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Promoting International Emergency Medicine through *WestJEM*

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This issue of the *Western Journal of Emergency Medicine* (*WestJEM*) is devoted to the dissemination of international research and education in emergency medicine (EM). As the specialty gains recognition across the globe, the sharing of ideas from East to West, North to South becomes not only more feasible, but more important. One of the reasons for the name, “*Western Journal of Emergency Medicine*” was to provide an English language outlet to the Western hemisphere for Eastern hemisphere research. Over the past three years, we have increasingly received submissions from international authors. To recognize this expanded scope, we have chosen to cluster our international papers into a single issue.

Figure 1 shows the number of nations where EM has become a recognized medical specialty from 1970 to 2008. Similarly, in Europe EM is growing rapidly. The European Society of EM (EuSEM) held its 10th annual meeting and currently includes 25 European national societies of EM, representing more than 20,000 emergency physicians. Figure 2 shows the status of specialty recognition for the European continent.

The objectives of EuSEM are to ensure the highest quality emergency care for patients, delivered by physicians trained in EM. Furthermore, EM should be developed as a primary medical specialty in all European countries and foster the organization of comparable training programs across Europe.¹

On the educational front, the Task Force for European Training Curriculum in EM was established in 2007 to include delegates from 17 national societies, and was chaired by Dr. Roberta Petrino, director of the ED in Vercelli, Italy.² The curriculum was approved by the UEMS in October 2009, and now forms the basis for EM education across Europe.

The European Masters in Disaster Medicine is another substantial marker of EM’s reach across the world. Figure 3 shows where students for this two-year master degree have come from within Europe, and Figure 4 shows their distribution across the globe.

Among the potential leadership roles identified for

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*Figure 1. Number of nations where EM has become a recognized medical specialty (provided by courtesy of Dr. Philip Anderson).*

*Figure 2. Status of recognition of the specialty of EM across the European continent.*
international EM organizations, Arnold and Della Corte included the following initiatives:

1. Identification and promotion of clinical policies and practices that benefit emergency patients.
2. Fulfillment of moral imperative to advocate for and promote global equity in emergency care systems, particularly those serving world’s most vulnerable populations, including its poorest countries and communities.
3. Development of international ethical and clinical norms and standards in EM.
4. Organization of conferences, symposia, teaching programs.
5. Use of open website.
6. Encouraging submission of publication in peer-reviewed journals.

WestJEM contributes to several of these, through dissemination of curricula for international EM (see Koenig, Bey, Schultz in this issue), practice guidelines, the journal’s open-access electronic format, which is freely available to the world’s poorest areas, and, of course, through the publication of worldwide research.

The five biannual Mediterranean EM Congresses are another marker of the specialty’s growth around the world. Figure 5 shows the number of delegates and the countries represented, while Figure 6 (available under “Supporting Material” of the article at http://escholarship.org/uc/uciem_westjem) shows similar growth in abstracts presented.

Truly EM has become a global specialty, but much work remains. We at WestJEM seek to foster free dissemination of ideas, research, educational advances and intellectual discourse. Thank you for your support of this vital initiative.

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REFERENCES