Medical training in Europe

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Medicine is changing. Demography is changing: we are facing the phenomenon of an aging and multi-ethnic population.

Medical education faces a number of challenges, including the rapid increase in biomedical knowledge, constraints on cross-subsidies from clinical activities, and fundamental changes in how adults are educated in a medical setting,.

Knowledge is evolving very fast and doctors must take care of their training, must know where to find information when they need it and must be able to use specialised centres in order to provide the best answer to patients.

We need doctors able to respond to these new instructive and therapeutical needs. .

Among the most important points to develop and teach in school, ethic aspects and socioeconomic implications of the medical practice are a priority.

Doctors must be familiar with peer reviews, Biotechnologies, IT solution and multidisciplinary patient care services, and have to consider the multi-ethnic and multi cultural approach which is charactering more and more today's society.

The Academic health centres top priority will be: to make the continuous improvement of medical education, in providing new types of care, in new ways.

The focal point in medicine is the relationship patient-doctor, a relationship is built on trust and ethics.

Medical treatments have to meet management and efficiency criteria.

Who is playing a key role in the training of tomorrow's doctors ?

1) Public policy

Governments, as a primary providers of medical education, want to ensure a good quality of medical care and want to reduce the costs.

A new approach for tomorrow's medicine is to plan new strategies, taking into consideration new social determinants of health such as: life expectancy, stressful circumstances (anxiety, depression), supporting mothers and young children, poverty and social exclusion, environmental factors and workplace, job security, social support, abuse of alcohol and drugs, food supply and nutrition culture. These factors need to be addressed not only from a medical point of view but also in terms of organisation, social legislation and financial commitment.

2) Patients

Generally, the patient is more informed and more motivated. He receives information on medical support via the media, the internet and the environment he lives in. He is more interested in the quality of life.

Patients are more and more demanding in terms of medical performance, they want to save time and reduce medical errors, they want higher safety and an early intervention.

Doctors must be ready to respond to new patients' needs which are determined by the new frontiers of medicine and have to consider both the psychological and the physical components.

3) Medical schools

Medical schools represent the crucial step of medical training. The preparation degree of tomorrow's MDs depends on the schools' structure and organisation and on the programs offered to students.

Medical schools play and important role in pre-graduate, post graduate and Continuing Medical Education and Life Long-Learning.

Medical schools should provide that students meet patients early on in the course, and use the latest high-tech learning tools.

Medical schools should pay attention to the changes which occur within our society and offer adequate training, according to the needs.

Since doctors are daily confronted with more and more red tape and regulations and are increasingly required to understand the intricacies, it is vital to teach the students how to negotiate with an insurance company or with to the administration of a hospital.

New doctors, must be trained in research programs, and business world in assessing the quality of the health care system and in quality assurance. They must be familiar with telemedicine tools and have to take part in clinical trials.

Genetic therapies are giving room to many hopes. From biotechnologies and immunology we expect solutions which will treat the majority of the pathologies.

The use of robot-surgeons, IT based techniques and telemedicine let use think about less and less invasive therapeutical solutions with great impact.

Medical school must insert Patient Management and High-tech training courses in the curricula.

In the last few years, medical training has undergone reforms in many European countries in order to be in line with the "Bologna process" which gave rise to many controversies and does not find an unanimous consensus yet.

4) Hospitals

Hospitals are the most appropriate place where to develop partnership of hospital and general practice teachers. This means that students can follow patients seen in hospital into the community and their own homes. They will learn to appreciate the patient>s illness in longitudinal perspective, encouraging a patient-centred approach, which will be emphasised throughout the course.

5) Insurances

Private insurance companies are more and more present on the health care market, Unfortunately, newly minted physicians often leave medical school lacking the business and management skills necessary for negotiating with an insurance company

6) The pharmaceutical industry

The relationship Doctor-pharma industry has to be based on ethics and must respect the interests of the two parties.