

General Assembly Minutes

**Minutes of the UNEPSA General Assembly Meeting, November 19th-21st, 2004,
Istanbul, Turkey**

Agenda

1. The president of UNEPSA, Prof. Jan Janda - welcoming address to all national delegates (17 European countries)

2. Introduction of national delegates

(list of the names and addresses of all delegates with their signatures attached). The following countries were represented: Albania, Czech Republic, Croatia, Estonia, France, Georgia, Germany, Hungary, Israel, Italy, Romania, Russia, Serbia-Montenegro, Slovakia, Slovenia, Turkey, Ukraine.

3. Approval of the agenda

The current agenda of GA in Istanbul was approved without amendment.

4. Approval of the last GA held in Prague, Czech Republic, Oct. 2003

The minutes of the Prague GA meeting have been displayed on the www.unepsa.org since one year available to all UNEPSA-member countries. There were no objections and the text was approved.

5. Report on Europaediatrics 2003, Prague (David Branski)

David Branski reported on the 2nd Europaediatrics meeting, Prague 2003. He mentioned the members of Executive Committee, Scientific Committee, Scientific Committee and Local Organising Committee of the congress.

Despite the problems (moving the congress from Jerusalem to Prague), the number of participants reached 1034, there were 123 oral presentations and more than 300 posters). According to the mail reports of participants the meeting was evaluated as a very successful event concerning the scientific and social activities as well.

On behalf of the UNEPSA-Council Branski expressed thanks to Manual Katz (President of the Congress), professor Jan Janda (local organizing committee). Janda appreciated merit of David Hall and David Branski as scientific committee co-presidents.

There was a proposal by Jan Janda that UNEPSA congresses should be held not every third year, but every second year (between CESP meetings).

This proposal was unanimously approved by all GA-delegates. UNEPSA representatives will present this proposal on the floor of the coming CESP meeting in Brussels in December 2004.

6. Report on the historical, present and future activities of UNEPSA (Jan Janda)

The first idea to join all European paediatricians in one organisation arose 1975, the founding list of UNEPSA (1976) bore signatures of "pilgrims fathers". The next year we will remember 30 years of this event and following UNEPSA-activities. The original idea of UNEPSA was to abridge the gap between the developed western countries and countries behind the iron curtain and to join the community of all European countries together despite the different political systems. UNEPSA organized regularly important international meetings and workshops on hot topics in the framework "care of children and adolescents".

Janda mentioned the most important results of UNEPSA activities achieved during the last few years: workshops, symposia, helping the people from Eastern Europe to take part at those events, focusing on the practical questions of paediatric care in Europe. In the last years, UNEPSA organised some important task force using questionnaires resulting in important publications in recognised international journals.

1. **Manuel Katz et al.: Demography of paediatric primary care in Europe:** delivery of care and training. *Pediatrics*, 2002 May, 109(5):788-796- Access to the full text possible on the main menu of www.unepsa.org.

2. **Ehrich JH et al.: Demography of paediatric renal care in Europe:** organization and delivery. *Nephrol. Dial. Transplant.* 2004 Jun.1 (Epub. ahead of print).

3. The third task force targets the care of **adolescents in Europe** (organised by Turkish colleagues).

Congresses: the first successful event was **Europa paediatrics 2000, Rome** (presided by Armido Rubino), the second one Europa paediatrics 2003, Prague (president of the Congress: Manuel Katz, co-president Jan Janda).

The last UNEPSA-workshop was held on June 26th, 2004 in Istanbul (local organiser Turkish Paediatric Society/Mehmet Vural) having the main topic adolescentology (preparing a questionnaire on the demography of this care in Europe). The participants came from Cyprus, Israel, Italy, Greece, France, Portugal, Switzerland, Czech Republic, Turkey, USA. The questionnaire may be found on the UNEPSA-website and delegates of the GA are asked to stimulate the appropriate response in their own countries!

The UNEPSA-Council and the delegates do feel that the publications mapping the contemporary demographic situation of paediatric care may become a strong political tool, particularly in the Eastern European countries on the level of the official state health care policy (e.g. demography of the primary paediatrics and renal care of children).

Report on the UNEPSA-website: www.unepsa.org (presented by Jan Vejvalka, Prague): topics to be discussed: technical background and issues concerning the content of website have been discussed. Basic data, addresses, events/meetings. Until now, there is a rather low activity bringing news from UNEPSA-member countries to our website. The advantage of website is clear: easy follow up, presenting news in European paediatrics, displaying abstracts of important meetings, methodology for further questionnaires, free access to Internet in the countries, where the delivery of scientific journal is a lasting problem. We were successful putting the abstracts of both

Europaediatrics meetings and IPA-Congress in Beijing and Cancún on our website, with a free access worldwide. The delegates of GA have been addressed to provide our webmaster with basic information on their society/association and to renew the contacts. What should we find on the UNEPSA website: information for member societies, UNEPSA publications, congress abstracts, meetings/event announcement, major demographic programmes - questionnaires, updated information about member societies (links!). Particularly, the system how to collect important data used for the questionnaire on adolescents may serve as a model for next task forces.

Request for National Societies: to be sent to our webmaster:

- a) addresses of their websites
- b) short introduction of the National Societies
- c) general links to IPA, WHO, UNICEF websites.

Recommendations for further topics to study demography of care of children in Europe: obesity in children and adolescents, pedodontatology, current vaccination policy in Europe, infant mortality including prematurity and congenital malformation.

7. Future, relationship of UNEPSA and CESP: present situation of European population: according to the recent statistical data, the population in countries attached to the European Union clearly exceeds the population in non-EU countries (ca 463 millions vs. 364 millions). Nevertheless despite this major difference **the children population is practically the same (EU-countries ca 92.3 millions vs. non-EU countries 92.5 millions!).**

The proportion of children population in the EU-countries is ca 19.0% but in non-EU countries more than 25%!.

So, one half of European children are living outside of European Union. In that sense, UNEPSA tried always to attract also the non-EU rest of Europe having in mind, we should take responsibility also for these children/paediatricians.

CESP: until up to date, the CESP was active only in EU-area. CESP's important tasks are particularly preparation of EU-legislation, concepts of postgraduate education and paediatric training, being close attached to the administrative of EU), accreditation of different European paediatric institutions, ethics in paediatrics, harmonization of paediatric activities (e.g. vaccination schedules). As can be derived from the nomenclature of CESP (CESP = Confederation of European **Specialists** in Paediatrics!), the paediatricians in Western Europe are often taken as specialists and this concept may result in restriction of their activities in the field of the primary paediatric care. The paper on demography of paediatric primary care in Europe (Paediatrics, 2003) showed clearly that the positive results care of children are dependent on the GNP. Nevertheless, in the countries with a lower GNP the level of care provided was better in regions, where the paediatrician is taken not as specialists, but as GP for children!

UNEPSA-Council delegates were commissioned to present our current idea on cooperation with CESP. Firstly, there should be an agreement on the future activities to avoid overlapping CESP vs. UNEPSA and parallel projects.

Aim: UNEPSA and CESP have to get closer to each other searching the way of this procedure! UNEPSA is aware of the important role of CESP for the future of the European paediatrics, but would not like to exclude the non-EU countries from this process.

Proposal for the way of cooperation of the two organisations: **federation-like relationship, establishing a steering-committee.**

This proposal and main points of discussion at the UNEPSA GA will be presented at the CESP meeting on December 10-11, 2004, in Brussels.

8. Report on IPA congress in Mexico (Manuel Katz, representative of UNEPSA in International Pediatric Association = IPA)

General statement: majority of European paediatricians do not know what is the IPA, UNEPSA and CESP. We have to introduce ourselves.

IPA-representatives are not well informed on the current situation in the European countries, especially about the former socialist ones (number of inhabitants, type of paediatric care, health service in different countries, etc.). The IPA focuses their activities on the developing countries and does not realise, that there are also heavy problems in some European countries (Ukraine, Balkan countries, etc.). For instance, the population of Ukraine is not 4.5 million as it is often believed but almost 50 millions inhabitants with more than 12 millions children!) Decision: Manuel Katz commissioned to prepare a draft of report on the European paediatrics for IPA. Ongoing task force of IPA: Obesity, next IPA congresses: August, 2007, Greece (election!), 2010: Johannesburg, South-Africa. Important IPA- new website: www.ipa.org.

9. Report of treasurer of UNEPSA (Gerhardt Gaedicke): several countries did not pay the membership fee. There was a nice surplus from the Prague meeting 2003 providing a positive balance. The UNEPSA-account has been transferred from Hanover to Berlin.

10. Election of the council members: new president elected (from March, 2005): **Armido Rubino** (Italy), Past president: **Jan Janda** (Czech Republic), Secretary General: **David Branski** (Israel), Vice presidents: **Mehmet Vural** (Turkey), **Éva Oláh** (Hungary), Treasurer: **Gerhardt Gaedicke** (Germany), Members: **Danielle Sommelet** (France) and **Leila Namazova** (Russia - a new council-member).

11. Proposal for change the name -UNEPSA into European Paediatric Association? (CESP into European Academy of Paediatrics?) J. Ehrich: It is not only the name is important but the concept/mission of the organisation: UNEPSA is the **Union of the National Paediatric Societies and Associations**, i.e. union of organisations, and not a simple association having individual members from different European countries.

12. The future congresses and meetings: CESP - congress in Barcelona 2006, IPA - congress in Athens 2007, UNEPSA - 3rd Europaediatrics Congress in Istanbul 2008, IPA - congress Johannesburg 2010, UNEPSA - 4th Europaediatrics Congress in Moscow (date still not fixed).

Prof. Jan Janda, MD
President of UNEPSA

Prof. Éva Oláh, MD
Vice-president of UNEPSA