

## Participation of Young Physicians in the SAC

A survey conducted upon request of the Board of Directors among cardiologists, members and non-members of the SAC, showed some interesting data on the image the Argentine Society of Cardiology has within the cardiology community. The survey respondents are completely aware that the Society plays an outstanding teaching role, expressed by the transmission of knowledge, by training physicians in cardiology and by the continuous medical education of cardiologists. They also emphasize the great quality of every academic activity organized by the SAC, specially the annual Congress and the *Revista Argentina de Cardiología*. Nevertheless, the survey respondents have pointed out that the main aspects to improve are the lack of “guild support” towards its members and the feeling that it is a “closed” Society, inaccessible to young professionals. The SAC through its Health Policy Area has shown concern in issues related to physicians’ representation, their labor situation, the defense of proper practices and cardiology services provided, and these aspects have been treated in these pages by my predecessors Dr. Sergio Varini and Dr. Osvaldo Masoli. The deterioration of our health system, the iniquity in the possibilities to obtain medical care, the lack of prioritization of the medical practice and the labor conditions of health care givers are not indifferent to the SAC. We should not remain strange to the current medical reality; therefore we will go on prioritizing these aspects.

But in this opportunity I would like to focus on the scarce access of young professionals and to analyze the reality and what can be done to revert this feeling.

This is a vital issue for the future of the SAC. The future leaders of the Society will emerge from the young physicians currently incorporating to the SAC, facilitating the necessary renewal of leaders vital for a dynamic institution.

There are multiple reasons to explain the reduction in the interest of young cardiologists in taking part in their scientific society during the last years. Most of them may ascribe to what was previously mentioned, that is to say, the living conditions in our community, particularly the decline in working situations and in physicians remuneration. The lack of academic merit recognition in our health system has led many physicians to carry out their practice exclusively working in clinics and emergency departments, moving from one place to the other; these badly paid activities turn out to be routine, leaving little time for continuous medical education and resulting in a deficit of medium and long-term professional projects. It is very common that cardiology residents, who attend the Postgraduate Course of Specialization in Cardiology at the SAC and belong to cardiology resi-

dencies with high-academic standards, do not return to the Society once they have concluded their training; they even give up their memberships and dive into the aforementioned labor reality.

In addition, the crisis and fragmentations that have affected some institutions which used to have active Divisions of Cardiology, producing certain volatility and instability, have blurred some traditional Schools of Cardiology. In those times when the Divisions of Cardiology were more stable, being a member of the Argentine Society of Cardiology formed part of the professional career, and the heads of those divisions encouraged their staff to belong to the Argentine Society of Cardiology.

In addition, the society in general does not appreciate, and sometimes does not understand, the honorary vocational work in academic and scientific nonprofit organizations, and promotes the cult of the visible and immediate financial success. In several occasions somebody unrelated to Medicine has asked me how much money I earned working at the SAC.

Indeed, there are many reasons inherent to the society as a whole and to the conditions related to the medical practice which conspire against an active participation in the scientific society.

Young physicians may also ignore the possibilities and the ways of developing an open participation in the SAC.

So, let us see what has been done to revert this process, and what still remains unsolved.

Last year new conditions to obtain SAC’s memberships were approved with the objective of adapting the requirements to the current reality, facilitating membership upgrade, based only on academic merits, to the higher grades necessary to occupy managerial positions. This initiative resulted in the incorporation of an important number of Full Members.

In order to facilitate the presentation of scientific papers valid for membership upgrade, and in addition to the World Congress, the SAC will organize the Scientific Council Sessions during next October. In this way there will be two annual opportunities to present open topics.

The Scientific Councils constitute the proper field where young cardiologists may start their participation in the activities of the scientific society. The nature of the councils is mainly scientific and educational, and they are the natural space where the problems associated with the different sub-specialties are discussed. The extension of the number of board members of the Councils has been approved; this implies that young cardiologists may be widely represented and they may have more opportunities of participation. The involvement in the scientific activities of

the Councils is open to all those interested. Indeed, every Council will grant the CONAREC (National Council of Residents in Cardiology) a voluntary seat. The link with the institution that groups together the residents in Cardiology all around the country is a priority for the SAC which will keep on promoting joint activities in Congresses and Symposiums. The aim of creating an institutional connection through a seat in the Scientific Councils will enhance this relationship, as a great number of peers may take part in the activities of the society during their learning process.

The Research Area is one of the most suitable spaces to begin participating in the Society and needs new members. The development field is large as several projects will start this year in addition to those being currently carried out. Subject matters vary from "Study of the Prevalence of Smoking Among Teachers in Argentina" and "Comparison Between the Prevalence of Smoking in Physicians and in the General Population" to "Cardiology Staffing in Argentina" (a study performed in joint with the FAC), "New Physicians Future Expectations Related to their Practice and Quality of Life" and "Physicians Attitudes Related to the End of Life"; other matters include "Analysis of the Prevalence and Incidence of Diabetes in the Population and Its Connection with Cardiovascular Diseases and with the Cardiologists State of Knowledge in the Treatment of Diabetes" and "Compliance of SAC Guidelines and Consensus in Daily Practice", just to quote a few examples.

Undoubtedly, the fact of carrying out one of these projects implies not only the incorporation to the activities of the society but also the acquisition of a strong learning and training in clinical research. This Area has recently posted an announcement in the website in order to incorporate young researchers.

The Teaching and Learning Area and PROSAC are also open fields where young members may incorporate every year. They may collaborate with senior members planning and coordinating courses and the University Course of Specialization in Cardiology. The residents of 17 Divisions of Cardiology from the city of Buenos Aires and from the Great Buenos Aires attend this University Course. In addition, the SAC certifies other 17 residencies in Cardiology in the whole country with learning programs supported by the SAC through its Teaching and Learning Area and Regional

Districts, another space where young physicians may develop their skills.

PROSAC, an expanding continuous education program, also offers the possibility to take part in its committee.

The Instructional Resource Area is responsible for the learning tools used by the SAC, and for its library. An expansion program has been designed for the cycle 2008-2009 which includes an improvement of the web site, with a greater use of IT resources applied to teaching, research and communications. A plan developed to optimize the library resources is being carried out in order to facilitate the use of the library by the members. Obviously, the expansion of the Instructional Resource Area will require the collaboration of more members, becoming a propitious field for the young physicians.

Nevertheless, a personal motivation is needed to start participating in the activities of the society. Vocation is required to play an active and voluntary role in an institution, to work in something beneficial for other colleagues and to progress from an academic and professional viewpoint, and this vocation should be supported by the Society and by its senior members. The sense of an active participation in the society is only achieved by vocation associated to the idea of professional development and progress. I consider that the experience of working at the SAC is useful in the learning process, helps to interact among peers, is a stimulus for personal and professional improvement, and has a non financial interest. Even more, it is accompanied by the professional distinction of being an active member of a well-known and prestigious entity, concerned about continuous medical education, and focused in improving cardiology practice for the benefit of the patients.

By the time these lines are published, we shall be close the XVI World Congress of Cardiology, which will be an issue for another letter. I hope young cardiologists will get in touch with peers from all around the world and this event may serve as a willingness to become involved in the activities of the society. The SAC needs to train new leaders to ensure that the brilliant trajectory achieved for more than 70 years will go on.

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