



European Respiratory  
Society

# The European Research Area: New Perspectives COM(2007)161

## **ERS response to the Public Consultation on the European Research Area (ERA)**

**30 August 2007**

### **Introduction**

With members in over 100 countries, the [European Respiratory Society \(ERS\)](#) mission is to alleviate suffering from respiratory disease and to promote lung health through research, knowledge sharing, medical and public education and advocacy. Founded in 1990, the ERS is a not-for-profit, international organisation with nearly 9,000 members. It is the pre-eminent society in Europe in its field and represents the main forum for exchange and continuing education for doctors and scientists engaged in basic, translational and applied lung science in Europe and beyond. It also provides promotes exchange and advocacy through its affiliated European Lung Foundation and its promotion of European professional and patient organisations through the Federation of European Respiratory Societies. The ERS is composed of [11 scientific assemblies](#) which serve as a forum for the exchange of knowledge amongst the Society's members and influence the scientific direction of the ERS.

The main activities of the ERS take place in the following fields:

- Congresses and Meetings: Exchange of Knowledge
- ERS Publications: Promoting and disseminating research
- The ERS School: Promoting education
- Scientific Assemblies: Encouraging knowledge exchange
- ERS Brussels: Advocacy

The ERS fulfils its mission by supporting and promoting science by encouraging knowledge exchange and dissemination through a range of activities such as organising congresses, research seminars, fostering education through postgraduate courses and educational workshops, as well as with its scientific publications such as the peer-reviewed European Respiratory Journal.

The ERS also makes scientific information and other essential developments in the field accessible to the wider public via the European Lung Foundation, ELF, [www.european-lung-foundation.org](http://www.european-lung-foundation.org), the "public voice" of the ERS. The objective of ELF is to serve the European community by sharing scientific expertise in respiratory medicine with the public and to raise awareness of policy makers.

### **Executive Summary**

The ERS welcomes the Green Paper on the European Research Area (ERA), which states that "besides the pursuit of scientific excellence, European research should support knowledge advancement and dissemination and underpin policies for sustainable development in the fields of major public concern such as health, energy and climate change".

The ERS welcomes the opportunity to respond to this consultation as any concerted actions in the promotion of research in Europe would have a significant impact on its members spanning as it does the whole range of health care professionals and scientists engaged in promoting lung health and lung science.

The ERS supports the proposed elements as outlined and the considerable efforts that have been made to reach the overarching objective of an “internal market for research, where researchers, technology and knowledge freely circulate”.

The ERS would like to contribute with the following additional points:

- Future EU activities in support for the ERA need to recognise the important link between specialised medical education and training and a strong research base. At least in the field of biomedical research and respiratory medicine, a strategic investment at European level is needed to raise the standard of specialist education and training to a minimum quality level across all EU-27. The ERA will only become a reality provided it is equally accessible for all scientists in EU-27.
- To increase the effectiveness of research, also for the specific programme on Collaborative research of the EU Research Framework Programmes, the European Commission should try to work towards somewhat broader call topics as this would stimulate a greater competition of ideas and promote excellence in scientific quality.
- The ERS supports the new pilot action in FP7 “People” Programme; COFUND which aims at widely promoting researcher mobility.
- EU research programmes and priorities should recognise the important role, especially in the biomedical field, that can be played by professional medical and scientific societies. These are key players and would represent the ideal platform in the process of defining critical research needs. Such scientific societies represent a membership predominantly from Europe but also internationally, are not-for-profit and are independent of commercial and political interests.
- EU research programmes and priorities should to a greater extent embrace the growing major threat presented by non-communicable, chronic diseases, and the urgent need for Community coordinated action in the area.

## Elements of the European Research Area vision

There are other areas, which would require attention for the development of an ERA.

To ensure a functioning ERA, equally accessible for all, the ERS emphasises the importance of integrating research training with specialist medical education and training. This concept is particularly applicable to the biomedical field and respiratory medicine, where high quality specialist education and training in Europe is essential in improving its research potential and competing internationally.

Since, “Health is a major public concern and thus a focus for European research”, a prerequisite for realising the ERA vision would also be to raise the quality and standard of specialist, formal as well as *Continued Medical Education (CME)* throughout the EU, especially in the newly joined EU-12. Future initiatives to realise the ERA should be more strongly linked to on-going initiatives of the European Commission such as the Lifelong Learning Programme. ***The ERS would urge this area to be clearly addressed and***

***acknowledged as one of the elements needed to make the ERA a reality and equally accessible for all.***

The ERS School is currently leading an initiative, HERMES<sup>1</sup>, Harmonised Education in Respiratory Medicine for European Specialists which responds to the need for common standards in medical education and training across Europe in the field of respiratory medicine. Specialist training in this field varies greatly within Europe and without first raising the general standard and quality of specialist training in all EU-27, Europe will not be able to attract greater participation, nor significantly increase the level of excellence of research conducted in the EU-12.

The overarching goal of HERMES is also to secure that patients can be confident of receiving high-quality treatment no matter where they are, but also to allow for greater flexibility for respiratory practitioners in their career paths.

A major milestone of HERMES has been the definition of a European Core Syllabus in Respiratory Medicine in 2006. An important next phase of the project will be to develop a “core curriculum” in respiratory medicine, which aims to set the minimum learning objectives and how training at university hospitals ideally should be conducted.

*HERMES* has received wide support from several national respiratory societies of the new EU-12 – many of these countries and in particular small countries struggle with a lack of resources and/or experience on developing a specialist curriculum at national level. An anticipated positive effect of *HERMES* is that it will raise the general standard and quality of specialist medical education and training throughout the EU-27 by creating pan-European educational structures for specialists in respiratory medicine. The ultimate goal is to launch a voluntary Exit Exam in 2009 for the award of a European Diploma in Respiratory Medicine. ***The ERS is seeking for ways to have this harmonising project officially acknowledged or endorsed by the EU.***

## **Realising a single labour market for researchers**

To further the Society’s aim of advancing and promoting clinical and basic research in respiratory medicine and clinical pulmonary practice a considerable amount of the ERS annual budget is spent on supporting experienced researchers.

The ERS manages a fellowship scheme which supports young physicians and respiratory investigators in the development, acquisition and application of advanced research procedures that may not be available in their own institution and that require a period in a well established centre in another European country. The ERS also has introduced, in a limited scale, an International Research Fellowship designed for Europe-based scientists to work outside Europe, provided that the objectives of the research project are not currently available or attainable in Europe.

***Although the ERS would welcome and encourage measures at European level that would ensure greater security for researchers in terms of social security rights and employment security, any legislative action would have to be very carefully framed in order to avoid unintended negative consequences and displacement of researchers to regions with less regulated employment conditions but with excellent research facilities.***

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<sup>1</sup> For more info, see the HERMES website at: <http://www.fersnet.org/hermes/home.htm>

The ERS would be in favour of a European framework that would ensure the portability of social security provisions for researchers across Europe. As a not-for-profit international medical organisation, the overarching aim of the ERS fellowship scheme is to support a maximum number of excellent fellows to perform high-quality research.

However the ERS is not an employer as it does not recruit its fellows, nor does it fund research institutions directly. The ERS acts only in its capacity of coordinating and awarding a grant to competitively selected fellows. The grant is directly transferred to the fellow. The ERS does however explicitly encourage the return of the fellow to the home institution, since the aim of the scheme is to equip young researchers with skills which can be applied in their home institutions. Normally, the fellow will return to the home institution, and so minimal social security benefits are usually maintained.

To ensure a high standard of submitted applications, the ERS employs strict rules for the management of the fellowships as well as the selection procedure.

***The ERS in addition believes that the novel pilot action introduced in the FP7 “People” – the Marie Curie co-funding of regional, national, and international programmes represents a very promising and commendable effort that aims to support the mobility of researchers, both quantitatively and qualitatively e.g. by increasing the length of stay of the fellows in another country, by increasing the number of supported promising research talents, and/or by broadening and deepening their skills.***

## **Sharing knowledge**

The ERS main aim is to support and promote research in respiratory medicine through its four core activities to spread knowledge and disseminate information: Annual Congress, Education, Research and Advocacy. The ERS also supports science through knowledge exchange and dissemination via its publications, notably the European Respiratory Journal (ERJ), which is one of the most highly regarded, peer reviewed, respiratory journal in Europe.

In principle the ERS supports the open access model of ERJ, but for publishers to recuperate costs, open access should be granted only after 12 months.

In the field of clinical research, there has up until now been no or, at best, fragmented cooperation at European level between public and private research organisations carrying out basic research (including bringing together funds, scientific knowledge and centres of excellence). This research gap will hopefully be filled with the adoption of a regulation to establish a public private partnership – the Joint Technology Initiative on Innovative Medicines.

A major strength of the ERS is its transparent partnership with industry thereby ensuring its independence of action in deciding the scientific programme of the Congress and in all its other scientific activities.

The ERS does however cooperate with industry in various other ways, e.g. through industry-sponsored educational awards or grants, which are increasing in popularity, and also by inviting industry to present more scientifically relevant clinical trial results at the ERS Annual Congress.

## Optimising research programmes and priorities

Especially in the life sciences and the biomedical field professional, European/ international scientific societies should be considered as key stakeholders in defining research needs in their corresponding specialties. They are the competent, not-for-profit pan-European organisations with the mission of promoting science and research. Thus they are able to provide a platform to define the research needs in the corresponding fields relevant to human health. Such bodies also operate at a global level and remain independent of commercial and political interests.

The European Commission and, the European Federation of Pharmaceutical Industries and Associations, EFPIA, are spearheading the **Innovative Medicines Initiative** (IMI) – a totally new initiative with no precedent in Europe. As a professional scientific body we believe that IMI could provide the vehicle to collaborate cross-sectorially with the aim to bring improvements for citizens. A severe fragmentation characterises the research environment in Europe, and there is a need of working towards more uniform and systematic approaches, since the biomedical sciences have become considerably more complex (multifactorial and multigenetic). Furthermore, considering that professional European and international medical scientific societies represent key stakeholders in the framework of this initiative, we strongly suggest that they should be included in the consultative process that will underpin the implementation of IMI.

Independent professional scientific bodies such as the ERS could act as facilitators and be ideal candidates to provide the scientific platform for the continuous process of identifying and defining the strategic Research & Development needs in translational medicine for their respective areas of expertise.

***The ERS believes that stronger Community action is needed in the area of non-communicable, chronic diseases, including those of the respiratory system, which are major global health threats. To overcome fragmentation, there is a need for significant investments in identifying disease mechanisms, in developing novel therapeutic strategies and interventions to prevent the expression of disease.***

Finally, the ERS is not solely concerned with medically qualified practitioners engaged in research, but also with the advancement and support of researchers involved in all aspects of lung and respiratory science. This ranges from basic through translational to applied research and to important issues embracing environmental science.

## Opening to the world: international cooperation in S&T

International cooperation in S&T is indeed vital for many areas. Internationally the ERS cooperates with its sister organisations and other key stakeholders in a recently launched process aimed at reviewing methodologies relevant to research and clinical practice. The priority disease area currently under review is Chronic Obstructive Pulmonary Disease, COPD. This initiative will have major implications for future guideline development aiming at an integrated "whole-patient" rather than organ-centred management approach is required. ***It is our view that the EU e.g. DG Research and DG Sanco should participate in this process.***

Moreover, the ERS has succeeded over the last decade to expand its membership considerably by meeting the growing demands of our world-wide membership. The ERS now has the largest respiratory congress in the world. The scientific leadership and reputation of the Society has also been improving continuously over the past decade, which in turn has attracted more individuals to become members of the ERS.