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# BREXIT means BREXIT: Radiologists without borders

An in depth interview with UEMS Secretary General Prof. Vassilios Papalois

Prof. Papalois talks to Healthmanagement.org about BREXIT and the potential repercussions the break from the EU may bring to patients and medical professionals



**Vassilios Papalois**

Secretary General,  
The European Union of  
Medical Specialists (UEMS)  
Brussels, Belgium

Head of Specialty for  
Transplantation surgery,  
Consultant Transplant  
& General Surgeon,  
Imperial College  
Healthcare NHS Trust  
London, United Kingdom

vassilios.papalois@nhs.net

@UEMSEurope  
@ImperialNHS

uems.eu

**S**ecretary General of The European Union of Medical Specialists (UEMS) Prof. Vassilios Papalois, talks to Healthmanagement.org about his powerful ECR 2019 presentation: “BREXIT means BREXIT: Radiologists without borders.” We also discuss the potential repercussions the break from the EU may bring to patients and medical professionals as well as the consequences to the development and implementation of personalised medicine and population health in the UK.

**HM: You presented "BREXIT means BREXIT: Radiologists without borders" a comprehensively supported case on the serious repercussions in radiology and why withdrawal from the EU is a "huge mistake." What does BREXIT mean for radiology and radiologists?**

**VP:** BREXIT is essentially a political decision of the United Kingdom to leave the European Union- the EU has been a major political agreement and a major peace project connecting EU states over the last 70 years or so. This will affect, radiologists and all healthcare professionals, if, in the case of a ‘hard’ BREXIT, there will be a stop of free movement of healthcare professionals. This will consequently lead to a stop in the exchange of resources, of people, of expertise, of experience. Eventually progress in the field of all specialities will suffer greatly. Of course radiology will severely be impacted, as it is one of the most rapidly developing specialities technologically- including all of its sub-competencies across Europe and beyond.

**HM: Having experienced EU’s influence in fostering collaboration in radiology & health, how will physicians & management leaders face "the day after" outside the Union?**

**VP:** The global political environment, not only in the United Kingdom, in Europe and across the world is very fluid and very challenging to say the least. At the moment, especially as it relates to BREXIT nobody knows what “the day after” is going to look like. First of all with the new extension to October we still do not know if it will ever come. This lack of clarity is the biggest challenge we face as no one can prepare for a new structure that, in reality, has not been planned in any way. People are guessing but they have no idea what it is going to be.

“ MY FIRST  
CONCERN IS ABOUT  
THE PATIENTS ”

It is a major challenge and brings paralysis to certain elements of our planning for the future, which is anything but desirable. This is where we stand. The only way I see medical professionals may work around this potential exit from the EU is to be able to approach healthcare- that is the provision of healthcare both in the clinical and academic arena, beyond the political problems. I think it is our duty as doctors to be able to see how we can ensure continued collaboration in the present, in the future,

well beyond the current challenges and politics. We cannot solve the politics, they influence us but we cannot convince national leaders or solve EU issues arising between member states. What we can do within our power and is in our hands is to vigilantly build as many collaborations as possible, assure all the channels of communication remain open to help share our aspirations for the future and plan to face them together.

**HM: What do you consider to be the most dangerous and detrimental consequences in the aftermath of BREXIT for radiology & professionals affected?**

**VP:** My first concern is about the patients. We must not forget there are many people from continental Europe living in the United Kingdom. There are many people from the United Kingdom living in continental Europe. These people have well-established lives, either in the UK or in Europe spanning many, many years. As they are human, they will eventually face health problems- at the moment we have no clarity as to how these people are going to be treated.

When you are a doctor, politics is one element of it- but your main care is about the patient. In this situation, we have no clarity whatsoever of what type of care we will be able to offer our patients and this is a major, major issue and my biggest concern. Parallel to this, fall the issues affecting health professionals, because you have many professionals who have moved on both sides of the English Channel, either to the UK or in continental Europe. Again, they have very well established professional and personal lives and they don't know what will become of the status of their employment, and career progression, or the status of their family in the years ahead of us. This lack of clarity is crucial for the practice of those people, not only for radiology but all medical specialities. I will stress again, mainly for specialities like radiology that have a galloping development in all aspects of the field.

**HM: As Secretary General of The European Union of Medical Specialists how do you predict BREXIT will alter UEMS mandates & what actions can the UEMS take to help prevent/alleviate negative repercussions?**

**VP:** The way healthcare is provided in the 21st century, especially in Europe, has a holistic and universal character. It's beyond countries, beyond borders, and it is beyond specific hospitals and

universities. Healthcare is totally universal. We are inter-dependent, we rely on each other and this is a blessing. We learn from each other, support each other and collectively we can progress. Trying to fragment this to build up walls and borders and cut out pieces of it will only prove terrible for patients and doctors alike.

The first thing that was made very clear, not only in the UEMS but in all the other European Medical Organisations is that the British Medical Association will remain as a full member just as it has been for decades, ensuring nothing will change in this respect. Our British colleagues will continue to enjoy full membership, full access and full participation in all European Medical Organisations in which they've had a very, very, very productive presence for decades. This is absolutely paramount and all European organisations have worked very hard to secure it.

“ IN THE CASE OF A ‘HARD’ BREXIT, THERE WILL BE A STOP OF FREE MOVEMENT OF HEALTHCARE PROFESSIONALS ”

When it comes to how it may change and how we are working around these changes, the answer is we tried not to change anything at all. We tried to work in the same collaborative way and ensure whatever initiatives we produce such as: European training requirements, our processes of accreditation of doctors, centres and educational events, our collaborative projects between different countries and different institutions, all this stays exactly the same and, if anything, will be enhanced in any way we can. Our reaction to this very fluent and challenging political climate is to continue with 'business as usual' and additionally enhance the collaboration of health professionals across Europe. This is our answer to the complicated issues that may arise.

**HM: Precision health and population health: how can they intersect effectively after BREXIT?**

**VP:** BREXIT is one of the elements that could potentially cause fragmentation in the provision of healthcare. It is not the only factor; there are many factors actually. We plan to ensure healthcare continues

to be provided in a holistic and universal way, in a harmonised way across Europe and this is the way we doctors see it. There are many challenges out there, not only BREXIT, there are the financial challenges that come into play in many European countries, specific social needs and specific political interventions which can all cause fragmentation to the way we treat our patients. We try to go over this and say that for us healthcare is one thing, it should be harmonised and it should be of the highest possible standards in terms of the way we train and support our doctors and the way we treat our patients.

“RADIOLOGY WILL SEVERELY BE IMPACTED, AS IT IS ONE OF THE MOST RAPIDLY DEVELOPING SPECIALITIES TECHNOLOGICALLY”

**HM: Having over two decades of surgical experience, numerous awards & achievements, what in your opinion are the most promising developments in precision medicine and personalised care in the fields of radiology, interventional radiology and imaging?**

**VP:** The main theme of all the projects that the UEMS has developed over the last 60 years, especially in collaboration with major European Scientific Societies, like the European Society of Radiology, which is one of the biggest societies in Europe and in the world, is to create quality assurance projects for everything that we do. The European training requirements that set the standards of training and European requirements we have for accreditation of educational events are derived from the projects of collaboration of doctors across Europe. These quality assurance projects safeguard the quality of practice of physicians across Europe and allow them to go to the next level. When you have quality assurance, when you have people practicing with high standards, you can deliver holistic care, you can deliver precision medicine, you can deliver all the innovations that are needed and are expected by patients in the 21st century.

**HM: You've talked about "Invasion of Technology and Digitisation of Healthcare," what**

**do you consider the benefits of these in integrating precision medicine & personalised care in radiology?**

**VP:** Overall in medicine, and specifically in specialties like radiology, which are very heavily involved with technology, the patient is at the centre of healthcare now. Patients have enormous power in selecting among different modalities of care and a very strong say in which one is most suitable for them. The focus on outcome not only correlates to medical outcome but also to the quality-of-life outcome for patients, for the ultimate receivers and end users of healthcare. This has changed completely, dramatically, the way we were used to practice. Healthcare was very much doctor-oriented, paternalistic, with very limited involvement on the side of the patient. I believe the big revolution is patients are now at the centre of healthcare with enormous power in their hands, with enormous say in the decision making process, with very clear demands, not only for an excellent medical outcome but for the overall quality of their lives.

It allows the patient to be part of the care continuum. For example, the way it works nowadays in most modern departments, after the clinic appointment the patients don't wait for another appointment or a phone call, they can access their data directly. They access their outcomes quickly by checking electronic links that they have with the hospital, which have changed the whole picture dramatically. They can even communicate any kind of upcoming symptoms, and changes in their status sent to the clinical team and they can get responses. Technology has empowered patients to take a much more active role in the process of provision of healthcare, irrefutably.

The advances of technology to the level we are witnessing today have brought the radiologist and patient much closer. Precisely because this requires a very close 'partnership' between the healthcare professional, the available technology, all the potential of these technologies, and the receiver of this care which is the patient.

**HM: What is your advice to radiology colleagues & leadership on dealing with BREXIT?**

**VP:** We must ensure in any way we can, with the support of all our colleagues, the support of our patients and the support of other organisations, to keep the channels for provision of healthcare open across borders. This means the free movement of

healthcare professionals, patients (which is absolutely crucial), movement of experience, expertise, ideas, information and networking which is imperative for us to progress. This should be our focus. Not to build borders that will lead to fragmented healthcare, which is catastrophic.

**HM: In the event of BREXIT what are the key asks you, and by extension radiologists, have in order to ensure continued quality of care, training, and patient outcomes?**

**VP:** What I can say which we are advising through the British Medical Association (BMA) which is our voice, as doctors in the United Kingdom- is “keep the channels open.” We will continue to say it because if we don’t every channel we close down effects the quality of healthcare we have to offer our patients. It harms professionals and it harms patients. This we know is going to happen if we are not extremely, extremely careful. I hope it will not happen, we continue to vigilantly advocate and hopefully common sense will prevail.

“IT’S OUR DUTY AS DOCTORS TO ENSURE CONTINUED COLLABORATION IN THE PRESENT, FUTURE, WELL BEYOND CURRENT CHALLENGES & POLITICS”

The collaboration between the UEMS and the European Society of Radiology serves as a model that we project across Europe. We have lasting collaborations with all major European Scientific Societies and the ESR is one of the biggest examples of how collaboration between the professional organisations and scientific societies benefits doctors and patients. It’s a model we build on and a model we project across Europe and beyond. It is impressive to see how all the quality assurance projects we have developed in Europe over the years are rapidly gaining popularity beyond Europe. This proves the value, quality and the power of European collaboration.

**HM: Concluding, what would be your advice to UK decision makers to convince them to decline**

**to withdraw from the EU?**

**VP:** My advice would be to keep our focus on the two big elements, which are: the patients and the healthcare professionals who serve the patients; this in combination with the absolutely crucial need to keep the walls down and the channels of healthcare collaboration wide open. This is the ball and we need to keep our eyes on it. To the credit of the European Society of Radiology – and we are very proud of the collaboration that we have between the UEMS and the ESR – the focus on this task in Radiology across Europe becomes stronger and stronger producing one project after another that advances the quality provision of healthcare. I think this is what helps us overcome the fluid and challenging political environment. ■

#### Conflicts of Interest

None.

#### KEY POINTS



- ✓ 21st century is totally universal, has a holistic and universal character beyond countries, borders, and it is beyond specific hospitals and universities especially in Europe.
- ✓ A 'hard' BREXIT will stop free movement of healthcare professionals and will be detrimental for patients and doctors alike.
- ✓ Radiology will be severely impacted, the most rapidly developing specialities technologically across Europe and beyond.
- ✓ Our British colleagues will have full membership, full access and full participation in the UEMS and all European Medical Organisations in which they’ve had a very productive presence for decades.
- ✓ We will continue with ‘business as usual’ and enhance the collaboration of health professionals across Europe.