

Creating the benchmark of urology training

EBU President Dr. Marianne Brehmer: "The high standards we set are realistic"

By Evgenia Starkova

European Board of Urology (EBU), a section of urology for the Union of the European Medical Specialists (UEMS), has been successfully operating for nearly two decades now, pursuing to harmonise the urology training system within the EU as well as providing an incentive for many urologists to strive for excellence, both professionally and academically.

In this issue of EUT, Dr. Marianne Brehmer, EBU President and consultant urologist at Karolinska University Hospital in Stockholm (SE) offers her commentary on the current state of urological care in Europe, as well as insights into the latest EBU projects that aim to further improve the modern standards of education and training.

Q.: Looking back at what has already been accomplished, is there any particular EBU accomplishment that you would like to single out?

A.: This is a difficult question, and one that cannot be answered in a few words. Furthermore, I am sure, if you ask different people, you will hear very different opinions. I would tend to say that the setting up of the European Board Examination in Urology is certainly a great achievement, having gained recognition among urologists not only in Europe, but also beyond its borders. We expect that after the oral examinations in June the number of EBU Fellows worldwide will reach 2,500.

However, what we need to understand is that many of the initial steps that were taken when the EBU just started out, as well as the numerous other undertakings that took place in the course of its history are now taken for granted. Needless to say, at the time of their introduction, they were new and represented a challenge. One achievement, built upon another – this allows for a continuous development of a very complex system, which makes a difference as a whole.

Q.: What does the FEBU exam hold for urologists?

A.: First and foremost, it is important to remember that training and healthcare systems vary greatly in different countries, even within the EU borders. Becoming a Fellow of the European Board of Urology (FEBU), a title urologists receive if they pass both oral and written examinations successfully, confirms that their knowledge and their expertise in urology is, indeed, up to the highest European standard.

This "mark of excellence" also allows for more flexibility when it comes to hospitals and clinics recruiting staff internationally. Furthermore, the FEBU exam is an excellent self-evaluation tool for those who take it.

In Hungary and Poland the FEBU exam is part of the national exit examination for urology residents, and, perhaps, in the future this practice will be adopted in other countries.

Q.: The FEBU exam is a once-in-a-lifetime assessment? How can urologists ensure that they stay on top of their game?

A.: The EBU offers an in-service assessment, which can be taken either online or in writing by any urologist. The objective is indeed to encourage doctors to stay on top of events, to read up on the latest developments in urology, attend courses and meetings. This assessment is very different from the FEBU exam and includes some very specific questions. The real advantage here is that you don't just get a random figure (your score), but a complete analysis of your performance. You will see which areas of knowledge you need to brush up on, and which areas you are strong in. You can also see how your performance compares to that of your colleagues nationally, internationally and by specialty field.

Q.: EBU Certification of Residency Training Programmes in Urology – is it only for the select few?

A.: Quite to the contrary. It is not our intention to be the police force of urology. We do not ban or exclude – we encourage and we assist. The high standards that we require the centres to fulfil, if they want to have their residency training programme certified by the EBU, are realistic. We help our applicants to reach these standards by providing them with extensive feedback. I believe, the more EBU certified centres we have in Europe, the higher the overall training standards will be.

Ultimately, what we want for urology specialists is to be able to receive top class training, and for the

patients – the opportunity to be treated by excellent doctors, regardless of where in Europe they live.

Q.: Is it really possible to develop tools for standardisation and improvement of urology training that would work in all European countries?

A.: It is certainly possible, but it is not an easy task. Every country has its own well-established education system, which works in accordance with its healthcare structure. And we are not only talking about organisational aspects, there are also the curriculum and subspecialisation tradition to consider. To give an example, in some countries renal transplantation is covered by urology, and in others – it is the domain of transplant experts.

The standards that we set have to take all these nuances into consideration, and it is the collaborative efforts of our experts which makes our undertakings so successful. Two national delegates represent each country within the EBU, ensuring that all region-specific interests and particularities are taken into account.

What helps in our work is the fact the EAU guidelines have become widely accepted as the standard reference source for European urologists. Harmonisation of urological practice will certainly have a positive impact on residency training in general.

Q.: Many of the decisions related to healthcare and education are made by politicians, not doctors. How does that affect the work of the EBU?

A.: This situation has its advantages and its drawbacks. On the one hand, it is very important that serious decisions are made by people who have a more extensive overview of the situation in the country and are able to consider various legal implications. On the other hand, it can make our work at the EBU more difficult. Governments, policies and goals can change as frequently as every four years, and we simply have to adapt.

Q.: What are the challenges with regard to working with new EU member states?

A.: Well, actually, there aren't many. Take the Eastern European countries. When they joined, they were somewhat behind with regard to technical resources. Their tools and equipment were not up-to-date, but they had always been very strong in terms of training and education. I must say that I am very impressed with what they have to offer to their urology residents and their patients. And of course, they have long caught up on all the technical aspects.

Q.: Are you working on any other projects that can contribute to the harmonisation of urology training in Europe?

A.: Currently, we are concentrating our efforts on developing a European curriculum in urology, which is meant as a guideline, and it will advise on the fundamental issues that need to be covered within the training period. The curriculum will consist of three parts, dividing all the material into essential, recommended and optional. Each individual centre would be able to tailor the guidelines according to their own requirements.

In this curriculum we have put together the norms that are already established in many countries, having analysed, adapted and combined the best and the most essential from various European training practices. This undertaking is enormous and calls for the experience and the expertise of many outstanding experts.

Q.: When will the curriculum be presented to the urological community?

A.: We hope to finalise the draft by the end of October 2009. We will publish the curriculum after it has been approved by the board.



Dr. Brehmer with course participant Dagmar Schumacher and scrub nurse Elisabeth Rundin during hands-on training (personal archive)

Q.: How does the EBU address the trend of sub-specialisation in urology?

A.: We have been working very hard on this issue. There is increasing demand for sub-specialty training in urology, but not all centres can offer such targeted in-depth programmes.

Very recently we launched sub-specialty certification for urology centres which become recognised as "EBU centres of excellence" if they meet all the requirements. These centres should be able to offer a comprehensive sub-specialty fellowship programme, which cannot be obtained at a regular urology department. We are sure that with the growth of such specialised centres' network, urologists will be able to make informed decisions when choosing a programme.

Q.: What other criteria must a centre meet to obtain such certification?

A.: A number of criteria have to be fulfilled and one of them is that the centre has to have a broad as well as deep knowledge in the specific field. One cannot be certified as a centre of excellence in just a technique. If there are several different relevant treatment modalities for a certain disorder, the

centre must master all these techniques.

Q.: Has the EBU already certified any sub-specialty centres?

A.: We have just certified the first two Centres of Excellence, and both are in the UK. The first centre, in Sheffield, is specialised in female and reconstructive urology and is headed by Prof. Chris Chapple. The second centre, headed by Mr. N.P. Buchholz is specialised in treating stones of the upper urinary tract and is located in London. We are very excited about this; it is great to finally see the first results of a project that we have invested so much effort in.

Q.: Will this system be of any benefit to the patient?

A.: Potentially, it is very beneficial. We expect the current trend of cross-border health to develop intensively in the future, and it would only make sense if patients that present with very specific conditions had the opportunity to be treated in centres fully equipped to do so. This would work better if urologists and general practitioners were sufficiently informed about the whole range of top-class sub-specialty centres when they give recommendations to their patients.

EBU sub-specialty certification

First two Centres of Excellence certified



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In 2008 the EBU launched the EBU sub-specialty certification of centres of excellence. The system had been worked on for several years before we succeeded in reaching an agreement regarding the principles and the criteria of certification.

Urology, like most medical specialties, is becoming more and more advanced, diversified and technically demanding. Not all disorders may be successfully treated in all institutions and the whole range of different techniques cannot be available or taught in every department.

Many young urologists want to go somewhere where they can learn new techniques and acquire a more nuanced perspective. However, we do not want young urologists to become technicians only. It is as important to know when to use different treatment modalities and how to use them. For that reason, it has been decided that to come into consideration for certification as a centre of excellence in a sub-specialty, the centre has to be able to master all relevant treatments for a certain disorder, and of course to maintain a high quality on all treatment modalities. Accordingly, a centre cannot be certified as a centre of excellence in just a certain technique. Another criterion is that the centre has to be able to share their knowledge and skill, in other words, offer post-graduate training programmes (fellowship programmes).

A fellowship programme must be a post-graduate programme, which means the applicant should be a qualified urologist aiming for a deeper understanding, knowledge and skill in a certain sub-specialty. The programme should last for a minimum of 3 months. If a fellowship programme is focused on a certain technique the fellow shall, after passing the programme, have an ability to implement and adapt his/her acquired knowledge in a wider context. Such a programme should lead to a systematic understanding of the sub-specialty and different methods, including some knowledge of research, used in the field. A written description of the programme is part of the application. In the description, which has to be written according to a given template, the general aim, specific goals, and ways of working have to be clearly described.

Within the EAU several sections are providing fellowship programmes but there has been no or little guidance with regard to what should be required from an institution offering such a programme or what should be included in a programme. However, it is preferable that someone starting a fellowship programme knows in advance what their duties will be and what they can expect from the programme. Furthermore, knowing that the institution fulfils all the necessary criteria in terms of high training standards would help urologists in their choice for their post-graduate training.

It would be very unfortunate for European urology if several definitions on centres of excellence as well as on fellowship programmes existed at the same time. To prevent this situation and to promote harmonisation of urology training in Europe, the EBU and the EAU executive came to an agreement that in the future all institutions offering fellowship programmes listed by the EAU will be required to have the EBU sub-specialty certification.

The list of all certified centres and a short accompanying description will be published on the official site of the European Board of Urology.

Here, I am very proud to present the first two certified centres. They are both located in the UK. The very first centre that received the EBU sub-specialty certification is the **Centre of Excellence for Female and Reconstructive Urology** at the **Royal Hallamshire Hospital, Sheffield**, and is directed by **Prof. Chris Chapple**. The centre has a large activity in functional and reconstructive urology. It is completely up-to-date academically and performs research and clinical studies within the field. Moreover, the centre provides excellent care in neurourology and reconstructive urology and has excellent possibilities for post-graduate education in the sub-specialty.

The second centre that has been certified is the **Centre of Excellence for Stones in the Upper Urinary Tract at Barts and The London NHS Trust, London**, directed by **Mr. N.P. Buchholz**. The institution is a referral centre with a large and very well organised activity. The centre masters all relevant treatment modalities at a high international standard. The centre has excellent possibilities for post-graduate training and presents a very well structured fellowship programme. Previous fellows have rated the programme highly.

I would like to see more centres in Europe apply for EBU sub-specialty certification, helping us in our work to create a more transparent and accessible training system. Furthermore, I am convinced that fellowship programmes applicants will see the certification as a guarantee of good quality. It is truly a mark of excellence and it can offer excellent publicity for the institutions.

The certification criteria, instructions and application forms can be downloaded at the EBU website, www.ebu.com.