

The history of the UEMS – Section of Surgery

UEMS - Cerrahi Bölümünün tarihiçesi

J.A. Gruwez*

The UEMS, at its meeting in Rome on 24 to 26 April 1961 established Sections for each specialty. The Section of Surgery was founded in march 1963.

It is the merit of Dr. Hans Grond, who put the history of the Section of Surgery from 1963 to 1983 in writing, that we can learn how the section functioned in its early years. He was Dutch delegate from 1969 till 1985, secretary and president of the Section.

In his introduction Grond stressed the main problem in the initial decades after the Treaty of Rome : the possibility on the one hand for all specialists to set up practice in any member state and, on the other hand, the substantial difference in the traditions, training, recognised specialties and subspecialties in each of these countries.

The initial denomination of the Sections was “Monospecialist Section of ... “ The task of the Sections as Dr. Grond tried to define it was (and still is) “to study the problems raised by the treaty of Rome concerning the definition, training, qualification and the exercise of the profession in each particular specialty”.

He revealed the importance of the A.C.M.T. (Advisory Committee on Medical Training, which in the mean time practically ceased its activity) in the harmonisation of specialists in Europe.

It was at the invitation of Belgian Specialists that the first constituent meeting of the Monospecialist Section of Surgery took place in Brussels on March 2nd 1963 at the headquarters of the Groupement Belge des Spécialistes – Verbond der Belgische Specialisten (currently also the Headquarters of the UEMS). Delegates from six countries (Belgium, Luxemburg, The Netherlands, France, Italy and Germany) appointed Professor Nuboer, (Netherlands) to the presidency, Dr. Joris of Luxemburg as treasurer and Prof. Willy Smets (Belgium) as Secretary. The first assignment consisted of assembling data about the legislation w.r.to surgical training and its organisation. Harmonisation was from the start a major concern and measures for equivalence were proposed.

The following meeting in Munich (April 1963) seems to have been almost fundamental when considering the issues that were tackled : the definition of surgery, a list of proposals for equivalence, a schedule for the training in Surgery, a proposal for a 6 years duration of training. Strangely enough, after this important meeting, a gap of six years appeared and

* Emeritus Professor and Chairman of Surgery KU Leuven Belgium,

* Hon FRCS Engl & Edinb,

* Honorary President European Board of Surgery,

* Hon. Member of the Executive Board of the Section of Surgery,

* Head of the Belgian Delegation in the Management Council of the UEMS,

* Belgian Delegate in the Section of Surgery

only in 1969 (21 June) did the Section meet again in Brussels. Due to the opposition of the 'Comité permanent' (currently CPME – Comité Permanent des Médecins Européens) the length of the training of 6 years was not implemented. It is striking that already at that time advanced ideas about Surgical training were put forward: duration of six years, practical and theoretical training, examinations, a basic training and a higher one, etc. The discussion about topics like specialisation in Surgery, the importance of concentration and the dangers of fragmentation was initiated.

Much of the initiative for these concepts was due to "a very motivated man" (as wrote Dr. Grond): Prof. Willy Smets (Belgium)

Then followed meetings in Utrecht in 1971, in Paris in 1974 (21st of September) and in London in 1976 (18th September). Since then meetings were held every year and from 1991 on twice a year.

As already pointed out the task of the Section at that time seemed to be: the analysis of the training systems in the different member countries of the E.U. and to cope with the concepts of the Management Council, which created rather than solved problems for the Section of Surgery (a situation that has been encountered several times since!)

Such was the case for the Definition of Surgery since the Management Council did not approve the text of the Section. This problem remained unsolved.

Another issue was the discussion about the provinces of Surgery and Orthopaedic Surgery, finally solved by the Motion D 8525 expressing the standpoints of both Sections (Surgery & Orthopaedics) : (1) the UEMS rejects the notions of "exclusive rights". (2) the 2 Sections accept "not to interfere in the field of activity of another monospecialist section and a fortiori

not to impose limits in the practice of its discipline". (3) The practice of all types of Surgery requires adequate training.

In March 83 the A.C.M.T. stressed the necessity of a common basis - common trunk – in related specialties, of which the length and the content could be modulated according to the final orientation.

In September 84 the expression "Surgery in General" appeared and has since frequently been used with reference to the Common Trunk.

In 1987 the Section issued a motion (adopted by the Management Council 19 April 87) : "The monospecialised Section of Surgery expresses its unanimous advice on the fact that the basic Training in Surgery constitutes an essential part of the training of all specialists practising operative surgery."

The Section took part in suggesting the conditions for creating a monospecialist-section, as formulated in Article 24-II of the UEMS Rules of Procedure ("A monospecialist Section can be established for a specialty recognized in at least half of the member countries, when its constitution is requested by a majority of full members as defined in art. 3 of the Statutes.").

Professor A. Lacquet (Leuven-Belgium; Secretary 1974-1981; President 1981-1985) distinguished Training Specialties (Spécialités de Formation) for which organised training is necessary from Notoriety Specialties (Spécialités de Notoriété) and formulated the 3 criteria, approved by the M.C., (and the Section of Surgery) in May 78, for establishing a new Section : (1) The exclusive practice of the specialty exists in the majority of the member countries of the E.U.; (2) The number of practitioners in that specialty must be sufficient for establishing examining-boards or commissions of recognition of young specialists; (3) The number of hospital departments in

that specialty must be sufficient for the training of future specialists in this discipline.

Despite these criteria the Section of Pediatric Surgery was later on established solely on the fact that the specialty existed in the majority of the member countries and other similar examples appeared at later dates.

The Section played a role in the obligation to request the advice of the connected or interested Sections for the establishment of new Sections.

Another topic of interest of the Section was the Supervision of Surgical Training. The visiting committees of the Dutch Concilium Chirugicum were put forward as an example for controlling Training Centers and a paper was issued in 1981 by Professor P. Gilroy Bevan (British Delegate 1974-1984) on the different elements of effective supervision of training.

Many other topics with regard to training which currently are matters of debate, seem to have been tackled extensively by our predecessors in the Section, such as : " Operative experience during the training, minimum numbers of operations, log-book, the above mentioned supervision and visitation, evaluation etc."

An interesting feature was that in 1980 and 1981 the A.C.M.T. held hearings with the Monospecialist Sections and echoed several recommendations u.m. from the Section of Surgery.

From 1978 on the subject of Continuing Medical Education (CME) came into sight and was the topic of several comments and interventions of Professor Olivier in 1980 (France) and Professor Bevan in 1980-1992 (U.K.)

The Standing Committee (CPME) published the Dublin Declaration on this subject and introduced another point of interest: " Medical Quality Assessment" and "Peer Review".

From 1980 on the Section repeatedly attracted attention on the problem of the plethora in Surgery and pleaded for efforts in order to establish at short term an equilibrium in the number of surgeons in the European Countries. This was largely supported by the Management Council of the UEMS (19.07.1982 and 14.12.1983) but apparently not by the CPME (Nov. 1984) .

Dr. Grond also relates the confused and tumultuous situation of Surgery in France with the disappearance of General Surgery and the absence of the French Delegates (Prof. Olivier and Dr. Michel Verhaeghe) in Edinburgh (1982) and even their resignation in April 1983. However in 1984 2 new French Delegates were appointed : Dr. J. Bellamy and Prof. Dr. M. Garbay.

In 1985 no less than 15 European Countries had sent delegates to the Section meeting whereas Switzerland and Norway were present as EFTA-countries. In that year Dr. Grond (the Netherlands) was president, Mr. Dean (U.K.) secretary and Dr. J. Schoentgen treasurer (Luxemburg). The 2 Belgian delegates, Prof. A. Lacquet and Prof. W. Smets, who had been very active members (and presidents or secretaries) of the Section were replaced by Dr. J. Buisseret and Professor J. Gruwez at the meeting in Luxemburg in 1985.

The problems that were tackled in 1985-86-87 were still related to the disagreement with the Orthopaedic Surgeons (motion D 8205). Other matters of concern were the over-production of surgeons and Dermatological Surgery. Full attention was paid to the developments in surgical training in the member countries.

In Athens in 1988, a motion of Paediatric Surgery (D8747) to allocate operations on children exclusively to pediatric surgeons was forcefully rejected by the Surgical Section and

specialisation, manpower planning and basic surgical training came into focus. Later on ENT's manifested rather imperialistic tendencies in the cervico-facial area and expressed their ambition to mention Head and Neck Surgery in their appellation. A reaction of the Section of Surgery followed.

The foundation of the Collège Européen des Chirurgiens by Prof. Hollender of Strasbourg was considered by the Section as a definite threat to the activities of the UEMS with the risk of duplication of these activities. It appeared later on that the Collège Européen des Chirurgiens was ephemeral since it vanished very rapidly.

At the meeting in Hamburg in 1990 a questionnaire was presented concerning the responsible authority for surgical training in the European countries, the existence of a final examination, the access to the training, the numerus clausus, the selection of candidates, the training programme, logbook, truncus communis, the presence of subspecialties (J. Gruwez, 22 March 1990).

At that moment some frustration again surfaced about the lack of involvement of the Section(s) in the Management Council.

Still in 1990 the Section was confronted with the first attempts to create a new Section in the field of Cardiovascular Surgery. The Section supported the eventual establishment of a Section of Cardiac Surgery, but not of a Section of Vascular Surgery.

In 1991 the UEMS launched the Boards which were defined as Working Group of the Section more specifically in the field of postgraduate training and some sections embarked on European Board Examinations (Anesthesia & Urology).

From 1991 on the Section of Surgery met twice a year (see list of meetings). At its meeting in Rome (23.11.91) the Section established a Subsection and a Board of Vascular

Surgery and the proposal of organising European examinations was discussed.

In June 1992, at its meeting in Brussels the Section carried two resolutions, one (again) in favour of a minimum duration of the training in general surgery of 6 years, and one (also again) urging the countries to train only as much surgeons as needed to meet their own requirements.

In November 1992, in The Hague (Netherlands) the Statutes of the Board were adopted and 3 committees created within the Board (Executive Cee, Training Review Cee and the Education Cee). A resolution was taken with respect to the Restriction on Doctors' Work hours: underlining the personal commitment of doctors to their patients and the negative effects of the proposed directive on continuity in patient care and on the standards of the training.

At the meeting in Edinburgh (5.6.93) Prof. B. Tesauro was elected President of the Section and in London (17-18 September 1993) Dr. M. Lagaay was appointed Secretary and Dr. P Rutten Treasurer.

In Naples (7 May 1994) the Section protested against the introduction of different appellations given to their Boards by some Sections, like the Section of Orthopaedics which called its Board: the Board of Orthopaedics and Traumatology, as well as the Section of ENT which called its Board: Board of ENT and Craniofacial Surgery.

In October 1994 (Berlin) the Section rejected the idea of recertification, opposed to a European Board for Subspecialties, regretted insufficient participation in the decisions of the UEMS Management Council and recognised the necessity for developing special modules of training for the Subspecialties.

The period of the new structural concepts of the Section began in May 1995 (Copenhagen) where Professor

Greenhalgh proposed the Envelope concept with the Section of (General) Surgery encompassing various subdisciplines, called Divisions, while the core was represented by the Common Trunk or Basic Surgery.

At the September meeting in Athens (16.9.95) Professor Cirenei, long-time Italian representative and one of the pillars of the Section took formal leave of the organisation. Professor J. Witte (Germany) took over the secretariat.

At that time the Board held separate meetings like in Dublin 1996, 17th May, where the first EBSQ sessions of the Section, planned for the fall, were prepared.

It was however the Division of Vascular Surgery (or the Associate Section) that, in Venice (10.9.96), succeeded in being the first at organising European Board of Vascular Surgery Qualification exams (Nachbur – Harris – Buth).

The Vascular Division was soon followed by the Section of Surgery that held its first examination session in Rome, at the occasion of the Fall Meeting, on October 19, 1996.

In the intermittent period between the Rome Meeting and the Spring Meeting in Geneva (May 30, 1997) Roger Greenhalgh issued a manifest (4.4.97), "Surgery in Europe: UEMS and European Board of Surgery (EBS) – How to react to emergent specialties", wherein he called up for European consensus with respect to training for "Acute Surgery", harmonious specialisation after a substantial Common Trunk and for high level European Board of Surgery Qualifications.

At the same moment Jacques Gruwez launched the proposal for a Surgical Federation ("Commonwealth") encompassing all Surgical Subspecialties and also General Surgery to replace the Section of Surgery. There was however at that moment no ma-

majority in the Section to implement this concept.

Talks were started with Eurosurgery (Prof. Gérard Champault) for collaboration and the organisation of the EBSQ's (European Board of Surgery Qualifications) at the occasion of Eurosurgery congresses.

In December 1997 Professor Bertil Hamberger came up with a position paper on Endocrine Surgery containing a syllabus and curriculum as well as specifications on training and training centers.

Progressively over several meetings (Geneva (30.5.97), Santiago (26.9.97), Vienna (May 1998), Leuven (24.10.98)) different specialisations within surgery developed from the initial status of Working Group to the status of Divisions with each its European Board. After Vascular Surgery came Coloproctology, Traumatology, Surgical Oncology, Endocrine Surgery, Hepatopancreatico-biliary surgery, Thoracic surgery. This evolution was only possible by the often quite personal initiative and dedication of colleagues like Peter Harris, J. Buth and Chr. Liapis, John Nicholls, J. Christiansen and L. Pahlmann, Bertil Hamberger, Reschauer, Oestern, Niall O'Higgins, Ralikaainen and several others.

It must be noted that some of these Divisions, typically the Division of Vascular Surgery, had grown to large entities with well attended meetings (e.g. Div. Vasc. Surger. London 18.04.98: 30 delegates) and growing self-confidence.

In September 98 (24 September) Prof. Greenhalgh, who had been elected President of the Section in Vienna (May 98), once again delivered a Statement to the officers of the UEMS and the Management Council, in favour of Unity among Surgical Specialties and against fragmentation.

At the meeting of 23 October 1998 (Brussels) the Multidisciplinary

Joint Commission for Intensive Care Medicine (MJCICM) was officially established and a position paper delivered by its chairman Prof. S. de Lange (Netherlands).

During the meeting of the Section in Leuven (24.10.98) the agenda concerned the EBSQ-exams, the Working Groups (Divisions), the ENT-claim for extending their name with "Cervicofacial Surgery" (again!), the UEMS Accreditation Council, the Common Trunk and the Internet Homepage.

The Executive in London met different personalities with experience in postgraduate training: Prof. Hugh Whitfield, President of the Section of Urology, who wished to organise a meeting of Sections with surgical interest, Mr. Richard Collins, Chairman of the ECST Commission of the (intercollegiate) Senate, who discussed certification, and Professor Robin Williamson, President of the Association of Surgeons, who explained the structure of the Association.

The Section met again in Helsinki (19 June 99) where the usual topics were discussed (reports from the Divisions and Working Groups, CME, Common Trunk, Intensive Care Medicine and Eastern Europe). With regard to the EBSQ it was decided with a small majority to keep the 5-year rule but to open the examination to non-Europeans having an European CCST.

The members De Vries, Potel and Gruwez would work out the implementation of the UEMS CME-charter in the Section. The Treasurer complained about the missing contributions of at least 8 member-countries.

On March 19, 1999 the M.J.C.I.C.M. was formally installed with the agreement of the Section of Surgery (present Prof. Witte J.), the aims being the training, harmonisation, evaluation and requirements of intensive care medicine. Prof. Dr. de Lange was appointed President, Prof. H. Van Aken Secretary.

At a conference with the Executive of the UEMS a delegation of the Section discussed the implementation of the Envelope concept with the already existing Division of Vascular Surgery, Coloproctology and Trauma Surgery and the new Working Groups of Endocrine-, Transplant-Oncological Surgery. Further topics were: the Common Trunk, the EBSQ, the contacts of the Sections' Executive with the Training-authorities in each country (at the occasion of the meeting), Eurochirurgie, CME and the EACCME, an increased involvement of the Sections in the Management Council deliberations, the promotion of visitations and the exchange of trainees.

September 18, 1999 Professor Fourtanier received the Section in Toulouse. For the first time a lady colleague Dr. Boel Engaras, representing Sweden, entered the Section. Mr. Dussek, representative of Thoraco-cardio-vascular Surgery, had to inform the Section about their intention not to join the Section of Surgery but to function independently.

A majority considered Research an indispensable component of Surgical Training. The use of the term "non-specialist training" to indicate the common trunk or the "generalities in surgery" was advocated. A minimum of 6 years for the surgical training programme was once more proposed and a substantial "non-specialist training" recommended.

The day before the Meeting the Inspection Cee visited the surgical training centre in the Hospital of Toulouse. The impression was excellent and the Department earned its European recognition without any problem.

At an interim meeting of the Executive it was decided that the Section would accept a separate Section of Cardiac Surgery but not of Thoracic.

The UEMS developed its Policy Plan for the next 3 years (19 Novem-

ber 99) with respect to Quality, the Specialist Sections, the E.U. legislation and societies. A UEMS compendium was being prepared.

The first meeting of the Section in the new century was held in Edinburgh (20.05.00) in the absence of Italian delegates. A Division of General Surgery was established to replace the so called "Extended Common Trunk" in the Envelope concept, which was modified into the Grapefruit model, where the Divisions formed the segments (General Surgery being one of them) held together by the skin i.e. the Section.

Prof. Gruwez and Prof. Witte reported on their deliberations with the representatives of Cardiothoracic Surgery in Amsterdam.

In October (22) 2000, at the occasion of the World Fair in Hannover, the Section gathered in this city.

In the same year the European Accreditation Council of Continuing Medical Education became operational and the procedure was explained.

J. Gruwez issued another plea for Cardiac and Thoracic Surgery to remain in the Section and a request to the Management Council to adopt, for Surgery, a similar structure as for the Section of Paediatrics.

The day before the meeting the Inspection Cee had visited the Surgical Department of the Hospital in Augsburg (Head Prof. J. Witte) which was praised for its excellence and awarded the European Accreditation. The Divisions gave their reports, the EBSQ session of the next day commented and evidently a visit was paid to the World Fair.

The Section had gone the furthest east at the occasion of the meeting in Istanbul. In June 2001 it headed far North and met in Reykjavik (02.06.2001) where Professor Jonas Magnusson was our host.

According to the Division of Surgical oncology all surgeons treating can-

cer should also be trained in Surgical Oncology. Vascular Surgery was developing a European Vascular Registry, organised a Symposium on Quality Control of Vascular Surgery and continued its CME evaluations. Cardio-thoracic Surgery persisted in aiming for a separate Section.

As usual a meeting was organised with the national (Icelandic) training authorities.

The campaign against fragmentation and for keeping Cardio-thoracic Surgery within the Section was not over. Both Presidents (Section and Board – Greenhalgh and Gruwez) issued several papers and letters to convince the Cardiothoracic colleagues and the UEMS Executive. Appointments between the parties were organised. The Section however could not reckon on much support from the UEMS-management.

The planned meeting in September in Istanbul was ruined by the dreadful event of 9/11 in New York. The session was postponed until June 1, 2002, in Stockholm. There again the local training authorities were met. The activity of the Divisions continued. Prof. Feil accepted to chair the Division of General Surgery and a new Executive was chosen: Professor Jens Witte replaced Prof. Greenhalgh and became President, Prof. Panosopoulos became Secretary-General, Dr. Rutten remained as Treasurer and Prof. Greenhalgh took over from Professor Gruwez as President of the Board. Prof. Gruwez (absent because of a Colles' fracture!) was asked to stay in the Executive as Honorary Member.

At this meeting Dr. D. Branscheid introduced himself, warmly pleaded for a separate Division of Thoracic Surgery within the Section of Surgery and engaged himself to organise the Division.

At the meeting in Istanbul (28 September 2002) the Section went in mourning for Mr. Alasdair Mac Gregor

who had died suddenly a few weeks earlier. Everyone remembered the great hospitality he demonstrated in Edinburgh and the important part he took in organising the EBS examinations.

The Division of Endocrinic Surgery produced a Logbook. Professor X. Rogiers accepted to organise the Division of Hepato-pancreatico-biliary Surgery. The Swedish delegation (Prof. Rune Spödahl and Dr. Boel Engaras) accepted to draft a training-programme for General Surgery. The new delegates of the Section in the M.J.C.I.C.M. were designated: Prof. J. Pfeifer and Prof. E. Farthmann. Professor Fourtanier showed the results of an Inquiry about the surgical manpower in France.

The Surgical Department and Training Centre of the Hacettepe University Hospital in Ankara, headed by Prof. I. Sayek was inspected by the Board the day before the meeting. Once again the excellent facilities and programmes permitted to award the European accreditation.

With the purpose to reduce the travelling of the Officers of the Section it was decided to have each year a Spring-session in Leuven (Belgium) on the day before the meeting of the UEMS Executive with the Presidents and Secretaries of the Sections and the Boards. Consequently the following meeting of the Section and Board was organised on May 9th (2003) in Leuven.

Professor Matheiem (Belgium) exposed his work for establishing a Division of Breast Surgery and was heartily thanked for it. Hopefully his aims would be materialised in the near future.

Progress was noted in the Divisions of General Surgery, HPB Surgery, Transplantation Surgery (Prof. Bechstein), Traumatology (the Register, the Examinations and contacts with Orthopaedic Surgery).

Professor A. Nevelsteen represented the Division of Vascular Surgery that was working on a website and the evaluation of CME activities. It was recalled that the Section and the Divisions should urgently adapt or draft the Chapter VI as requested by the UEMS. Further discussions pertained to the EBSQ office in London (Stephanie Chapman), the website, the preparation of examinations in Endocrine Surgery and Surgical Oncology, the presentation of the findings of the Swedish group regarding the Common Trunk, the report about CME/CPD and recertification (Dr. de Vries), the adoption of the name "Federation", the manpower problem in Germany and the "State of the Art" programme (quality control & clinical performance) in Germany.

When we met again in October (4-2003) in Athens we were all still under the shock of the demise of our President Prof. Jens Witte the 12th of June 2003. Two and a half years before, at the festive dinner in Hannover, Prof. Gruwez described him as "made out of bronze"! Professor Witte was an exceptional colleague: imposing figure, efficient personality, gentle individual, a born leader. The whole Section felt orphaned, shattered! The organisation was in a state of collapse. According to the UEMS rules of procedure the Secretary General Prof. Panosopoulos and the Treasurer Dr. Patrick Rutten took over. It was decided to appoint a President in 2004. Mrs. Pauline Janson, Secretary, was invited to continue to serve. It was proposed to appoint 3 vice-presidents nominated by the Divisions to enhance the involvement of the Divisions. For the rest the Divisions and Working Groups reported as usual about their activity.

Seven months later (Leuven, 14.05.2004) Prof. M. Polonius was elected President of the Section. Vascular Surgery continued to show signs of great activity: European investigation

on Vascular Surgery in Europe – EBSQ assessments at the R.C.S. Ireland – Papers by Bergqvist on European Assessments, by Palombo on the logbook, on guidelines for CME – a symposium in Innsbruck. A drawback was the move towards separation from the Section of Surgery by B. Valentini!

Despite two new statements by Prof. Greenhalgh and Prof. Gruwez and the nomination of Prof. Tomislav Sosa as Vice-President of the Section of Surgery, fragmentation was not going to be prevented!

Plans were made to appoint another Vice-President coming from the Division of General Surgery. Hand Surgery made encouraging progress. In the field of Intensive Care Medicine it seemed that the ESICM (European Society of Intensive Care Medicine) ran an examination that attracted 120 candidates! The situation of the Division of Thoracic Surgery was not yet clarified and the Idea of a Federation of Surgery bringing together the cutting specialties was brought forward.

Warsaw was the next stop (27 September 2004). The section expressed its concern about the possible secession of Vascular Surgery and the attitude of the Management Council while the prospect of a Federation gained support, especially since it seemed compatible with the R.O.P. and apparently approved by the Secretary-General. The problem of limitation working hours was debated again and the Section favourably considered voting right for the Divisions.

Coloproctology proudly mentioned its 79 EBSQ examinations, while Endocrinology estimated the functioning of the London office insufficient. Traumatology expected a new impetus from the unification of two European societies. Professor Von Smitten was asked to take over the direction of Breast Surgery.

In October 2004 two notes appeared from Greenhalgh and one

from Gruwez, suggesting to identify the Group II of the cutting specialties in the Management Council, with the Federation of Surgery, and to attract the attention to the many innovations in the surgical field like: laparoscopic and robotic surgery, endovascular procedures, short hospital stay etc.

In Leuven (May 19th, 2005) the establishment of the 3 Groups of Sections in the Management Council was confirmed. Prof. Greenhalgh was appointed Convenor for the Surgical Group together with Professor Holzschneider from Paediatric Surgery. There was no striking news from the Divisions, except the presence of Prof. Vassilios Papalois (London) as representative of the Division of Transplant Surgery and his very promising report for a rapid development of his Division.

The next day the Federation of Surgery met in Brussels under the conduct of Prof. Greenhalgh. Representatives of the Sections of Surgery, Orthopaedics, Plastic Surgery, Vascular Surgery and Cardiothoracic Surgery, as well as the Secretary-General (Dr. B. Maillet) and an observer from the Management Council were present at this very fruitful conference.

Saturday 8 October 2005 the Section gathered in Zürich. Prof. Polonius and Prof. Polanski reported on the results of the questionnaire concerning working and training conditions in the EU-countries. Then came the usual reports of the 10 Divisions and the 2 Multidisciplinary joint Committees for Intensive Care Medicine and Hand Surgery.

Prof. Roger Greenhalgh informed the Section about the founding of the Federation of Surgical Disciplines.

Professor Johann Pfeifer, representative of the Section in the European Board of Intensive Care Medicine (EBICM) (that had met on September 24, 2005, in Amsterdam) explained

the difficulties encountered to avoid the supremacy of one discipline in this body.

Prof. Vassilios Papalois was very active in drafting Statutes, Rules of Procedure, a Syllabus and rules for the EBSQ evaluation for the Division of Transplant Surgery. He was very effective in recruiting members for the Division from 13 countries.

The Section was plunged again in mourning when at the Meeting on May 19th 2006, in Leuven, it was announced that the Swedish Delegate Dr. Boel Engaras had passed away. Professor Polonius expressed the sorrow of the Section at the loss of this intelligent, enthusiast and elegant colleague.

Attention was given to the latest developments in the Inquiry about training and working conditions and to the meeting of the Federation of Surgery.

The transfer of the EBSQ office was decided. The absence of the Treasurer as well as of a report provoked some concern. Election appointed the following officers: President of the Board: Mr. Maurice Stokes, Vice-President of the Section: Prof. Francis Antos, Secretary-General: Prof. Jerzy Polanski, Treasurer: Dr. Jean Biaggi, EBSQ: Prof. Wolfgang Feil.

The Division of Traumatology currently focused on the Registry of Trauma Centres and Harmonisation, and would soon produce a new syllabus. Prof. Pfeifer expressed his concern about the invasive attitude of Anesthesia with regard to Intensive Care Medicine. Prof. Papalois and Prof. Bechstein for the Division of Transplant Surgery reported on the further expansion of the Division (21 members and 15 countries) and Von Smitten produced an excellent paper on the Breast Centres in Europe.

Prof. Papalois, supported by Prof. Gruwez and Prof. Pfeifer, underlined the importance of an Ethical code for

European Surgeons. This item was scheduled to be reconsidered later.

Another visitation had been performed on 9.12.2005, namely at the Department of Abdominal Surgery University Medical Centre of Ljubljana, Slovenia, under the Direction of Professor Stane Repse. The inspecting team, composed of Professor Gruwez, Professor Polonius and Professor Pfeifer, made some recommendations, but in view of the excellent organisation and the quality of the department proposed Prof. Polonius to award the European Board of Surgery Quality Certificate. Professor Onjec (Slovenia) received the diploma.

The meeting was concluded with an official and emotional expression of thanks to Mrs. Karen Greenhalgh and to Professor Roger Greenhalgh for the many years served as President of the Section and later of the Board and for his enormous contribution to the Section.

It was at the renewed Langenbeck-Virchow House in Berlin, the proud headquarters of German surgery, on September 23, 2006, that the next meeting took place.

General surgery and its EBSQ were again debated. The number of examinations for Coloproctology, now offered in several countries, mounted up to already 105 and official acceptance in the UK seemed to be in the bounds of possibility. The Division was congratulated. Endocrine Surgery had its last examination in Krakow and wished to proceed to on-line application. The evaluations continued in the Division of Traumatology and of Surgical Oncology (headed now by Prof. Schneebaum from Israel). The Division of Vascular Surgery was to be considered as disbanded since the existence of a Section of Vascular Surgery. The examinations in Thoracic Surgery continued (54) but the European Society of Thoracic Surgery and the European Association of Car-

dio-Thoracic Surgery would separate. Dr. Branscheid also demonstrated an interesting booklet on "Examination Information for Candidates". Prof. Bechstein and Prof. Papalois reported about the constant progress of the Division of Transplant Surgery.

The Section welcomed new representatives of the UK: Prof. M. Horrocks and Mr. John Smith. Dr. J. Biaggi, new treasurer, gave an excellent overview of the financial situation, a strategy plan for the Section was developed by the President and after a thorough discussion about the E.W.T.D. it was decided that the Federation of Surgery, together with members of the M.C., would prepare a questionnaire.

A remarkable meeting of the European Federation of Surgical Specialties, the Royal College of Surgeons and the Federation of Surgical Specialties Associations took place in the Moynihan Room of the RCSE in London on 12.4.2007.

Both British and European topics were discussed, like the introduction of the Postgraduate Medical Education and Training Board, the European Working Time Directive and the Federation of Surgical Specialties.

The Dutch delegates Prof. J. Hamming and Dr. E. Eddes invited the Section of Surgery in Amsterdam on 21 May 2007. The divisions gave their usual report. Surgical Oncology, headed and represented by Prof. Schneebaum, explained the examination for Surgical Oncology, in collaboration with ESSO (European Society of Surgical Oncology) and ECO (European College of Oncology). Questions were raised about the acceptance of foreign candidates.

The Statutes of the Division of Transplant Surgery were accepted. A questionnaire about Breast Surgery was presented by Prof. Von Smitten.

The meeting of the Federation of Surgical Specialties (EFSS) was

explained by the President u.m. the renewed requests of ENT to expand their appellation with "Head and Neck Surgery" which was once again denied. The Section agreed that the leader of the EFSS should be elected by the Sections but not designated by the UEMS.

An effort would be made for collecting the Archives of the Section, for the renewal of the website, for the completion of the membership and for a greater participation in the CME-CPD accreditation.

Finally the financial exercise of 2006 was approved.

The last session of the Section in this survey took place at the Royal College of Surgeons in Ireland in Dublin on 14 and 15 September 2007.

The Executive discussed different topics: the website, the shortcomings of the UEMS Central office, an update of the members list, the archives and a harmonisation of the examinations. Prof. Gruwez introduced the document "UEMS Mid-term Strategy". The general impression was that the paper was insufficiently practical and maybe a bit too much visionary but that it had to be supported by the Section. The position of General Surgery, the Chapter VI (Charter on Postgraduate Examination), the Assessment of Training programmes by trainees, the "Surgical Assistant", the harmonisation of the Board Exams and the representation of the Section in the EFSS were the other subjects of reflection.

The next day at the Section's Meeting two very interesting presentations were brought: "Surgical Aptitude" by Prof. A. G. Gallagher and "Selection for Surgical Training" (in Ireland) by Prof. Osc. Traynor. The two presentations triggered ample discussion.

The new members of the Section Prof. Semih Baskan (also President of the Turkish Surgical Association) and Prof. Sadik Kilicturgay from Turkey,

Dr. Oliver Gimm (Sweden, Endocrine Surgery) and Dr. Gordon Caruana-Dingli (Malta) were welcomed.

The reports of the Divisions focused the attention on the disparity of Examination Systems. Hence the Divisions were asked to send a description of their procedure to the Berlin office for future harmonisation.

The Thoracic exams organised with the Section of Cardio-Thoracic Surgery were questioned. In the M.D.J.C.I.C.M. a problem arose about the representativity of the President Dr. Brion and it was stated that Intensive Care Medicine was best regarded as a supraspecialty. The Presidents of the Sections interested in Hand Surgery would be convened.

Prof. X. Rogiers announced a 3rd Board Meeting of H.P.B. Surgery in November. Prof. Von Smitten commented on the Breast-Centres and the Questionnaire.

The Members of the Section were invited to send a curriculum of General Surgery and a logbook to the Berlin office.

The former Secretary of the Section, Mrs. Pauline Janson, was mentioned to be diseased. The Section's feelings of great sympathy would be transferred to her. More information about the Berlin office was communicated. An excellent financial report was given by Treasurer Biaggi and concluded a very efficient meeting.

Epilogue

This retrospective on 45 years of activity in one of the earliest Sections of the UEMS makes no pretension to be either a literary masterpiece, nor an absolutely accurate document of reference. The "History of the UEMS Section of Surgery", written by Dr. Hans Grond, has facilitated reporting about the first 20 years of the Section's existence. It remains however a difficult work to sift the wheat from the corn, to distinguish between what must be

considered as superfluous routine details and interesting data.

The names of a number of members of the Section appear in this rundown. However far from all interventions have been recorded and this certainly does not mean that many

other members did not actively participate in the discussions at our meetings.

However, "History is a lesson for the future". This is very true! We have been impressed by the great amounts of benevolence and disponibility, but

we have seen many efforts and initiatives come to nothing. The lessons we learned from looking back on the activities of our predecessors and of our section will help us to carry on in a more efficient and more productive way!