Road Map ICM Europe


Titles of training courses in specialized medicine.

With the exception of Spain, intensive care medicine is not an independent speciality in European member states. In most European countries, intensive care medicine can be obtained as a particular competence with a common training programme for specialists with a Board certification in a variety of base disciplines: Anaesthesiology, cardiac surgery, cardiology, internal medicine, neurology, neuro surgery, paediatrics, pneumology, surgery. A particular competence is an area of expertise in addition to a primary speciality, where extra expertise outside the domain of the specific speciality is required to provide high quality patient care by multidisciplinary input from doctors from various medical specialities.

The European Directive on recognition of professional qualifications (Directive 2005/36/CE of the European Parliament) does not identify intensive care medicine as a primary medical speciality. The European Union requires that, to become a specialty, it must be recognized in at least 2/5th of the Member States and at the same time, by a particular majority (a weighted vote that is determined by the population of each country and other factors and giving what is called a “qualified majority”) in a committee on Qualification of the European Commission (not only for medical professions but generally for all protected professions). Furthermore, to create a Specialist Section for Intensive Care Medicine within the UEMS, ICM has to be recognized as an independent speciality by more than one third of the E.U. Member States and must be registered in the Official Journal of the European Commission (Medical Directives).

These requirements for a primary speciality are not fulfilled for Intensive Care Medicine and therefore the aim should be the incorporation of Intensive Care Medicine as a PARTICULAR COMPETENCE in the European Directives 2005/36/EV of the European Parliament and of the Council on the recognition of professional qualifications. This terminology is consistent with all forms of training based on acquisition of competencies. This includes Spain. The CoBaTrICE programme which is supported by a grant from the European Community’s Leonardo Programme, undertook an international survey of training in adult intensive care medicine (1) and defined the core (minimum) competencies required of a specialist in adult intensive care medicine (2). In the survey of training programmes in different EU Member States the minimum duration of training in months, for intensive care medicine varies, but the median time in Europe is 24 months (1, Table 2). The findings of the CoBaTrICE study in terms of competency based training can be applied to intensive care medicine training as a particular competence. An important additional factor to consider, is how would changes to the status of intensive care medicine affect the quality of patient care. Current evidence
indicates that patient outcomes are better when patients are cared for by trained intensivists. In Europe this can be achieved by facilitating the acquisition of harmonised competencies in intensive care medicine by trainees from a wide variety of primary speciality training programmes. This may also have the added benefit of optimising the staffing of intensive care units.

Literature: