

UEMS Section of Rheumatology

Minutes of the Annual Meeting

2 and 3 May 2024

Lisbon Portugal

Meeting format	In person
Meeting dates	Thursday 2 May and Friday 3 May 2024
Executive contributors	Kaushik Chaudhuri, João Dias, Jean Dudler and Jürgen Wollenhaupt
Main subjects	Workforce, European examination, European Training Requirements and Section development

FINAL MINUTES

1 Opening and introductions

The UEMS Section of Rheumatology held its Annual Meeting in Lisbon on 2 and 3 May 2024. The meeting was organised with contributions from Prof. Kaushik Chaudhuri, Prof. João Dias, Prof. Jürgen Wollenhaupt and Prof. Jean Dudler. Participants introduced themselves, identified the countries they represented and shared their expectations for the meeting. The Executive Committee members then outlined their respective roles within UEMS and the Section.

2 Day one

2.1 UEMS and the Section of Rheumatology

Prof. Wollenhaupt introduced the European Union of Medical Specialists and explained the structure of the Section of Rheumatology. The Section represented 29 member countries through 57 delegates. Each country could appoint two delegates and held one vote. The Executive Committee consisted of the President, Past President, Treasurer and Secretary, supported by the Secretariat.

2.2 European rheumatology workforce survey

The meeting reviewed the workforce survey on the organisation and delivery of specialist care for rheumatic diseases across Europe. The survey was intended to support estimates of the rheumatology workforce required in each participating country.

The survey examined the following factors:

- the population served in each country
- the number of working hours per week
- the proportion of working time devoted to patient care
- the number of patients seen each week

A related Austrian survey examined specialists caring for patients with inflammatory rheumatic diseases. The discussion also addressed the free movement of specialists and the value of sharing expertise and resources across national borders.

Prof. Eva Rath reported that data collection had been completed and analysis was under way. Delegates from participating countries would receive feedback, and the project team was drafting a report for publication.

Prof. Philipp Remans noted forecasts of a smaller rheumatology workforce and stressed the need to use the available workforce effectively. He added that recruitment from within individual countries and from abroad was likely to become more difficult.

2.3 Effects of the war on rheumatology in Ukraine

Prof. Marta Dzhus described the effects of the war on healthcare and rheumatology in Ukraine. Ukraine's population had fallen by approximately 10 million since 2014, reducing healthcare capacity and affecting universities and training centres. Medical and pharmaceutical institutions continued to train healthcare professionals, although resources remained severely constrained.

The Ministry of Health regulates the national rheumatology curriculum, but the war had disrupted training programmes. The number of rheumatologists had fallen from approximately 350 to 300, while the burden of rheumatic disease, including arthritis, had increased. Only one dedicated rheumatology training programme was available.

2.4 National challenges in rheumatology

Delegates compared national challenges in workforce planning, specialist training and access to care. The discussion showed that shortages affected many countries but arose through different funding systems, training structures and geographic distributions.

Country	Issue reported
Belgium	Reimbursement conditions in private practice were directing more patients to hospitals, increasing pressure on hospital rheumatology services and affecting access.
Türkiye	Different training pathways were reported, together with short treatment periods and a lack of standardised guidance.
Poland	Rheumatology was treated as a subspecialty of internal medicine. Differences between larger and smaller institutions contributed to uneven access to care.
Switzerland	Fewer trainees were entering rheumatology, public funding for training had decreased and private practice was discussed as one response to workforce shortages.
Slovakia	Interest in rheumatology had declined while demand was rising because of an ageing population.
Netherlands	The training structure required reorganisation to reduce the loss of trainees and align training capacity with workforce needs.
Spain	Urban areas had sufficient rheumatologists, but rural areas faced shortages. Internists were increasingly providing rheumatology care in smaller towns.
Denmark	Referral problems contributed to delayed arthritis diagnoses. Movement into private practice had reduced staffing in public hospitals.
Finland	Financial incentives supported growth in private practice and contributed to shortages in the public system.
Germany	Workforce targets lacked an enforcement mechanism. Delegates discussed whether some responsibilities could be delegated to nurses.
Greece	Workforce shortages remained the main concern.
Czech Republic	Underuse of available medical care was reported to create inefficiencies.
United Kingdom	A greater focus on internal medicine was affecting rheumatology training. Concentration of resources in larger hospitals made specialist provision harder for smaller hospitals.

Across the country reports, recurring concerns included workforce shortages, uneven access between regions and sectors, financial incentives that affected the distribution of specialists, and training structures that no longer met current needs.

2.5 European examination and training requirements

The Section discussed the development of a European multiple choice examination and the revision of the European Training Requirements for Rheumatology. CESMA would advise the European Board on examination development and quality standards. The examination needed to align with the curriculum and portfolio and to test the knowledge expected of candidates.

The development process discussed at the meeting included:

- defining the purpose, format and delivery method
- selecting an examination provider
- setting standards for question writing and review
- establishing the pass standard and appeal arrangements
- providing candidate support and conducting post examination analysis

EULAR was expected to provide most of the funding. UEMS and EULAR were discussing a memorandum of understanding covering investment and income. At the time of the meeting, the examination was expected to launch in late 2025, with EULAR leading its organisation and UEMS providing oversight.

Participants also considered eligibility, score calculation, appeals, statistical and clinical review, and benchmarking. Chris Edwards, Prof. Simona Rednic and Alessia contributed to the discussion on UEMS and EULAR cooperation. The organisations aimed to develop a curriculum by autumn 2024 within a wider training framework that included courses, advocacy, Training the Trainers and an ePortfolio.

2.6 Clinical scope of the revised training requirements

The revised European Training Requirements would cover rheumatological diseases, syndromes and common presentations, including monoarthritis and polyarthritis. Delegates noted that disease classifications continue to change and that trainees must learn to distinguish between conditions with similar presentations.

The revised requirements would follow the UEMS framework for Entrustable Professional Activities and Competencies in Practice. Cooperation with EULAR on the training requirements and Training the Trainers programme was confirmed as an important part of the work.

3 Day two

3.1 Participation in the Section

The second day began with a discussion on widening participation among UEMS members, associate members and observers. Delegates considered how to support countries interested in joining the Section and noted that awareness of UEMS structures and appointment processes remained limited in some countries. Responsibility for specialist training also varied: professional societies selected trainees in some systems, while governments held that responsibility in others.

The Netherlands expressed interest in the examination and the European Training Requirements. Earlier confirmation of meeting dates and clearer allocation of project work were discussed as ways to improve participation. Delegates also considered how the programme could offer trainees clearer professional and educational benefits.

3.2 Examination structure and candidate access

Delegates examined possible question formats, including matching questions, and agreed that examination questions should not be repeated routinely. The discussion covered the pass standard, candidate arrangements and unrestricted opportunities to retake the examination. The examination was intended to assess knowledge and skills and would not confer a licence to practise.

Pricing needed to remain fair in view of economic differences between countries. The group also considered candidates who did not speak English as a first language. The proposed timing was 90 seconds per question, with an additional 30 seconds to address language needs.

3.3 Organisation and communication

Delegates identified the website as a priority for improving the Section's efficiency and visibility. Proposed content included meeting minutes, reports, project information and current resources. The examination and the European Training Requirements were expected to be central to engagement with trainees and to the Section's response to recruitment difficulties across Europe.

3.4 Financial report

The meeting reviewed membership fees, which were calculated according to the number of rheumatologists in each country rather than the size of individual practices. A new UEMS investment rule was presented. Accounts with balances below EUR 10,000 were exempt. Accounts above that level would retain EUR 10,000, with 50 percent of the remaining balance invested. The stated aims were greater security and transparency.

The session concluded with a presentation on the prospective examination provider.

3.5 Recorded contributions and future training

Recorded presentations from Prof. Simona Rednic, Chair of the relevant EULAR committee, and Prof. Chris Edwards, former EULAR committee chair, were shared because they could not attend in person.

The group discussed holding a live online session for trainees during the following year. Members also supported regular website updates so that delegates and trainees could access current information, resources and project materials.

3.6 Planning the next Spring Meeting

The group agreed to plan the next Spring Meeting, with the EULAR and UEMS examination and workforce matters as principal agenda items. Delegates discussed a Thursday and Friday format and a Friday and Saturday format. A Doodle poll would be circulated to establish members' preference before the dates were confirmed.

3.7 Principles of multiple choice question writing

The final session explained why the examination was needed and how high quality questions should be constructed. The examination would provide quality assurance, support common training standards and map assessment to the European Training Requirements. It should assess factual knowledge, clinical information processing and management decisions.

The required infrastructure included an examination blueprint, question writing groups, review groups and logistical support. Each question should contain a clear clinical stem, a direct lead in and plausible options with one correct answer. The cover test should confirm that a knowledgeable candidate can answer the question before seeing the options.

Questions should reflect realistic clinical situations and test relevant knowledge rather than encourage guessing. The presentation on MCQ structure would be shared with participants to support consistent question development.

4 Agreed follow up

Subject	Follow up	Timing or status
Workforce survey	Complete the analysis, provide feedback to participating countries and prepare the report for publication.	In progress
European examination	Continue work with EULAR on the curriculum, examination model, provider and memorandum of understanding.	Curriculum target autumn 2024; examination target late 2025
European Training Requirements	Develop the revised requirements in line with the UEMS competency framework and continue cooperation with EULAR.	In progress
Trainee engagement	Plan a live online training session and clarify the benefits of participation for trainees.	Following year
Website	Publish current minutes, reports, project information and educational resources.	Priority
Next Spring Meeting	Circulate a Doodle poll on the preferred Thursday and Friday or Friday and Saturday format.	Before dates are confirmed
MCQ development	Share the question writing presentation with participants.	After the meeting

5 Closing

The meeting closed after confirmation of the principal follow up items concerning the workforce survey, European examination, revised training requirements, trainee engagement, website content and planning for the next Spring Meeting.