The alternative models of internal medicine

- Internal Medicine
- Other Medical Specialty
- Medical Subspecialty
The Common trunk

As a consequence of an ageing population in Europe there are an increasing number of patients suffering from more than one chronic condition. They often require a number of different specialists involved in their care. It is important that all specialties stemming from internal medicine contribute to integrated care, having a basis of knowledge in internal medicine. Only a concerted action by all these specialties together with the specialty of internal medicine can bridge existing gaps in healthcare delivery and provide comprehensive patient care. The broad-based training requirements of the common trunk (see Section I below) should enable medical specialists other than internists to be proficient in the care of patients with common chronic diseases apart from their specific field of expertise. As a practitioner they should be willing to meet community needs and value the maintenance of their knowledge and skills in internal medicine.
Resident elderly population in Portugal (thousands) 1991-2060
Distribution of Medicare beneficiaries by number of chronic diseases and total spending of Medicare (2010)

- 0 to 1 Condition: 14%
- 2 to 3 Conditions: 23%
- 4 to 5 Conditions: 32%
- 6+ Conditions: 32%

Percent of Beneficiaries

Percent of Total Medicare Spending

Chronic conditions among Medicare beneficiaries. Chartbook: 2012 edition
Forecast of the annual growing of the inpatient days in USA

- Cirurgia: 1%
- Medicina: 2%
The growing of medical knowledge…

- 10,000 clinical trials per year
- 3,000,000 medical articles
- 30,000 medical reviews
The Subspecialization in Cardiology

- General Cardiology
- Interventional Cardiology
- Cardiology Intensive Care
- Risk Factors
- Heart Failure
- Heart Imagiology
- Arrhythmology
- Internal Medicine
Figure 1: Hospitalists Trend in US
Source: Society of Hospital Medicine
Remuneration of doctors, ratio to average wage (OECD, 2013)

OECD 2015 Health at a glance 2015
Health Expenditure per capita in OECD countries (2013)
Health Expenditure by item in OECD countries (2013)

OECD 2015 Health at a glance 2015
Actual number of residents training for a specialty in Portugal (2015)

6,000 residents

- 2,000 in General Practice
- 1,000 in Internal Medicine
- 3,000 in all other specialties
Typical 24 month common-trunk programme in internal medicine

• 6 months in an emergency ward or an acute medical unit
• 4 months in an intensive care unit or high-dependency care unit
• 6 months in ambulatory care (outpatients and/or day care)
• 8 months in an inpatient internal medicine service (which may include, if necessary, rotations in different specialties, preferably excluding the specialty of final choice, if applicable)
• The following 4 years of training in internal medicine are organised in 4 to 6 month rotations. All medical specialties within the scope of practice of internal medicine are eligible for inclusion.
Duration of Internal Medicine training of the medical specialties in Portugal

• Oncology- 21 months
• Gastroenterology, Pneumology, Nephrology, Infecciology, Rheumatology, Endocrinology – 1 year
• Heamatology and Cardiology- 8 months
• Neurology- 0 months
Areas of competence in Internal Medicine (Portugal)

- Intensive Care
- Intermediate Care
- Emergency
- Autoimmune Diseases
- Geriatrics
- Heart Failure
- Cardiovascular risk factors
- Hepatology
- Stroke
- Pregnant Medical Pathology
- Metabolic Diseases
- Palliative care
- Hypertension
- Diabetes
- HIV
- Oral anticoagulation

Internal Medicine

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Life expectancy at birth and health spending per capita in OECD, 2013
Infant death and infant mortality rate (1996-2014)
Stroke mortality in OECD countries (2003 and evolution between 1990 and 2013)
Asthma and OCPD hospital admission in adults (OECD, 2013)
Diabetes hospital admission in adults (OECD, 2008 and 2013)
Doctor involving patient in decisions about care and treatment (OECD, 2013)
Dual certification in internal medicine and another specialty related to Internal Medicine and training only in Internal Medicine

• In order to attain certification in both internal medicine and another internal medicine related specialty (known as dual certification) a minimum duration of 7 years postgraduate medical training is required. This should encompass a minimum of 4 years in internal medicine, which includes the two years common trunk.

• The training in internal medicine and other medical specialities comprises a two-year common trunk followed by a minimum period of 4 years to become certified in internal medicine.
Proposals

• Inclusion in the text that dual certification is not a consensus in the EC, because some countries does not accept it
• No reference of the duration of the training period to the dual certification
• 5 years of training to obtain internal medicine certification with the possibility of one year in a medical specialty that could be the first year of training in a medical subspecialty