



The success of the 7th EAPC Congress at Palermo 1–5 April 2001

When, during the 7th Congress of the European Association for Palliative Care (EAPC), Dr Andrew Hoy, Editor of the *European Journal of Palliative Care (EJPC)*, asked me to contribute some thoughts on the Congress for the journal, I was unaware of the difficulty I would have in trying to summarise the events so soon afterwards, writes Annette Welshman. Even though we are all still recovering from the sheer intensity of attending an EAPC congress, I will try to collect my thoughts.

This was our 7th Congress, 11 years since the first, held in Paris in 1990 under the auspices of the then President, François Mitterrand, where over 1,700 participants attended from 22 countries. The EAPC Congresses have been hosted since then by Belgium, Norway, Spain, the UK, Switzerland, and now Italy.

An international environment

It gave us great pleasure to welcome more than 1,900 participants from over 48 countries – some from as far away as Australia, South Africa, Argentina, Japan, Singapore and Chile, or from countries where leaving national soil would have previously been difficult, such as Bosnia-Herzegovina, Lithuania, Albania and Croatia – all brought together with the aim of exchanging and learning all those dimensions pertinent to palliative care.

The international environment enabled a broad, active exchange of ideas and attitudes as well as research-based knowledge in areas such as ethics, therapeutics, communication, end-of-life care, research, to name just a few.

While wandering around from hall to hall, I was impressed by the effort everyone attending was making to *communicate* ... and I do not mean overcoming the obvious language barriers that existed, but the need to exchange and learn. In some halls, there were 10 to 15 people practically forming 'instant workshops', and in others there was not even standing room available.

Future research

It was not just the variation in numbers that made the difference, but the intensity of interest that struck me. Some of the items discussed will certainly be followed up with further clinical research and some translated into EAPC taskforces, such as the new group studying the issue of euthanasia. The results of this research will certainly find a platform at the 8th EAPC Congress at The Hague, in the Netherlands. In addition, many nurses working in palliative care asked to join a research enquiry into certain clinical issues in palliative care nursing.

Opportunity to 'catch up'

Both EAPC members and non-members dropped in to visit the EAPC and *EJPC* stands situated in the registration hall, to give suggestions or to ask for information. Some questions ranged from information regarding education centres in palliative care throughout Europe, or as wide-ranging as to the address of a hospice in Bolivia!

The Congress always gives the EAPC an opportunity to 'catch up' with everyone. There were two meetings of the Board of Directors, before and after the Congress. There were meetings of the Research Network, Social Workers, the Neurology group, the Education group, the Eastern European group to name just a few.

The EAPC General Assembly and Collective Members meeting proved to be very fruitful and brought many people together, giving positive input to the growth of the Association. All these meetings had full agendas stimulating interest outside the actual congress programme, before it had even started!

The message received from Dame Cicely Saunders in her video touched us all. Even though she was unable to face the journey, she wished to participate and a video solved her dilemma. We are truly grateful.

In addition, the EAPC award presented to Dr Jan Stjernswärd of Sweden was our recognition for his efforts within the World Health Organization (WHO) to promote pain relief and palliative care.

The social programme

The social programme was not lacking in Italian hospitality or Sicilian culinary expertise! The welcome reception following the opening ceremony proved for many to be a 'welcome' refreshment indeed! However, we experienced true Sicilian cuisine on Tuesday evening (night for some!), when the tables were laden with local dishes and fresh seafood, all to be swilled down with excellent Sicilian wines – some swilled and swilled! – followed by dancing in the moonlight to 'Beatlesmania'. So many of you bravely turned up to the plenary lectures the following morning at 8.30 am, which goes to show how resilient palliative care people are. I congratulate you all, since as I spoke that morning, I looked down to a 'full house' of interested faces, albeit slightly pale!

For many of us, however, the highlight of the social programme was the concert at Teatro Massimo. Words cannot describe the beauty of the theatre, let alone the programme, so I will not attempt to do so.

Morphine versus methadone

As promised by Sebastiano Mercadante in the December issue of *EJPC*, there were many surprises and events in store for the delegates, including the promised football match. Never before have we witnessed palliative care physicians struggling and sweating to win the battle of rotating opioids. The reader may think that I am referring to a clinical situation. No, quite wrong. I am referring to the two teams, *Morphine* and *Methadone*, with *Pain* as the referee. At times, there were more than 14 players on the field for each side, at others less. It all depended on cardiac output at the time or Nathan Cherny's advice on routes of methadone administration. Professor Geoffrey Hanks (manager of *Morphine*) was duly rewarded in his long-standing belief in the use of morphine, when his team won by a goal. The addition of three very young and healthy men to his side went practically unnoticed at half-time, except by the author and Professor Ventafridda, who unfortunately for *Methadone* were both staunch supporters of *Morphine*.

Acknowledgements

It is here that I must thank Giorgio Trizzino, Sebastiano Mercadante, the respective organising and scientific committees, the EAPC Head Office, Kenes, Stein Kaasa, my fellow board members, but most of all, I would like to thank those of you who attended – speakers and participants – for contributing to a fruitful and successful Congress. To those of you who could not attend, we look forward to seeing you all in The Hague in 2003.

Annette Welshman, Vice President of the EAPC, Italy

Out and about with the European Journal of Palliative Care



The EJPC stand at Palermo, 2001 and part of the team from Hayward Medical Communications

The beginning of April saw the *European Journal of Palliative Care* (EJPC) in Palermo for the EAPC's biannual congress.

The stand attracted many visitors who were keen to find out more about the journal, or to tell us how much they enjoyed reading the publication.

Suggestions for articles were much appreciated and we will be following these up over the coming months.

Palliative care associations from across the world also discussed with us the opportunities for closer co-operation, and again we will be pursuing these contacts.

We also hope to publish some of the papers from the EAPC Congress in the near future.

During our time in Palermo, we ran a prize draw for new subscribers and the winners were Dr Carlos Centeno Cortes and Dr Karl Pistracher, who both received Littman Master Classic stethoscopes.



Dr Centeno Cortes receiving his prize from Bethan France, Sub Editor (right) and Charlotte Hunn (left)

Thank you to everyone who took the time to visit the stand, and we look forward to seeing you in The Hague in 2003.

Christopher Tidman, Publisher of EJPC, UK

Gathering of social workers in Palermo

Those social workers who could get to Palermo a day before the Congress, met to exchange their experiences and some of the particular challenges they face in palliative care in their home settings.

Switzerland, England, Iceland, Scotland and the USA were represented and through this initial meeting, further contacts were made with colleagues in Israel, France, Italy, Norway and Belgium.

We heard about forthcoming specialist work, such as projects to extend palliative care to people with learning disabilities; educational initiatives in teaching psychosocial aspects of care; and social workers and chaplains working together to provide staff support groups. We also wrestled with further defining the role of the social worker in palliative care.

This sort of agenda is not unusual, nor the warmth of greeting between colleagues in identifying the commonality and difference in their roles across countries. Yet this always comes as a surprise as one strikes up new contacts. The EAPC Congress provides a great opportunity for networking – one of the main benefits of such a gathering.

Thanks to Pam Firth and Gill Luff for chairing the meeting. They are writing a report and producing a list of social workers. If you would like to be included on the circulation list, please let me know. David Oliviere, Macmillan Principal Lecturer, Middlesex University, UK

Living with cancer

Internationally renowned holistic doctor, Rosy Daniel, her nutritional adviser, Jane Sen and inspiring patient speakers will be participating in a series of seminars called 'Living with Cancer'. The seminars are to take place in June around the UK, in London, Liverpool, Norfolk and Jersey.

The aim of these seminars is to bring help, guidance and empowerment for people with cancer, their supporters and healthcare professionals, as well as those wishing to prevent cancer.

In clear, comprehensive steps, Dr Daniel will take the participants through all the complementary medical, psychological, mind-body, self-help, spiritual and nutritional approaches which can be used to help improve symptoms and outcomes from cancer treatment and greatly enhance peace of mind and quality of life. Patient speakers will explain how they have managed to recover from cancer through their own efforts, often against all the odds.

The seminar dates are:

- 2–3 June 2001, Norfolk
- 16–17 June 2001, London
- 23–24 June 2001, Jersey
- 7–8 July 2001, Liverpool.

Further seminars are planned in the autumn for Leeds, Birmingham, Cardiff, the Lake District and a further London date. For more information, please contact Sara Hassen or Elaine Smith at In Any Event UK. Tel: +44 (0)117 925 7100.

The Education for Physicians on End-of-Life Care (EPEC) Project

The EPEC Project is an ambitious initiative designed to educate physicians on the essential clinical competencies in end-of-life care. At the heart of the project is a core curriculum that covers the basic knowledge and skills that physicians need to care for dying patients appropriately. The project is supported by a grant from the Robert Wood Johnson Foundation – an independent American philanthropic organisation that promotes health and healthcare in the USA.

The *EPEC Curriculum* was designed with input from nationally respected experts in the field. It combines didactic sessions, videotape presentations, interactive discussions, and practical exercises in a clear and concise format. It consists of four

plenary modules and 12 workshop modules. Recently reviewed in *The Lancet*, the curriculum is uniquely practical, transportable and self-contained. It teaches fundamental skills in communication, ethical decision-making, palliative care, psychosocial considerations, and symptom management. The materials and their take-home messages can be easily adapted to teach interdisciplinary audiences.

The *EPEC Curriculum* can be downloaded free from the internet (www.epec.net). Alternatively, the *EPEC Curriculum* can be purchased as hard copy or on CD-ROM from the EPEC Project. The EPEC Project also sponsors two-day programmes to teach participants to use the *EPEC Curriculum*.

For further information, please contact the EPEC Project via email at info@epec.net
Charles von Gunten, Co-principal, The EPEC Project, USA

Congratulations

Out of more than 3,000 aspiring applicants, Professor Ilora Finlay has been named by the UK House of Lords Appointments Commission to become one of 15 new independent life peers who will take their seats after the general election.

Professor Finlay is a world expert in palliative medicine and is Vice Dean of the School of Medicine, University of Wales College of Medicine. Since 1987, she has developed palliative care in Wales and has contributed to strategic developments in this field both in the UK and internationally.

NSF for Older People

The National Service Framework for Older People (NSF for OP) has now been published. To order a copy of the NSF for older people, please contact:

Department of Health, PO Box 777, London, SE1 6XH, UK.

Fax: +44 (0)1623 724524. email: doh@prologistics.co.uk
or alternatively download it from the website:
www.doh.gov.uk/nsf/olderpeople.htm

French Day at St Christopher's Hospice

On 6 June 2001, a French day is being held at St Christopher's Hospice, addressed at healthcare professionals and volunteers interested in palliative care. The programme consists of lectures on pain, looking after families, care nurses, research in palliative care and a guided tour. The day will be conducted in French. The day costs £80 and, in addition, includes lunch with Dame Cicely Saunders.

For further information, please contact Avril Jackson, St Christopher's Hospice.
Tel: +44 (0)20 8778 9252.
Fax: +44 (0)20 8776 9345.
email: avril@his2.freemove.co.uk



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UNIVERSITY OF COLOGNE

**The Medical Faculty of the University of Cologne
invites applications for the following position:**

**Full Professorship (C4) in Palliative Medicine
donated by the Krebshilfe (German Cancer Aid)**

The primary tasks of the position include clinical patient management, the development of a curriculum for medical students and the subsequent teaching, integration into the general curriculum of the medical faculty, and the development of research projects in the field.

Palliative medicine has been taught at the Cologne Medical Faculty since 1983. The 'Mildred Scheel Haus' was built by the Krebshilfe (German Cancer Aid) and opened in 1992. It includes 15 inpatient beds, an outpatient department, and ambulatory community facilities for home treatment. The Mildred Scheel Academy for Research and Education, led by the Krebshilfe, is attached to the Mildred Scheel building.

Prerequisites for the application include full medical training, clinical experience in palliative medicine, proof of habilitation or equivalent scientific qualification, and acknowledged work in the field of palliative medicine.

Extensive experience of teaching medical students, and the ability to co-operate with the clinical and theoretical allied disciplines in practical and theoretical terms, is expected. It will be important to actively work within the university and be involved in medical politics to officially establish palliative medicine as a field or subdiscipline within medicine.

**The University of Cologne is an equal
opportunities employer.**

**Applications with the usual documents
(CV, professional and teaching certificates, publication
list) and reprints of publications are requested to be sent
to the Dean of the Medical Faculty of Cologne University,
50924 Cologne, Germany (Dekan der Medizinischen
Fakultät der Universität zu Köln, 50924 Köln, Deutschland)**

by 21 June 2001