

Royal College of Physicians of Ireland

March 19–20, 2026

Dublin, Ireland

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I was honored to represent the American College of Physicians (ACP) at the Royal College of Physicians of Ireland's (RCPI) Annual General Internal Medicine Update on March 19–20, 2026, in Dublin. The reception I received was truly warm and welcoming, with an open and earnest desire to hear from their colleagues across the pond. The storied history of Ireland is felt in all aspects of the city, from the cobblestone roads to the mortar and bricks of the buildings. As I entered the beautiful building, home to the RCPI, I encountered portraits and statues of pioneers of medicine. I appreciated the long history of the RCPI and the physicians who have practiced for centuries in Ireland. From Laennec to Stokes and Graves, names that have become immortalized in our medical practice, the history is both awe inspiring and humbling.

My keynote address, "The Future of Internal Medicine," was well received, and not only did they want a copy for their archives, but they felt it was a call to arms and an inspirational message for physicians to lead the changes in medicine as opposed to reacting to them. The leadership was very appreciative of the gifts and acknowledgment of our collaboration all these years. My second presentation, "Challenges and Solutions in the Practice of General Internal Medicine," which highlighted "Better Is Possible: ACP's Vision for the U.S. Health Care System," was well received, as health care delivery in Ireland is challenging and in need of a primary care system.

What I found most fascinating to learn was that most of the care in Ireland is delivered by specialists who have to relearn general medicine, as they have to be the ones to provide it. The concept of primary care and internal medicine is essentially nonexistent, and there is a heavy focus on specialty care that also has to provide general medicine. This creates challenges as their annual gathering and update on internal medicine covers such basics as DKA, COPD, and heart disease. They were quite appreciative of the NASEM report that focuses on how primary care is a common good. It really shows how important the role of internal medicine is as the master diagnostician and physician responsible for continuity of care.

What is more striking is that the certification for physicians to practice medicine is issued by the RCPI, which does not have a board system as we know it, but the RCPI is the membership and certifying body. Their main challenge is how to provide general internal medicine and primary care to the people in a universal health care system. The care from the government has merit, but they have long delays in getting testing done, whereas the private systems allow for faster access.

I found it interesting that one of the highest causes of hospital admission was COPD and that the streets were littered with cigarettes. There is something to be said about reducing cigarette consumption and health care admissions for COPD, as Ireland is still seeing the effects of the tobacco industry. In addition, the economy plays a major factor in health care, and although the cost of medications is low, access may be an issue. Ireland is also facing the cost burden of GLP-1 analogues for obesity, but the average monthly cost is €100 compared with the \$1,000 we pay here in the United States.

Finally, there was a lot of interest in ACP membership, and the value of our organization was clearly acknowledged and appreciated by our Irish colleagues.

As always, I am humbled by the opportunity to serve the College and represent internal medicine in other countries. It was an amazing experience and one that I will remember for years to come.



