



AEPC Newsletter

Will paediatric cardiology become a mono-specialty in Europe?

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The battle ahead

THE UNION OF EUROPEAN MEDICAL Specialists held a Meeting from 22nd to 24th October in Brussels in order to “celebrate” the 40th anniversary of the Union. I attended the Meeting for the first time as President of our Association and, together with Otto Daniëls, represented Paediatric Cardiology. I left the Meeting wondering who had coined the word “Union” to describe the organisation!

There are many “Specialist Sections” within Medicine, such as Cardiology, Endocrinology, Gastroenterology, Nephrology, Neurology, and so on. Within specialties concerning children, the Specialist Sections are Paediatrics, Paediatric Surgery, and Child and Adolescent Psychiatry. Paediatric Cardiology has the distinction of being an “Associate Specialist Section”. The only other Associate section is Vascular Surgery.

I submitted a report to a Meeting of the Specialist Sections of the Union, the full text of which is printed below. It is important that all those concerned with Cardiology in the Young should be aware that the members of the Paediatric Section are strongly opposed to Paediatric Cardiology, or any of the so called sub-specialties of Paediatrics, being recognised as Specialist Sections, or “Mono-specialties”, in their own right. There also appears to be a move within Medicine, and in Surgery, for those rather general specialties to have all of the currently recognised specialties within their general area to become sub-specialties of either Medicine or Surgery.

It seems unlikely that the clock will be turned back in this way, but we must recognise that the specialty of Paediatrics continues to be a powerful

force. It is doing its utmost to prevent the emergence of any of the sub-specialties of Paediatrics as a Mono-specialty. Paediatric Cardiology has been allied with Cardiology for many years, and this explains how it has been recognised as an “Associate Specialist Section”. The background, the present and our vision of the future are summarised in the report which we submitted to the Union. If we are to stand any chance of winning this battle, we must keep ahead of the other specialties by ensuring that we are a strong Professional body. We must keep our training guidelines under constant review, make recommendations for accreditation, develop Continuing Medical Education, and produce audit, protocols, and guidelines for the proper practice of our specialty. We must also confirm at our forthcoming Annual General Meeting that Paediatric Cardiology is a specialty in its own right, and not a sub-specialty of Paediatrics.

Report from the Specialist Associate Section of Paediatric Cardiology. Presented to the meeting of the European Union of Medical Specialists: Brussels, 22-24 October, 1998

Background

From its inception, the Specialty of Paediatric Cardiology has been at the crossroads of Cardiology and Paediatrics. It has always been possible to enter the Specialty with a background in either Paediatrics or Cardiology. The Association for European Paediatric Cardiology, representing Paediatric Cardiologists from all of Europe, has continued to acknowledge this background until this day in its recommendations for general professional training before commencing Higher Specialist Training in Paediatric Cardiology. It is easy to understand why the pioneer Paediatric Cardiologists in their earlier professional development identified so strongly with the Specialty of

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Cardiology. They shared the same techniques and technology as the Adult Cardiologists and referred their patients for surgical treatment to the same Surgeons.

Recent developments

In recent years, Paediatric Cardiology has become even more highly specialised in one direction, while Adult Cardiology has specialised in other directions. It has become clear that Paediatric Cardiology is a Mono-specialty in its own right. The Association for European Paediatric Cardiology has published recommendations for Higher Specialist Training in Paediatric Cardiology (Daniëls and Choussat, *European Heart Journal* 1994, 15, 160–163). These have been accepted by the Union of European Medical Specialists and appear in chapter 6 of the Charter on Training of Medical Specialists published by the European Union in 1995. The Association for European Paediatric Cardiology has recommended that Higher Specialist Training in Paediatric Cardiology should be preceded by some training in Paediatrics, but not necessarily to the level required for Registration as a Paediatrician. Prior training in adult cardiology is also acceptable provided that some basic Postgraduate training in

Paediatrics is also obtained. The Association for European Paediatric Cardiology has a Board of National Delegates from all European countries, the nucleus of which forms an Advisory Professional Committee, which is actively and constantly reviewing criteria for training and accreditation.

The future

Paediatric Cardiology is now recognised by the National Training Authorities of the United Kingdom, Portugal, Sweden, and Germany as a separate Specialty. It is believed the same is true of the Republic of Ireland and the Czech Republic. The Specialty, therefore, meets the criteria for recognition by the Union of European Medical Specialists as a Mono-specialty. The Profession rejects the suggestion that it should be a sub-specialty of Paediatrics. It is too remote from that Specialty, even though most of its Professionals have some background in Paediatrics and very strong Paediatric affiliations. Paediatric Cardiologists will always work closely with both Paediatricians and with Cardiologists, but it is an anomaly to continue to disregard their claim to be recognised in the European Union as a Mono-specialty.