implementing neurology firmer in pregraduate education, and can be used as a source to design new curricula.

J. M. Lopes Lima, A. Mesec, I. M. S. Wilkinson, C. M. Wiles, N-E. Gilhus, F. Zimprich, Y. V. Alekseenko and W. Grisold

EFNS TASK FORCE ARTICLE

Report of the Task Force on pre-graduate education in Europe, of the Education Committee of the European



*Federation of Neurological Societies
EJN 2006, doi:10.1111/j.1468-1331.2006.01331.x,
European Journal of Neurology 2006*

Postgraduate training I: residency and training

Neurological training is one of the main issues of the UEMS/EBN. Several questionnaire based investigations have demonstrated that neurological training depends very much on the national health system and the national structure of neurology. A Core Curriculum for a specialist training program was developed by the UEMS/EBN and the EFNS and published in 2005 (C Pontes). The UEMS chapter 6 on neurological training (www.uems.net) was re-launched in 2007 and is available at the UEMS website (www.uems.net).

In 2006 the delegates of the UEMS/EBN decided to implement two new activities, which will be part of a quality circle:

- 1) the installation of visitation of departments
- 2) the development of neurological board examinations

Both activities are directed to increase the quality of neurological education and ultimately the quality of patient care in neurology in the future. The preparation of the European board examination is in progress and collaboration with the European scientific neurological societies will be sought.

Recommended core curriculum for a specialist training program in neurology
Consensus document of the EFNS/EBN: Final Draft Paris September 2004
C. Pontes (Chairman) *European Journal of Neurology* 2005, 12: 743–746

Postgraduate training II: CME / CPD; EACCME

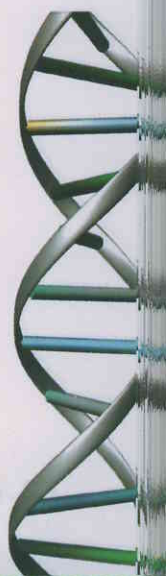
It is generally agreed that the scope and contents of Continuing Medical Education (CME) or rather Continuous Professional Development (CPD) are the responsibility of the medical profession. Thus, one of the basic tasks of any European neurological society is promoting quality CME / CPD also on an inter-European basis. A quality programme

developed in one European country may well be of benefit in other parts of Europe. European neurologists should accept that CME / CPD are their ethical responsibility. They should be encouraged to participate in quality CME / CPD that meets their individual educational needs no matter in which European country it takes place. (Grisold et al 1997).

To fulfil this important mission, the European Federation of Neurological Societies (EFNS) has created in 1997 a task force, which in 1999 became a standing committee – the EFNS Sub-committee for Continuing Medical Education, which started to promote the concept of CME to the neurological community. It also started to work on guidelines for the approval of high quality CME meetings, which would be applicable throughout Europe. This task was accomplished in 1999 (Grisold et al 1999). These EFNS Guidelines on approval of CME have since been modified to include also enduring material (Vodušek et al 2004).

EFNS guidelines serve to ascertain high quality of educational events and materials, and to guarantee the unbiased nature thereof: CME scientific and educational programmes are free of influence from the industry. Many international and also national societies have since then applied for EFNS CME approval for their meetings and use the EFNS logo and quality statement in their promotional materials, brochures, printed programmes, congress websites, etc.

Acknowledging the importance of CME for European Physicians UEMS (Union Européenne des Médecins spécialistes) (www.uems.net) has also established an official board for accrediting European meetings – the EACCME (European accreditation council for continuing medical education). The UEMS Section of Neurology / European Board of Neurology has identified the unique opportunity to link efforts in Europe to provide the neurological community with quality CME assessment and organized an EACCME neurology advisory



board together with members from the EFNS CME Sub - Committee. This joint advisory board – under the auspices of the UEMS Section of Neurology - serves EACCME as partner for assessment of European neurological CME activity.

Since EACCME is not accrediting enduring material like books, online courses, video courses, the EFNS CME committee is still the only European body reviewing and approving such activities. Several online teaching activities and books do already use the EFNS logo and EFNS CME approval as a sign for high quality educational content.

1. Grisold W, Müller E, and the EFNS Task Force (Ambler Z, Hopkins A, Lopes Lima JM, Piradow M, Porter-Sánchez A, Vodusek DB). Continuing medical education in Europe – trends and developments. *Eur J Neurol* 1997; 4: 109-13.
2. Grisold W, Ambler Z, Hopkins A, Müller E, Piradov M, Portera-Sánchez, Vodusek DB (EFNS Task Force for Continuing Medical Education). European Federation of Neurological Societies (EFNS) - approval (co-sponsorship) of Continuing Medical Education (CME) Meetings. *Eur J Neurol* 1999; 6: 259-65.
3. Vodusek DB, Grisold W, De Visser M, Gilhus NE, Cavaletti G. Guidelines by the European Federation of Neurological Societies (EFNS) subcommittee for Continuing Medical Education (CME) – modification 2003. EFNS – approval of CME. *Eur J Neurol* 2004; 11: 145-51.

Teaching Courses/Summer schools:

The UEMS /EBN for a time also entertained the idea to create teaching courses, or "summer schools" but this idea was cancelled due to the abundant teaching course activities of both European societies, and also other neurological societies as Stroke, Epilepsy and Neurooncology (EANO).

In the light of the approaching board

examinations the idea of implementation of UEMS/EBN courses might be reconsidered.

Visions:

The UEMS /EBN is an organisation in a moving field. The speed of movement is not only dictated by the scientific progress, but also by circumstances as the growing of Europe, the diversity of medical systems, economic aspects and medico-economic conditions, to name a few. The UEMS EBN has the strategy of development and maintenance and also needs visions for future tasks and developments.

In the past century a sequence of scientific approaches to neurology appeared.

Neurology was initially based on morphology and neuropathology, later electrophysiology, neurochemistry, neuroimmunology and recently genetics and imaging based. It remains open at the moment, what the next scientific main theme will be in the future, but whatever it is, it will have a strong impact on the future practice of neurology and thus will influence the profession.

As a very recent development the EFNS has invited the UEMS/EBN to participate in scientific EFNS panels. The first panel, where the UEMS/EBN will actively participate is neuropalliative care, which will actively expand the scientific background of neuropalliative medicine. This is a big step forward in the direction of integration of science and professional representation.

Several aspects are just being created or will need future development:

1. Strong and active **national representation** in the UEMS/EBN which has to be attractive for national societies, neurological societies alike.
2. **The UEMS/EBN** will need a lean and effective organisational platform, consisting of a virtual office (WEB) and a secretarial office, which has competent services for additional services as exams, visits and other personal based services for the section.

The health systems of the new EU states are currently in change and reconstruction and the UEMS/EBN will be eager to assist in all respects of neurological issues.

Summary:

The UEMS/EBN is aware of its responsibility of professional neurological representation in Europe. Training, continuous education and quality assurance are one of the core issues of the EBN. The development of neurology also in cooperation with other sections, MJC's and societies is an important responsibility. New agendas will be ethical issues, palliative care and assistance with the development of neurological care in all European states.

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