

**Venezuela Chapter
Governor's Newsletter**

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Editorial: “Fruits of an administration” Dr. Israel Montesdeoca

The different activities developed during the last 4 years by the Venezuela Chapter, consisting of Continuing Medical Education (EMC - *Educación Médica Continua*), already started during the previous administrations presided by Drs. Simón Beker and Ramón Soto Sánchez, whom we acknowledge for their continuous work in improving all forms of information and training of the different Members of the Chapter.

In this Administration of ours we have been interested in undertaking and broadening these scientific activities to all Postgraduate courses in Internal Medicine of the different Hospitals where these trainings exist, including to the moment also those Postgraduate courses of the cities of Valencia and Puerto Cabello, where these activities have also been taking place thanks to the collaboration of Dr. María Inés Marulanda and María del Pilar Mateos, as well as all the members of the Carabobo Chapter of the Venezuelan Society of Internal Medicine (SVMI).

We must give special mention to the activity initiated with the students of Medicine which, as the previous ones, has been very successful academically.

We have had our annual scientific meetings together with the Congresses of the SVMI, and separately when those Congresses do not occur. These reunions have been four in total, and they've had special importance in consolidating our Chapter as an organization of high prestige in all the medical community of the country.

In this summary a good part of the growth of the Chapter as a novel scientific medical organization is demonstrated, an organization which by having such consolidated bases has permitted the directors of the central ACP to grant for four consecutive years the Excellence Award to our Chapter, for which we feel proud thanks to the collaboration in respect to its objectives and mission of all Members of it, achieving in this way to accomplish the higher responsibility of gaining a better professionalism. We also wish to acknowledge the help and support that we have received in all of our activities from the Central Board of Directors of the Venezuelan Society of Internal Medicine.

Teaching in Medicine: “Reflections on the practice of teaching by a medical doctor lent to education”. Dr. Mario Patiño.

Reflection: “An active consideration, persistent and careful of all belief or supposed form of knowledge under the light of the fundamentals that support it and the ulterior consequences that derive from it”.

Dewey, 1967

The reflection on the practice of teaching has its shades; it's a phenomenon of multiple dimensions that in this, as in any other concrete case, is marked by specific peculiarities. It involves the conscious immersion as a medicine teacher in the world of self experience, loaded with connotations, principles, symbolic trades, affective correspondence, and enormous social interests intensified in the recent years and a disturbed political scenario in our country.

The orientation in the training of medical professional has been based, for a long time, on a model of “diagnosis - treatment”, which has had the consequence of the distortion of the doctor - patient relationship, a deficient instruction in the social aspects of the medicine and of the patient, and the attribution of little importance to prevention of diseases and the promotion of

health. These deficiencies in the training are frequently overcome by the exercising physician due to his or her own professional life-time experience (Nolla, 2002). This is why the acquisition of professional knowledge during practice is based on reflection and on receiving feedback from it.

In the same fashion, reflection on the origins, purposes and consequences of our performance as a teacher is, or should be, depending on each one's stances, an essential component of the education of the medicine students and teaching staff, in which the thinking patterns are involved, implicit theories, beliefs, and the ways of representing reality that we use in our daily duties; because when the practice becomes routine and knowledge of the actions becomes mechanical it is unconscious (Schön, 1992), the professional tends to reproduce his or her way of acting, to dehumanize him or herself, to become stiff.

The activity that we teachers of medicine do, like that in other areas, is fundamentally practical. Nevertheless, to undergo it correctly a body of pedagogic knowledge is required, one with which we may orientate what we do, how we do it, with what we do it and what for. Therefore, this practical activity is constantly tied to the theoretical knowledge previously constructed.

If the teaching activity and the educational models are subject to deep revision in the developed countries, the situation becomes more severe in Latin American countries, which must also overcome the ever growing gap separating us from the more developed nations. In Latin America, the transformation of education and the seek for innovative alternatives represents a priority that shall determine the development of processes of instruction, recycling and permanent improving of the teachers, which requires deepening the analysis and putting in practice models of instruction and curricular models that give an active and transforming professional role to this duty, committed to the problems and needs of the individuals and the communities in which we act. Gual (2002) therefore states that the instructors of the students in the different fields of the health sciences must be aware of our responsibility, both collective and individual, in the training of these future professionals.

Teachers in the health sciences must be willing to facilitate the development in our students of the capabilities and principles that modern society demands, which requires no more than a competent and humanist professional, and to sacrifice, if such was the case, the unnecessary components of our "important" area of expertise as specialists and/or sub-specialists.

The data that derive from our history during the last four decades are sufficient to demonstrate that our hierarchical and bureaucratic education system has rendered itself inefficient and insufficient. Its reflection on the educational practices has been manifested on an education which is aloof from the interests and needs of those who are being educated, and moreover, of the social needs. Another unfortunate sign of our educational practice in use is the ever growing gap between the teacher and the vital problems of the classroom. Additionally, our professional image has deteriorated, turning us in an uncritical information deliverer, an aliened professional and, as if it wasn't enough, poorly rewarded.

Difficult is the mission of the faculties of medicine, in not abdicating their formative role of demonstrating the students that medicine, as well as a science and a means of earning one's living, is a profession at the service of mankind, of its dignity and freedom. Difficult, because to keep the tradition of professionalism and humanism of medicine alive, teachers who are interested

in something more than their personal prestige, the development of their departments and the expansion of their disciplines.

A policy in the faculties and universities in general is required, one that commits itself to the practical and critical/constructive formation of the teachers, which has among its goals the overcoming of this culture of individualism, because the load of passive and alignment attitudes which predominate in our teaching performance is not easy to counteract.

The university professor is a professional who must contribute to society by means of the University as a transforming agent; this, more than a goal, represents a starting point. Thus, assuming a model to orientate our action as a professional of education in medicine is not a simple process which can be solved by taking formal and mechanical actions, but it requires more than just an attitude for change. The most important is to know the obstacles that restrict our better performance, designing ways of acting that are consequent with the possibilities of action that we as individuals have, to achieve other "possible worlds" that are not only the product of a form of expression and language, but of profound and radical negotiations, that truly transform our daily educational reality.

Perhaps all this will sound greatly Utopian, nevertheless, it is preferable to dream and imagine better worlds than to become a perpetual accomplice of the dominant rationality.

Article for the Promotion of Internal Medicine: "The need for changes in the training of Internists" Dr. Héctor Marcano.

Internal Medicine as a specialty faces a series of interesting yet worrying challenges in the actual moment, which are necessary to face firmly and decidedly, for they deal with nothing less than the future, permanence and validity of Internal Medicine; in other words, with the survival of the very specialty.

Our secular problem of identification with the general public and even with our own patients and colleagues, appears deepened nowadays with the proliferation of other specialties concerning the primary cares area, traditionally one of the zones of actions of the Internist. Names such as General Internal Medicine, Family Medicine, etcetera, tend to lead astray the multi-functional abilities of a well-trained internist, and favors the unconscious rendering of natural spaces of Internal Medicine to other specialties.

Additionally, the enormous technological development of medicine, and the emergence of multiple sub-specialties has generated the erroneous belief, both in the general public and the medical community, that turning promptly to these novel medical areas will solve the problems of the patients quicker and more efficiently, a circumstance which doesn't resist the simplest analysis from the point of view of the mere act of medical attention, as from its cost-effect relationship. But this belief has had the consequence of diminishing the inter-consult to the Internist, which often occurs late, when the diagnosis is difficult and elusive, or when the patient is extremely complex and has a grim prognosis.

And doubtlessly, a good part of these conducts have to do with the traditional formation of the internist. The model of the encyclopedic internist under which the greater part of us have been formed, is nowadays an exhausted model. It is necessary to form a modern internist, with a great problem-solving ability

without disregard to his/her academic formation, tightly linked to the health problems of the country, with an optimal development in the primary cares area -so neglected by most of our postgraduate courses-, with solid knowledge of the modern disciplines which are related to Internal Medicine, such as Clinical Epidemiology and Medicine Based on Evidences, efficiently trained in medical informatics and also armed with an additional skill which allows him or her to improve the resolving capabilities, such as ultrasound, in the abdominal and peripheral vascular areas in particular, which are natural in the daily exercise of a competent internist.

Additionally, the integral Venezuelan internist is to be trained in the proper manner from the point of view of clinical investigation, which is touched in many cases in a superficial manner and more as a requisite which must obligatorily be met, as it happens with the Special Investigation Dissertation of our university postgraduate courses.

But... how can we accomplish all these important tasks? The answer lies, without doubt, in a change of paradigm inside the academic formation of the internist, which must necessarily undergo a reform in its academic curriculum, the final objectives of which must be the **PRESERVATION** of Internal Medicine as the mother specialty of medical sciences on one hand, and the **CHARACTERIZATION** of the internist as a specialist, such that they can be better appreciated and in its fair dimension both by the patients and by the colleagues of other branches of medical knowledge.

For such reasons, from the Directive Board of the National Society of Internal Medicine, we have resolved that the Central Presentation of the next Venezuelan Congress of Internal Medicine, which will take place between the 24th and the 29th of May of 2005 in Porlamar, Nueva Esparta State, will be as follows:

**“Critical analysis of the curricular
design of Postgraduate courses in
Internal Medicine in Venezuela”**

In this way we hope that these ideas shall be debated properly, and they will generate defined proposals for changes in all of the postgraduate courses in the nation.

It seems clear that the fourth year is an unavoidable need, which will allow the incorporation of the formation of the integral Venezuelan internist in the diverse disciplines mentioned above, and perhaps we could also consider implementing the Master level, which would undoubtedly improve the academic ranking of our internists.

I shall leave these reflections here, hoping they can become a matter of fruitful discussion among colleagues, positively richening the upcoming debates, and that must be crystallized in the changes that our now necessary and even imperative for the preservation of our specialty.

Biographical sketches of the Internist: “In honor of Dr. Augusto León Cechini” Dr. Pedro Armas Nurse.

Dr. Augusto León Cechini was born in Aroa, Yaracuy State, on the 1st of September, 1921. He studied Medicine at the Universidad Central de Venezuela, where he graduated as a “Doctor in Medical Sciences”, in 1944, being awarded the honorable mention *Summa Cum Laude*. In Cornell University Medical School he did his postgraduate studies of Internal Medicine

(1948) and in Tropical Medicine in the School of Medicine of San Juan de Puerto Rico (1948).

He was the Head of Clinic in the Tropical Pathology cathedra of the University of Zulia (1949-1950), and later as a Titular Professor of Medical Clinic (1950-1954). In 1954 he was named Head of the Medic and Therapeutic Clinic and of the Service of Medicine III in the University Hospital of Caracas, Luis Razetti School, a position which he held until his retirement in 1979, having accomplished a brilliant teaching, assistance, administrative and research labor. A very interesting work as a Medical Manager in the petroleum industry must also be mentioned, where he organized and coordinated the medical activities in that institution, optimizing the services given. He was the Director of the Medical Department of Lagoven, and he was later the Coordinator for the Medical Department of Petróleos de Venezuela.

In 1965 he was promoted the Titular Professor, having presented as his promotion work the following: "Achillean Reflexogram and Thyroidal dysfunction".

He was a founder of the Postgraduate courses in Internal Medicine depending of the Universidad Central de Venezuela, together with Drs. Henrique Benaím Pinto and Otto Lima Gómez. In the University Hospital of Caracas, he exercised as Director of the Postgraduate course in Internal Medicine for several years (1959-1979), initially sharing this responsibility with Dr. Henrique Benaím Pinto until 1972.

In 1969 he was elected a Principal Member of the Council of the Faculty of Medicine.

His duty as the President of the Electoral Commission of the UCV during the period 1971-1972 must also be mentioned.

He is a Founder-Titular Member of the Venezuelan Society of Internal Medicine, having been elected President of it in 1960. He was also named an Individual of Number of the National Academy of Medicine, taking the seat N° IX, vacant after the death of Dr. Benaím Pinto, a close friend with whom he shared difficult times of the University life. Dr. León was a founder of the National Center for Bioethics.

His scientific production is represented by more than 146 publications, including textbooks and press articles that constitute a worthy, rich and interesting contribution to Medicine. A relevant place is granted to his numerous publications regarding various aspects of Medical Ethics, for which he is acknowledged as the most qualified person in this field in Venezuela. He was awarded the Luis Razetti award in recognition of his book "Ethics in Medicine", a relevant work of extraordinary significance. He is a co-editor of the valid Code for Medical Deontology, approved in the Assembly of the Medical Federation in 1985. For several decades he has dedicated very special efforts to the ethical aspects of the practice of medicine. Not smaller were his efforts to bring to approval the teaching of this subject in the Faculty of Medicine.

Dr. León is a purist of the Castellán language, an excellent writer, of clear and precise concepts, a humanist at the service of medicine, authorized ethicist, an upright internist.

News of the College:

- 1) The College will have its annual 2005 meeting in the city of San Francisco, from the 14th to the 16th of April, 2005, with Pre-Meeting courses from the

12th to the 13th of April. For news on the Scientific Program of this excellent Meeting, it can be done by accessing www.acponline.org.

- 2) A new Recruitment Program of new Members has been created, through the Members of the organization, and the characteristics of the benefits to the Members can be found in the page of the College.
- 3) The college has had for two years now a program of Minifellowships called "The ACP International Fellowship Exchange Program". The bases for taking part are available in our webpage to those interested: www.acpvenezuela.org.

News of the Chapter:

- 1) **Scientific Program:** For the following May 2005, during the 24th (Tuesday) the XII Annual Meeting of the Venezuela Chapter will take place, together with the Congress of the Venezuelan Society of Internal Medicine, in Porlamar Nueva Esparta State. With the program titled: "**New horizons in Internal Medicine**" and with foreign presenters invited, such as Dr. Dennis G. Maki (MACP) and Dr. David C. Dale (Regent FACP), who will be a Representative of the School. Next is a Summary of the Program:

Introduction. **Intra-hospital Medicine Module:** "Prophylaxis of Thromboembolic disease and actual recommendations in the indications of anticoagulants", "conduct before pain in intra-hospital patients. Stratification of treatment". "Protection of patients against infections acquired in the hospital". "Adverse reactions to drugs. Frequency and conduct".

Emergency in Internal Medicine Module: "News of the College". "Advances in the septic shock conduct". "Strategies and acute cardiac insufficiency conduct". "Acute Pancreatitis. New approaches to diagnosis and treatment". "How to recognize the allergic respiratory disease and the initiation of its prevention and treatment and what else?". "Can the Allergic Respiratory Syndrome be prevented or treated and what else?".

Hematology Module: "Neutropenia: causes, consequences and treatment". "Congenital and acquired Thrombophilia". "Differential diagnosis of Anemia for chronic disease and Myelodysplasia Syndrome". "Diagnostic conduct of the Trombocitopenias". **Psychiatry Module:** "Panic Syndrome. A diagnosis challenge". "Useful tests to the Internist for the diagnosis of Depression".

Roundtable: "How modern medical technology has influenced the doctor-patient relationship and the clinical history". **Magisterial Conference:** "The crisis in antibiotic resistance. Causes and solutions". **Conclusions and Awards.**

- 2) With great satisfaction we wish to inform that we have received a letter dated 12/20/2004 by Dr. Steve Goetter, Head of the Subcommittee of chapters of the ACP, where recognition was given to our chapter with the Excellence Award, for the year 2003-2004, thanks to its activities and development. Thanks to all of our members for their collaboration so this award could be possible.

"December 20, 2004.

Israel Montes de Oca, MD, FACP

CCS 5253 PO Box 025323. Miami, FL 33102-5323.

Dear Israel: It is with great pleasure that I inform you that the Venezuela Chapter has been selected to receive a 2004 Chapter Excellence Award. Your chapter has met specific criteria, determined by the chapters

subcommittee to be essential for managing a successful chapter. The award was based on activities that took place during the 2003/2004 fiscal year, as identified in your Governor's Annual Report.

At the Awards Luncheon in San Francisco, you will be acknowledged as the Governor of an award-winning chapter. Also, during your next chapter meeting the College Representative will take a few moments to recognize your chapter.

Again, congratulations for your leadership of the Venezuela Chapter.

Sincerely,

Steve Goetter, MD, FACP

Chair, Chapters Subcommittee

SG/JS

cc: Carlos A. Moros Ghersi, MD, FACP"

3) Activities of the Venezuela Chapter (ACP) Year: 2005

| MONTH | DATE | ACTIVITY |
|-----------------|-------|---|
| January | 12/26 | Meeting - Endocrinology (Event Organization) |
| | 14/21 | Meeting - Bioethics Committee |
| | 21 | 21 st Meeting - Residents of Los Magallanes Hospital (EMC) |
| | 24 | Meeting - Public Health Committee |
| | 27 | Meeting - Award Committee |
| | 28/29 | Workshop - Hyperlipidemia in Caracas (EMC) |
| February | 04 | Meeting - Voluntary Committee |
| | 05 | Meeting - Council of Associated |
| | 18 | 22 nd Meeting with residents of Hospital Domingo Luciani (EMC) |
| | 22 | Meeting - Medical Center of Caracas (Bioethics) (EMC) |
| | 23 | Meeting - Membership Committee. |
| March | 3/4/5 | Meeting - Endocrinology (Tamanaco Hotel) (EMC) |
| | 11/12 | Meeting - Obesity. Community |
| | 16 | Meeting - Consulting Council |
| | 18 | 7 th Meeting with Vargas Hospital Students (EMC) |
| April | ½ | Meeting - Chapter East. SVMl (EMC) |
| | 8 | 23 rd Meeting with Residents of Hospital Pérez Carreño (EMC) |
| | 9 | General Assembly: Governor's Report |
| | 10/17 | Annual Session ACP. San Francisco (EMC) |
| May | 24 | Annual Meeting of the Chapter ACP in Porlamar Awards. |

- 4) We inform the members of the chapter that due to the interest and expertise of Dr. Pedro Perdomo, a Webpage of the Chapter has been completed, and it can be accessed on: www.acpvenezuela.org.
- 5) We wish to inform that the Committee of Awards has conferred Drs. Pedro Perdomo Miteff and Armando Pérez Monteverde, both of them FACP, the awards "Laureate of the year" and "Voluntary service of the year", respectively, based on the academic merits of these colleagues; may our acknowledgement and congratulations reach them.

- 6) The committee of Awards has actualized the bases of the contests: Minifellowship version 2005, Award to the best research publication; the bases are stated next: 1) *Curriculum Vitae*. 2) Being a member of the ACP. 3) Having a maximum of 10 years since the completion of a Postgraduate course in Internal Medicine. 4) Having academic assistance, teaching or research activities in the country of origin, with commitment to return to that country. 5) Instrumental knowledge of the English Language if the candidate is heading towards Canada or the United States, and in the contrary, an Latin-American country with dependence of the ACP with affiliated members can be chosen. 6) Optionally, having already selected the place and tutor (mentor) in the institution where it is desired to take the training.
- 8) Dr Grace Giesen (member of ACP) has returned to our country from the city of Boston, where with the Tutoring of Dr John Noble she finished a Program of knowledge of Geriatrics according to the Minifellowship program of our chapter. Congratulations to Dr. Grace and let us wish that the elder patients receive the best benefits from her knowledge.

Contacting Us:

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Note: The opinions emitted by the collaborators in their articles contained in this number are not necessarily those of the Directors of the Chapter. The English version of these Newsletter that appears on the Website of the College is a courtesy of the Merck - Sharp & Dohme Laboratory. Any contribution or "Letter to the Editor" will be received by the Governor of the Chapter.