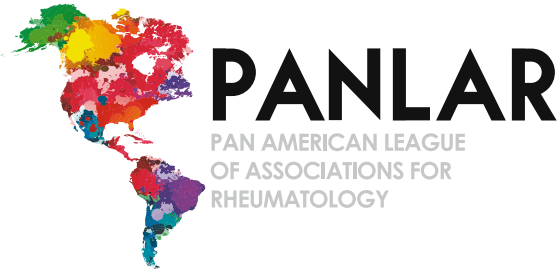


AUGUST 2017

# NOTES BY PRESIDENT



## The transformation of medical education

NOTES BY THE PRESIDENT

### The transformation of medical education

PANLAR's big challenge is to become the main supplier of education and science, practice standards and rheumatology referents in Latin America by the year 2022. This is a challenge shared, in their own way, by the 21 scientific societies that accompany us. I would like to take this opportunity to reflect on Continuing Medical Education (CME), a central activity for PANLAR and its associates.

CME as we have known it for a long time comes mainly from medical update events. In our continent it is common to attend different conferences, such as those organized by ACR, EULAR, PANLAR, as well as national conferences on the specialty and local and regional courses. Conferences organized by the industry are massively attended. The industry is also the main sponsor at these events, partly due to the conspicuous absence of other main players such as universities or the state, as well as owing to their financial capacity to play said role.

Events designed according to a sponsor's interests constitute for an important number of physicians an opportunity for continuing education, in spite of a lack of academic credits and although their main interest is to promote a brand or to pursue other marketing concerns, such as influencing the drugs prescribed by doctors. While this is not questionable per se, the reality is we have very few settings that enable wide discussion the diverging positions on a fallible science. In my view, there is an excess of activities that self-promote as CME. This year alone, around 55 will take place in Colombia: over one per week.

Medical events *are changing*, as mentioned in a previous note. Technological advances, consumer trends and the way of life of doctors from the new generations influence our profession. Soon it will be completely unnecessary to attend an update event. Likewise, restrictions due to compliance, lack of time, delays in the opportunity to help patients due to frequent licenses, as well as the growing loss of profit associated to a large amount

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PAN AMERICAN LEAGUE  
OF ASSOCIATIONS FOR  
RHEUMATOLOGY

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of work absences in service fee scenarios, among others, ought to spur us to rethink the way we set up and choose events. Conferences and other continuing education events shall be more useful and have a greater impact to be justified and reach their goals, thus being able to compete with that other type of CME that is far from being balanced and unbiased.

We should strongly reconsider the way we choose our events and learn to separate those with a predominantly commercial orientation that are justified solely on positive replies to invitations, by a sense of commitment, or by the specific needs of a sponsor

ready to invest huge amounts to meet its target. These types of events actually hinder the true growth of our specialty and of each of our scientific societies.

It is high time we define what is a CME activity and begin a certification program based on attendance to events, with a classification and a category awarded to each CME event in accordance with established rules. Likewise, we shall include universities, governments and the industry, which enables the majority of events worldwide, to reach common agreements and a classification for events. A first-level CME event circuit shall be designed independent from sponsors, thus guaranteeing appropriate formation and credits as a way to excellence.

We do not have to waste money. I believe better definition and organization of CME and the unequivocal support of societies beyond mere marketing considerations shall result in benefits for all.

**Carlo Vinicio Caballero Uribe MD Phd ©**

Presidente 2016-18

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