

Postgraduate education for physicians in Clinical Environmental Medicine running program and perspectives

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Demographic development of the population will lead to

- > Excessive increase of the age pyramid
- Growing old happens on a price of increasing chronic illnesses
- Impossibility of a long term coping of this "end of the pipe strategy" by only treating symptoms instead of causalities
- > Exponentially increasing costs in health systems
- > Foreseeable break down of European health systems

Current Risk Assessment is unsatisfactory! Due to

- > insisting on the "dose effect relationship",
- missing assessment of accumulating long time – low dose effects,
- not being aware of multiple load with additive and multiplying effects,
- not being aware of individual susceptibility, epigenetically and genetically effects
- ➤ disregarding
 - > Neuro-Endocrine-Immune-System (NEIS)
 - > Vulnerability

Behind all the individual fate we regard a severe influence on a social dimension generally

- 1. Crash of European health systems
- 2. European Commercial defeat by loosing last resources
- 3. Chronic burden to Mental Health in the population

Behind the individual fate we regard a severe influence on a social dimension

1. Crash of European health systems

HEALTH COSTS air-quality

If the EU complied with WHO's annual air-quality guideline on PM 2.5 fine particles:

- in 25 large European cities up to 22 months of additional life expectancy for persons 30 years of age and older could be gained,
- > 31.5 billion € could be saved in monetary health benefits every year.
- http://www.env-health.org/IMG/pdf/HEAL_AR_2010_FINAL.pdf

Behind the individual fate we regard a severe influence on a social dimension

- 1. Crash of European health systems
- 2. European Commercial defeat by loosing last resources

Global competition of the economic systems

Europe has no natural resources any more

beside:



- >Well respected scientific research output
- Engineering experiences and knowledge on a very high level

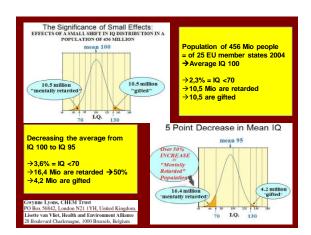
We are going to diminish our last resources

The main economic impact of SBS is the reduced productivity *

- EPA estimated productivity losses from office workers due to SBS: 3 %, or
 - * \$ 60 billion \$ in 1989,
 - ❖ \$104 billion \$ in 2008.
- > this estimate is conservative
- not included losses in non-office environments.
- * Public Health Consequences and Cost of Climate Change Impacts on Indoor Environments, EPA January 2010, http://www.epa.gov/iaq/pdfs/mudarri.pdf

Behind the individual fate we regard a severe influence on a social dimension

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Acknowledging that

- chronic illnesses are causally influenced by environmental burden
- physical, chemical, biological and psycho-social stressors are able to cause continuing and escalating inflammation
- the Neuro-Endocrine-Immune-System is always involved
- this usually ends into Multisystem Illnesses
- Clinical Environmental Medicine has the tools for diagnose, therapy and prevention

Question occurs:

Are we able to avoid, to turn around or at least to stop this in future?

Yes we can!

Ву

- > Primary prevention strategies individually
- Protecting the Neuro-Endocrine-Immune System from permanent individually attacking
 - > physical,
 - > chemical,
 - ▶ biological and
 - > psycho- sociological stressors

Best effective lever for prevention strategies is → Education

Train

- Doctors,
 - > Students at universities
 - > Physicians postgraduate

For primary prevention strategies urgently needed

- Awareness of environmentally linked complex illnesses by physicians and scientists
- Education and training of physicians in Clinical Environmental Medicine for functioning as "whistleblowers" and for a better
 - Awareness
 - Diagnose
 - Treatment
 - · Patient information
 - » Avoidance strategies
 - » Prevention strategies

Best effective lever for prevention strategies is → Education

Train

- > Doctors.
 - > Students at universities
 - > Physicians postgraduate
- Nurses.
- > Architects
- > Teachers
 - > Kindergarten
 - > Schools
 - > Thereby influence adults in the family

<u>Curriculum for education in</u> environmental medicine

- Started in German speaking countries in the late 80's with different Curricula
 - Schleswig-Holstein (Department of BRD)
 - Austria
- A common curriculum for Germany began 1993
- This was transferred to Luxembourg 2000
- Since 2012 training on that base in Italy and Spain

German Curriculum of environmental medicine 200 hours

Theory

Section I: Basics und methods of environmental medicine

Section II: Ecological damage Additional: Excursions to a nuclear power station,

waste incinerating plants, waterworks

100 hours

German Curriculum of environmental medicine ca. 200 hours

Clinical Education

Section III: Clinical aspects

diagnostic and therapy

Section IV: Clinical aspects

consultation, prevention 100 hours

Certification conditions in Luxembourg for the additional-titel "Environmental Medicine"

- 1. 4 years basictraining as a general practitioner or as a specialist
- 2. Hearing 200 hours lesson of the curriculum "environmental medicine"
- 3. Joining a "Circle of Quality"
- 4. Taking part at a tutor-system

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Tutorial system

- Telephone-counselling once a week, if necessary
- 6 weekends seminars with the tutors in between 1 ½ year
- Visiting 2 congresses of environmental medicine

"Clinical Environmental Medicine" further development of Education in Germany

- No Certification by the Common Medical Society since 2006 any more
- Instead reduction to 80 hours Curriculum for "Environmental Medicine"
- · → Less interest of physicians
- Upgrading to 120 hours structured curriculum "Clinical Environmental Medicine" by EUROPAEM

"Clinical Environmental Medicine" further development of Education in Germany

- Due to the Bologna/Process:
- All over Europe all advanced specialist's training has to be novelized
- So up to 2020 novelizing of the complete medical advanced specialist's training has to happen too

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"Clinical Environmental Medicine" further development of Education in Germany

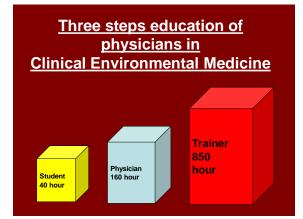
- · This is a big chance to be part of this future:
- German official Medical Association asks already for an establishment of "Clinical Environmental Medicine"

 as a new medical discipline to be taught
 by a postgraduate structured curriculum.
- We offered a structured curriculum which we already use as base of a "Blended Learning" Course (120 h Online and 40 h Presence)
 - https://europaem.eu/attachments/article/10/dbu Europaem Curriculum Entwurf 20 15 03 24.pdf
- http://www.dbu-online.de/fileadmin/redakteur/Flyer/dbu_Europaem__Curriculum-24_03_15.pdf
- Due to Bologna Process this education will spread out all over Europe in a couple of years to be adopted by all European medical authorities.

Suggestion of the **European Academy for Clinical Environmental Medicine:**



Education of physicians on three levels



Teaching students 40 hour during the last year of studying to regard on:



 complicated histories, probably induced by environmental circumstances

Teaching physicians 160 hour curriculum to look for:



- multi-factorial, multifunctional or multidimensional reactions, probably induced by environmental circumstances;
- individual reactions because of specific susceptibility or genetically determination.

Train the trainer by 850 hours upgrading studies to enable them:



- to teach at universities and medical schools
- · to work in public health
- to manage a hospital as a clinical director
- to get the additional education and title: "European Master of Environmental Medicine".

European Master of Clinical Environmental Medicine Main conditions: - Having already passed the "physicians 160 hour curriculum" - Upgrading 850 to hours university studying - Final university examination - ½ year assistance in an environmental clinic or doctors office

European Master of Clinical Environmental Medicine additional conditions: - 4 certificated congresses - 5 case histories documented, followed up with own patients - 2 expert opinions for insurance companies or court accompanied by a supervisor - Instead assistance for ½ year: 80 days of "job shadowing" in a clinic or a doctors office focused on environmental medicine

In Germany there is an urgent need of at least > 200 – 300 specialized doctors offices or ambulances Additional > 200 hospital beds As facilities for treating acute exacerbation Multisystem Illnesses like MCS, CFS, FM

Start now a common education of "Clinical Environmental Medicine"

- To arise better awareness on environmental linked diseases,
- To train doctors in better diagnosing and treating these illnesses,
- To start primarily prevention earlier,
- · To make health systems affordable by this.





