



**ASSOCIATION EUROPÉENNE DES MÉDECINS DES HÔPITAUX  
EUROPEAN ASSOCIATION OF SENIOR HOSPITAL PHYSICIANS  
EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE  
EUROPESE VERENIGING VAN STAFARTSEN  
DEN EUROPÆISKE OVERLÆGEFORENING  
ΕΥΡΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΔΤΡΩΝ ΔΙΕΥΘΥΝΤΩΝ  
ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI  
DEN EUROPEISKE OVERLEGEFORENING  
ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES  
ASOCIACIÓN EUROPEA DE MÉDICOS DE HOSPITALES  
EUROPEISKA ÖVERLÄKARFÖRENINGEN  
EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVINIKOV  
EUROPSKA ASOCIACIA NEMOCNICNÝCH LEKAROV  
EUROPSKA UDRUGA BOLNIČKIH LIJEČNIKA**

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**European Forum of Medical  
Associations and WHO**

**Oslo, Norway, 11-12 March 2005**

ENGLISH ONLY

**EFMA Resolution on Action for Tobacco Control**

The European Forum of Medical Associations and WHO

REAFFIRMING its commitment to support effective, evidence-based action to reduce the disease, disability and death caused by tobacco

REITERATING the leading role of the medical profession in tackling the tobacco epidemic, as clinicians, as role models, and as advocates for change

ENDORSING this year's World No Tobacco Day theme of Health Professionals Against Tobacco

WELCOMING the entry into force of the world's first ever global public health treaty, the WHO Framework Convention on Tobacco Control (FCTC)

RECOGNISING that if the measures contained in the Treaty are implemented to the full, many millions of lives will be saved worldwide

ACKNOWLEDGING the unequivocal scientific evidence that second-hand tobacco smoke causes serious illness and death

APPLAUDING the governments of European countries who have implemented "smoke-free" laws to protect their citizens from second-hand tobacco smoke

This Meeting:

1. **Urges** all national medical associations to take some concrete action in support of World No Tobacco Day on 31<sup>st</sup> May, such as organising a press conference, public event or campaign to mark the day
2. **Agrees** that all Medical Associations should continue to lobby governments to support the effective implementation of the FCTC
3. **Requests** those medical associations who have not already done so to protect their members and staff from second-hand smoke by ensuring that all their meetings and premises are smoke-free
4. **Calls** for medical associations to campaign actively for effective “smoke-free” laws in their countries



## **European Forum of Medical Associations and WHO**

**Oslo, Norway, 11-12 March 2005**

ENGLISH ONLY

### ***Statement on healthcare in prisons and other forms of detention***

The European Forum of Medical Associations and WHO meeting in Oslo on 11-12 March 2005,

**Notes** that healthcare in prisons, detention centres and police institutions raises specific ethical and health issues;

**Welcomes** the activities and initiatives of national medical associations to provide support and education (such as the Norwegian Medical Association/WMA internet course) for doctors working in custodial care;

**URGES** national medical associations to address these issues, working to the following broad principles:

- Detained persons should receive a standard of medical care equal to that available within the general community.
- Healthcare in prisons should be structured to reflect the high level of mental health and substance abuse problems within the detained population, as well as its social, economic and educational makeup.
- While recognizing that physicians working in prisons have dual loyalty, the healthcare and confidentiality of the patient should always be the doctor's primary concern.
- Healthcare policies should recognize the financial benefit of effectively treating health problems which, if left untreated, will result in significant overall additional cost to the community.
- Patients in prison should have the necessary access to secondary care services.
- Investment in after-care and support following release is essential.



**European Forum of Medical  
Associations and WHO**

**Oslo, Norway, 11-12 March 2005**

ENGLISH ONLY

**Statement on the Bologna process and medicine**

The European Forum of Medical Associations and WHO meeting in Oslo on 11-12 March 2005,

Welcomes the proposals in the “Bologna process” concerning mobility, comparability and harmonization in medical education in Europe;

Nevertheless,

(1) FINDS NO EVIDENCE that the two cycle Bachelor/Master process will improve anything in the medical training process justifying the application of the Bologna proposals to medical studies, which are a specific training for a profession;

(2) IS DEEPLY CONCERNED that such a move might undermine the positive integration of the theoretical and clinical parts of medical education and then be harmful for the quality of patient care.



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**Report of the Liaison Officer to the European Forum of Medical  
Associations and WHO ( EFMA/WHO )**

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The meeting of the EFMA/WHO took place in Oslo / Norway from March 11-12, 2005. It was organized by the Norwegian Medical Association, represented by Dr. Hans Kristian Bakke; President.

The Forum was attended by delegates from 29 countries (Albania, Armenia, Austria, Azerbaijan, Belarus, Belgium, Bulgaria, Croatia, Czech Republic, France, Georgia, Germany, Hungary, Israel, Kazakhstan, Luxembourg, Macedonia, Malta, Poland, Portugal, Russia, Serbia and Montenegro, Slovakia, Slovenia, Sweden, Switzerland, Turkey, United Kingdom and Uzbekistan ).

There were also representatives of the CPME ( Dr. Bernhard Grewin ), the WMA-The World Medical Association ( Dr. Otmar Kloiber ), the EMSA-European Medical Student's Association ( Nick Schneider ), the BMA Tobacco Control Resource Centre ( Mrs. Tanith Muller ) and of the AEMH with an observer status.

The Forum took place in the Soria Moria Hotel located on a hill overlooking Oslo and its fjord. Topics of the 21th meeting of the EFMA/WHO included:

- Telemedicine
- Patient empowerment
- The Bologna process
- The Burn-out-Syndrom
- The Health of prisoners in Europe
- Palliative care in Europe and its standard in Norway
- Tobacco control activities
- No-fault compensation systems in Europe
- Health policy reforms in Europe

The Forum was opened by the President of the Norwegian Medical Chamber, Dr. Christian Bakke, and by the Deputy State Secretary, Ministry of Health and Care Services, Mr. Jan Otto Risebrobakken, who also introduced the health care system of Norway to the audience.

Norway spends about 10% of the GNP for its centralized public governmental health system. The Patients Right Act (2001) and the Act of Health Services of 2002 improved the situation extensively. Accordingly, the patient has free choice of electing the hospital where he wants to be treated.

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The waiting list for elective operations in Norwegian hospitals has been much reduced. Hospitals are regional enterprises, run by the governments of the 5 regions in which Norway has been divided. There are only few private hospitals.

Dr. Mila Garcia-Barbero gave a report about the work of the WHO Regional Office in Barcelona: Dr. Marc Danzon was reelected as Regional Director Europe for the term 2005-2010. The WHO-office improved\_its service to provide member states with better informations about the different health systems. There are now WHO-offices in Brussels and in Venice besides the one in Barcelona.

Dr. Rene´Salzberg, the Secretary General of EFMA/WHO, emphasized the fact in his report, that his organization is the only non-governemental medical conference where NMA`s from the whole European WHO region ( 52 independent countries ) can meet, together with their important partner, the WHO. He also pointed out, that the political and economical gap between the countries being members of the European Union and those not or not yet being members has widened with all its implications on the health systems of these countries.

Therefore, the Liaison Committee of the EFMA/WHO has made strong efforts to enable as many delegations as possible from central and eastern Europe to participate in the Forum in Oslo by offering financial assistance to those who have economic difficulties.Especially, the Swiss Medical Association has made generous contributions in this respect.

By enjoying such a support it was also possible to have 4 official languages ( English, French, German, Russian )to maintain a very high standard of personal communication among the delegations.

Dr. Salzberg thanked the Norwegian Medical Association which has again published at its own costs the EFMA/WHO –Handbook 2005, which contains a huge amount of very valuable updated informations about the National Medical Associations in Europe.

Adv. Leah Wapner from the Israel Medical Association reported like last year about the progress in the field of patient empowerment. Patients Rights Laws have become in effect for example already in Finland (1992), Netherlands (1994), Israel (1996), but also in 17 other European countries or they are in preparation.

The Patients Rights Ombudsman is a non legal initiative that promotes rights of patients and suggests solutions to problems in the relationship between physicians and their patients, e.g. in cases of doubts of medical procedures or diagnoses.

Dr. Pedro Nunes from Portugal chaired reports and discussion about the topic “ The Bologna Process – its implications on medical undergraduate education “. Professor Stein A. Evensen, Dean of Medical School, University of Oslo, and Professor Antonio Rendas, Dean of Medical Science Faculty, New Lisbon University, explained the basics of the Bologna process and the problem which would arise in the medical education if this form of study ( 2 cycles: undergraduate (bachelor)- degree and graduate (master)-degree would be applied in medicine.

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The conclusion to which also Nick Schneider from EMSA came in his contribution concerning the Bologna process is that medicine has to be excluded from its implications. The conference published a “ Statement on the Bologna process and medicine “ ( Enclosure I ).

Organizational and personal strategies for the prevention of burnout and facilitation of work engagement among physicians were given by Dr. Talma Kushnir, Tel Aviv/ Israel. Research results how to deal with this syndrome of physicians were also reported by Dr. Erik Falsum, Norway.

The reports and discussion on the health of prisoners in Europe by Dr. Ingrid Lycke Ellingsen, Committee of prevention of torture, European Council, and others brought about another Statement “ Statement on healthcare in prisons and other forms of detention “ ( Enclosure II ).

An overview of palliative care in Europe was presented by Dr. David Oliver, UK, who reported that there are 220 units in the UK , which have altogether 3150 beds and in those 58.000 admissions per year.

Besides these palliative care units there are 361 community services on an ambulatory basis. The situation in Norway which was introduced by Dr. Per Engstrand, Anaesthesiological Services, Ostfold Hospital, Norway, is characterized by a standard of palliative care.

Much emphasis was put in the conference on the reports and the discussions about Tobacco Control Activities. The situation in Norway was very interestingly explained by the former Norwegian Minister of Health, Mr. Dagfinn Hoybraten, who is now Minister of Labour and Social Affairs. Norwegian tobacco control policy has a strong focus on cessation and prevention.

The Norwegian Tobacco Act was already enacted in 1975. The comprehensive program includes information, education and cessation activities. Official buildings, hospitals, bars and restaurants are smoke-free ( “ Everybody is entitled to a smoke.-free environment “ ).

Smoke-free public places and workplaces with very limited exceptions are realized in Ireland, Italy, Malta, Norway and Sweden. No, or very few smoking restrictions exist for example in Austria, Denmark, Germany, Greece, Luxembourg, Spain and Switzerland.

Tobacco Control Activities of EFMA/WHO, which were reported by Dr. Tomas Caks, Chair of the EFMA Tobacco Action Group, resulted in a statement “ EFMA Resolution on Action for Tobacco Control” ( Enclosure III ).

Some health policy reforms in Europe were reported by several NMA delegates as well as no-fault compensation systems in Europe by Dr. Bernhard Grewin, President of CPME, Sweden, and Professor Brodin, France.



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The next Forum will take place in Budapest, Hungary. The Federation of Hungarian Medical Societies has offered to host the conference in 2006

Prof. Dr. Hartmut Nolte  
1<sup>st</sup> Vice-President

Enclosures I-III