



EAP Adolescent Health and Medicine Working Group meeting - minutes

Brussels, December 2, 2016

1. Welcome - *Artur Mazur*.
2. Introduction of Working Group Members.
3. Name of the Working Group - *Artur Mazur*.
 - Changing the name of the Working Group from Adolescent Medicine to Adolescent Health and Medicine EAP Working Group.
 - Voting - agreement.
4. Tasks for the Working Group - *Artur Mazur*.
 - Incorporating adolescent medicine in paediatric students' and postgraduate training.
 - Preparing consensus statement on adolescents' transition.
 - State of adolescent healthcare and adolescent medicine training in EU countries.
 - Working Group website.
5. Cooperation with EuTEACH - *Pierre-André Michaud*.
 - European Training in Effective Adolescent Care and Health – EuTEACH.
 - www.euteach.com
 - A curriculum developed by a group of European professionals.
 - Objectives: set quality standards for medical education; enable European health professionals to: adequately address and manage adolescent health needs, integrate health education and prevention in clinical care, collaborate with families, schools and communities, assume responsibility in advocacy; initiate and support the development of adolescent health multidisciplinary networks; support set-up international/national/regional courses.
 - Workshops 1-2 times/year - interactivity, multiprofessional approach, holistic view, clinical care and school/public health; an international audience; communication skills training.
 - Teaching with adolescent simulated patients.
 - Cooperation: raising awareness of EuTEACH among EAP members and EU paediatricians; including its workshops in EAPs meetings.
6. Adolescent medicine and health training objectives for residents in paediatrics - *Pierre-André Michaud*.

Goals:

 - define adolescence as a unique developmental period of huge biological, psychosocial and social changes and understand that these changes bring both specific vulnerabilities and a window of opportunity for interventions;
 - describe pubertal stages and the issue of variation in the timing of growth process and pubertal events;
 - establish with the adolescent a trustful, empathetic and respectful attitude, securing confidentiality and taking into account available ethical guidelines. Involve parents or caregivers as far as possible;
 - elicit a relevant, concise and accurate history from the adolescent and other sources (parents, caregivers), taking into account his stage of psychosocial development and exploration of both resources and risk (exploratory) behaviours;

- conduct an effective general or focused physical examination, including an assessment of growth and pubertal stages;
 - address the most current physical and psychosocial health problems that adolescents present with;
 - tackle the generic concerns raised by the presence of a chronic condition during adolescent and how it interferes with the patient's bio psychosocial development;
 - display an interest or an experience in the field of school and community health.
7. Adolescents' transition to adult healthcare - presentation of EAP position paper draft - *Lukasz Dembiński*
- Special attention should be paid to nearly 11% of adolescents, who suffer from chronic conditions and disabilities. Nowadays most of them reach adulthood and live a long life, needing further medical care. For those people transition from paediatric to adult healthcare is additionally associated with a sense of loss, fear of unknown and increased risk of treatment discontinuation. Unfortunately, healthcare systems are often not prepared to address adolescents' transition. This can result in falling into a transition gap, where teenagers with specific needs lose medical and psychological support. Therefore, the EAP issued a consensus statement.
 - Key issues: awareness, information, timing, model, consent and confidentiality, psychology, pre-conception counselling, documentation, guidelines, financing, follow-up.
 - The adolescents' transition from child to adult-oriented healthcare systems is more complicated than a simple transfer of the medical records from one institution to another.
 - The draft will be send to Working Group Members and, after receiving feedback, the final version will be prepared.

Present:	
Christine Aebi-Ochsner	Switzerland
Peter Altorjai	Hungary
Radovan Bogdanovic	Serbia
Angel Carrasco	Spain
Lukasz Dembinski	Poland
Karin Geitmann	Germany
Adamos Hadjipanayis	Cyprus
Karoly Illy	Netherlands
Gabriela Kubatova	Czech Republic
Artur Mazur	Poland
Pierre-André Michaud	Switzerland
Aida Mujkic	Croatia
Chris Pruunslid	Estonia
Jelica Pudyenc Sertiic	Bosnia and Herzegovina
Sergey Szagsyan	Armenia
Lenneke Schrier	Netherlands

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