March meeting in Naples

The last EuroNet Executive Committee meeting took place in Naples, Italy, from 15th to 17th of March. These meetings, which take place three times a year, are always vital for us to share ideas and make progress as an organisation. The March meeting was the first of the 2013 Executive Committee, therefore one of the key tasks was to set out our strategy for the year. Four key focus areas were chosen...

Editorial

Dear fellow public health residents,

Welcome to the first newsletter of the European Network of Medical Residents in Public Health (EuroNet MRPH). This aims to share our work as European residents (also known as registrars or trainees depending on where you are based) and to spread the news through the network. In the future you can expect three newsletters per year, each after a EuroNet Executive Committee meeting.

In March we met in Naples and discussed our strategy for 2013. In the following pages you can find out about some of the new developments including improvements of the internships facilitated by EuroNet and a new facility for all residents to propose collaborative projects.

In this first editorial I would like to leave you with a challenge but also with the tools to address that challenge. In the coming decades Europe will face big demographic changes with a rising burden of disease. Due to ongoing economic troubles, many European governments are restricting health budgets. This can be an opportunity for Public Health to "re-centre" the focus from health care delivery to prevention. To address this we need to enable future Public Health professionals to work together, not only nationally, but also at a European level.

The tool for this challenge lies in the ability to share knowledge, best practices and convey innovative approaches to engage communities to pursue better health. Back in 2008 a group of Italian and French residents were able to foresee this and started the embryo of what would become EuroNet MRPH. This network can help us to learn from each other and to create bonds to better address future common challenges.

As Dr. Margaret Chan said, in last year’s World Health Assembly, “the best days for Public Health are still ahead of us”, we want you to take action and help build a better Public Health in the future!

You can make the difference in your own area, make sure you share your problems and successes with us, and take advantage of our network.

On behalf of EuroNet MRPH,

André Peralta Santos
Executive Committee meeting, Naples

New Team

FRANCE
Mael Barthoulot - ED
Alexandre Quach - ED - Vice President
Samuel d'Almeida
Jerome de Launay
Joris Muller
Marie Moitry

ITALY
Guido Maringhini - ED - Treasurer
Annalisa Montante - ED
Cesare Baldini
Lorenzo Bandini
Giorgia Bardelle
Alessio Santoro

PORTUGAL
Ines Campos Matos - ED
Andre Peralta Santos - ED - President
Barbara Aguiar
Bernardo Gomes

SPAIN
Cesar Velasco Munoz - ED
Rocio Zurriaga Carda - ED
Paula Beltran Gutierrez
Isabel Cuevas
Laura Reques Sastre
Salome Valencia

UNITED-KINGDOM
Ruchi Baxi - ED
Jamie Lopez Bernal - ED - Secretary
Rachel Beanland
Eleanor Garnett
Susana Mills
Sarah Payne

Overview

The Executive Committee meetings are useful to establish lines of work and focus points, approve projects and vote on decisions that affect all European partners. We have a new project comparing public health residency programmes in Europe, this study will be coordinated by EuroNet members and everyone will have the opportunity to participate. A new system was developed whereby all public health residents in EuroNet member countries are welcome to send us project proposals for distribution to residents from other countries in order to facilitate international collaborative studies. We can all take advantage of the professional and social links made by our placements among public health residents. European association. EuroNet also began to work in a new wordpress website format, which will be easier to update. Lists of placements in different EuroNet member countries are available on request via the website! The EuroNet Executive Committee is proud to have you in our association and we invite you to continue sending us proposals for collaborative studies and to carry out international public health placements facilitated by us.

Cesar Velasco Munoz

EuroNet Strategy for 2013

Expanding the network:

Currently there are 5 EuroNet member countries (France, Italy, Spain, Portugal and the UK), we felt that it was important to expand the network to include more countries within Europe that have public health training programmes. We are pleased that both Ireland and the Netherlands look likely to become full EuroNet members at the next meeting in Paris and we are also in discussions with Malta, Hungary and Bulgaria regarding membership. If you know any public health residents from European countries that are not currently EuroNet members please do put us in contact with them.

Promoting international internships:

We have prepared lists of example placements within each country that residents from other European countries may be able to take part in. If you are interested in undertaking a placement please contact your own countries executive committee or the EuroNet secretary on mrphnet@gmail.com. We also have a new project that has been proposed which will evaluate the perceived need for international placements among public health residents.

Increasing the visibility of EuroNet MRPH:

We would like to make all residents in EuroNet member countries aware of the network and how it can help them. This newsletter is a prime example of how we are developing our communication strategy. Also, you can now visit the new version of our website at euronetmrph.org which went online in April 2013. Please feel free to post links to our website on any other sites relevant to public health training.

Promoting collaborative projects:

Public health residents should now be receiving adverts of public health projects needing collaboration from residents in different European countries. If you have any projects that you need international collaboration on then please do contact your national EuroNet committee so they can distribute this among the network.
Public health residency is unique in its structure, variability and meaning. Whereas other medical specialties emphasise medical knowledge in one particular field, adding more and more precise competencies to the junior doctor in one same direction, our formation brings us to a much broader scope of interest.

From health policy to quality, health economics to biostatistics and epidemiology, social sciences to management, the new resident faces a whole new world and redefines a career path towards his or her specialty. However, even after specialising all of us will touch on most of these disciplines (we all know the importance of robust methodology if we want our work to be acknowledged by our peers!).

Seeing so many faces of public health, we therefore need (perhaps more than any other specialty) as many options of possible placements as possible. At the same time, we are not bound to one location anymore. Europe is now a vast ‘free-movement’ zone, and yes, that also applies to public health residents!

Some of us have already done valuable internships abroad and came back (or sometimes didn’t). However, organising such placements is often associated with a lot time and effort establishing contacts, arranging supervision and sorting out the bureaucracy. Some of us have tried to organise placements but did not know where to send requests and soon drowned in emails. Ok, I might be exaggerating the picture a bit, but the truth is that it is not easy to find out how and where we can do international placements, even now when international work is routine.

One of the main goals of Euronet is the improvement of European residency programmes through exchanges and mobility. We have dreamed of a common education system for Public Health in Europe, freed from the barriers of boarders and habits. Even if we are far from this stage, we hope that making mobility easier for residents will encourage more and more of us to take this step. Our five member countries – France, Italy, Portugal, Spain and UK- have put together a list out of possible placements to international residents.

Details about the internship objectives, academic training, projects, useful pre-requisites, language spoken and more are provided. If you are a resident in a EuroNet member country you can contact us to find out about internships in any of the other countries. Each country’s placements have a different structure and their own specific requirements. The resident will have to fit those conditions and be able to adapt to their own timeframe, or national constraints. But we could not encourage you more to seize this opportunity to bring a unique experience to your career. We will be happy to put you in contact with the local person responsible for each placement.

Don’t hesitate to share your needs and difficulties relating to the process of organising a placement with us so that we can try to provide you solutions. We would love to hear about any successful (or unsuccessful) placements organised through EuroNet.

Alexandre Quach

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How Euronet can help you?

I want to do an Internship abroad?

If you want to gain experience of public health training in another country, we can help you! We can facilitate the process by providing you with details of what is available and putting you in contact with the correct people. Even if we don’t have the placement that you are looking for we may be able to help you organise a placement at another institution.

I want to do a collaborative project with PH residents from other countries?

If you have an idea for a study or intervention that could benefit from replication in another countries and you want to find collaborators, tell us your idea and we can spread your project through our network of more than 1000 PH residents in 5 countries.

Internships

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Alexandre Quach
The perceived need for international placements

A EuroNet project to evaluate demand for international placements among public health residents

Among Medical Sciences, Public Health (PH) is a unique branch in that it focuses on the population, rather than on the individual. Being passionate about it means to be curious, sociable and creative, but also reflective, critical and rigorous. Many different skills should be gained during our residency programs; we should be able to investigate health determinants, design and carry out scientific studies, collect and analyze data, appraise scientific evidence and develop interventions.

Public Health experts are also expected to address challenging problems, therefore they need to raise public awareness on health risks, promote healthy lifestyles, advocate the reduction of health inequalities and facilitate effective health policies. These are just some examples of the variety of expertise that we are supposed to develop as future PH specialists.

The European Network of Medical Residents in Public Health (Euronet MRPH) is a platform that wants to represent the voice and meet the needs of the future generation of specialists in Public Health. Euronet MRPH has been created to enable a better professional education, to strengthen productive collaboration and to promote international internships among European residents.

One of the aims of Euronet MRPH for the present year is to better evaluate residency programmes and the opinions of PH residents in order to have a clear picture of the demands that should set the mandate of our association. We are positively looking at the future of PH training, considering that certain common standards should be established in order to strengthen collaboration among different institutions and implement individual mobility. With this in mind we are launching two new projects, one comparing the structure and contents of residency programs in different countries and the other investigating residents’ attitudes about international placements. We are aware that many residents are interested in placements abroad but they are often restricted from doing so by bureaucratic and financial barriers.

The current generation of young European medical professionals is going to experience tremendous challenges in the near future. Due to the drawbacks of the international financial crisis and to controversial political choices, Public Health across Europe is facing several threats and universal access to primary care risks being considered unsustainable. If decision makers don’t recognise the importance of prevention and health promotion, inequalities will continue to grow. This could lead to the breakdown of health care systems that have always been set as international examples to follow. Networking and partnerships have indeed a central role in our agenda, we sense that is our duty to catch the opportunity to change our societies; put aside our differences and prejudices to learn from each other. As future PH specialists we are not directly responsible for economical growth but we are expected to do our best, in order to make our communities healthier.

Guido Maringhini
Call for Collaborative Projects

The following projects have been submitted by public health residents looking for international collaborators. Please contact the project coordinator if you are interested.

«Antiretroviral cost and pharmacy policies in Europe»

Antiretroviral therapy (ART) is one of the greatest pharmaceutical expenses in the health systems of developed countries. The way they are bought and dispensed to patients with HIV diagnoses is very different between countries in the European Union. As a result financial costs vary between regions. Depending on the different pharmaceutical regulations these drugs may be dispensed by hospital pharmacies, community pharmacies or specialised units, leading to differences in the access to treatment for European citizens.

Describing the country specific ART purchasing, ART costs, ART management, ART laws, and pharmaceutical differences will provide the scientific community a powerful tool to consult and reference in this field. This is a well-known difference that has never been described in any paper or in a medical presentation.

PROJECT COORDINATOR
Name: César Velasco Muñoz
Country of affiliation: Spain
Contact email: velascomunoz@gmail.com

PROJECT COLLABORATORS
Name: Andreia Leite
Country of affiliation: Portugal
Name: Dave McConalogue
Country of affiliation: United Kingdom

«Impact on health of the economic crisis in Europe - The perspective of young public health professional»

Europe is facing an unprecedented financial and economic crisis. Modern European health systems were built on the premise of stable economic growth, the economic crisis curbed the growing trend of health expenditure. This new scenario, cuts in health and impoverishment of the population, may have a negative impact on the health of communities in the present and especially in the future.

Although the impacts of the crisis on health have been explored within academia, comparison between countries is often scarce, and the perspective of young public health professionals are rarely disclosed.

This project aims to fill that gap by describing the situation of the health system and the impact of economic crisis on health across different European Countries. It also serves as a reminder to the public health stakeholders that economic downturns can impact on population's health.

PROJECT COORDINATOR
Name: André Peralta Santos
Country of affiliation: Portugal
Contact email: andre_peralta@hotmail.com

PROJECT COLLABORATORS
Name: Jilla Burgess-Allen
Country of affiliation: United Kingdom

We are still looking for collaborators from: France, Italy and Spain

Experience or skills required: On a Public Health residency program, travelling and funding are not required.

If you would like to participate in this project contact your national association for more details, or the project initiator
News around Europe

FRANCE

10th Summer School in Public Health of Besançon

The tenth edition of the Summer School in Public Health will take place from June 30th to July 5th 2013, this is organized by the Regional Health Agency (ARS) in Franche-Comté, Faculty of Medicine and Pharmacy of Besançon and their partners. The Summer School aims to make the link between policy and research and respond to concrete problems, promoting reflection and exchange on the original experiments. The promotion of health is the thread.

If you wish to know more about the Summer School visit http://www.inpes.sante.fr/30000/actus2013/006-universite-ete.asp

ITALY

Hepatitis C in Italy: facts and figures

The European Centre for Disease Prevention and Control estimates a hepatitis C incidence of 8.7 per 100 000 in the Member States of the European Union and a high prevalence in injecting drug users. Italy has Europe’s highest prevalence of hepatitis C. Health care specialists and representatives of patients associations have decided to plan a National Strategy against Hepatitis C.

This could be a concrete step within the global action plan against Hepatitis C recommended in 2010 by WHO, in order to eradicate the disease in Italy in the next 10 years. The proposal was launched during a meeting held in Milan on May 21st, by the EpacC (non-profit organization).

For information please see the EpacC web-site: http://www.epac.it/

Living with HIV in Italy

Italy has the longest life expectancy in people with HIV infection in the world. This result emerged from a survey presented at the International Conference on Retroviruses and Opportunistic Infections, held in Atlanta in 2013. The finding was discussed during the fifth edition of the «Italian conference on retroviruses and AIDS», promoted by the Italian Society for Infectious and Tropical Diseases (Simit).

In Italy social habits have changed: HIV is more and more sexually transmitted. Today, indeed, 80% of new infections result from unprotected sex, whereas in the eighties HIV infection was primarily due to the sharing of infected needles.

The conference also remarked an important innovation in science: antiretroviral therapy. It seems that life expectancy of patients with HIV infection who begin regularly the therapy and that of general population is almost overlapping.

If you wish to know more visit http://www.simit.org/

PORTUGAL

Dengue outbreak in Madeira

In late 2012 Portugal had a Dengue fever outbreak at the Madeira Islands. The Dengue vector (aedes aegypti) had been identified some years ago but Dengue cases only emerged in 2012. This public health problem was addressed with collaborations at a National and European level. If you wish to know more read the articles below.

http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=20333
http://www.insa.pt/sites/INSA/Portugues/AreasCientificas/DoencasInfecciosas/Areas-Trabalho/EstVectDoencasInfecciosas/Paginas/Revive.aspx

New law regulating alcohol consumption

In May 2013 Portugal will introduce a new law regulating alcohol consumption, this restricts the sale of distilled drinks to people older than 18, and beer and wine to people older than 16. Portugal has the ninth greatest alcohol consumption per capita in Europe.

If you wish to know more about alcohol in Europe visit http://ec.europa.eu/health-eu/news_alcoholineurope_en.htm
SPAIN

Latin-American Congress of Epidemiology and Public Health in Granada

Dear EuroNet friends,

We are happy to announce that during the Latin-American Congress of Epidemiology and Public Health, members of the EuroNet Spanish team will be coordinating a Hispanic-Portuguese roundtable called «Residents and Public Health Specialists» in which senior epidemiologists and residents from Portugal and Spain will address the origins of both epidemiology associations, employment and training prospects of Epidemiology and Public Health in both regions.

This congress will take place from 4–6 September 2013 in the beautiful city of Granada, Spain. We would like to welcome you to join us!

This kind of activities would not have been possible without EuroNet, so thank you all and we look forward to seeing you soon!

"Immersion Course"

On May 31st and June 3rd and 4th, the "Immersion Course" will be held for the new residents joining hospitals in Madrid this month. It will be coordinated by senior residents and specialists in Public Health who had achieved their period of residency recently. The aim of this course is not only to teach junior residents what they will be doing over the next 4 years, but also to show the broadest vision of the medical speciality and all its fields, both professional and academic. The coaches will try to ensure the brand new residents to understand all the possibilities that the residency offers and to discover the tools to take maximum advantage of this speciality.

UNITED KINGDOM

Measles outbreak in Wales

Over 1,000 people have contracted measles in an outbreak in Wales and 84 people have been hospitalised (as of 30th April 2013). In 1998, a now discredited paper was published by Andrew Wakefield linking Autism to the measles, mumps and rubella vaccination (MMR). The paper, and its subsequent reporting, resulted in a drop in MMR uptake as part of routine immunisations. A national MMR catch-up campaign is now underway to prevent escalation of the outbreak.

For more information please see the Public Health Wales website: http://www.wales.nhs.uk/sitesplus/888/page/66389.
The meeting in Paris

The next Executive Committee meeting will take place in Paris, France, on the 6th of July. This meeting will certainly be an opportunity to formalize our partnership with Ireland and to meet our Dutch colleagues.

It will take place at the same time as the CliSP training seminar for French residents, with the occasion of a meeting between them and the members of the EuroNet Executive Committee.

For any questions regarding EuroNet or Public Health training in Europe please contact us via our website:

euronetmrph.org