

EDITORIAL

Coming of Age of European Vascular Surgeons in Training: Celebrating 25 Years

During the spring of 1993 Professor William Paaske approached vascular specialist trainees in Denmark through Jes Sandermann with the idea of gathering all European trainees into an association. The thought was further explored during the 1993 European Society for Vascular Surgery (ESVS) meeting in Barcelona. A newsletter was circulated to European trainees in vascular surgery. Trainees were called to meet and share information on their training. During the ESVS Meeting in Berlin on 5 September 1994, the European Association of Vascular Surgeons in Training (EAVST) was created and an executive committee (exco) was elected: Alun H Davies, UK, Jan Gniadek, Poland, Jes Sandermann, Denmark, Domenico Valenti, Italy, and Albert Verhulst, Belgium. EAVST officially chaired the scientific session “Young Vascular Surgeons Forum.”¹ By the end of 1995, the EAVST exco had expanded with the addition of Luis Mendes Pedro (Portugal) and Anders Albäck (Finland). There were contact persons from 23 countries. EAVST was represented as an observer in the Division and Board of Vascular Surgery under Union Européenne des Medecins Specialistes (UEMS) and in the ESVS Council as well as in the committee preparing the first European Board Examination in 1996 in Venice.

The primary aim of the EAVST was to collect information on vascular surgical training and to create a forum where exchange of views between different countries could take place. Furthermore, EAVST established a registry (EuRegVasc) of vascular specialist training centres to facilitate exchange of experience and visits to other units. EuRegVasc maintenance was a challenge but proved to be an excellent resource. From the very beginning an EAVST Newsletter was circulated – edited initially by Danish officers, then later by Portuguese officers.

In 2006, EAVST was united with the ESVS Junior Members Section, entering a transition period before completely merging into EVST (European Vascular Surgeons in Training). The transition period was important to allow incorporation of different policies, functions, and statutes. It was a mutually beneficial marriage; as EAVST had excellent networking and connection with major vascular meetings while ESVS had a strong infrastructure and resources.

At that time EAVST was counting 1800 members (non-paying) and ESVS roughly 300 junior members (paying – access to the *European Journal of Vascular and*

Endovascular Surgery (EJVES) included in membership). All EAVST members were offered junior membership of the ESVS, and it was agreed that the surgeons in training (EVST) would have their own board and a seat on the ESVS Council, in the Education and Training Committee and in the European Board of Vascular Surgery.

EVST had established collaboration with several European meetings that were offering free registration and/or a travel grant: European Vascular Course (EVC), Charing Cross Symposium, European Venous Forum, Controversies and Updates in Vascular Surgery, and Multidisciplinary European Endovascular Therapy. EVST used the ESVS supporting foundation (administration, funding, advertising, newsletters etcetera) and gradually gained influence, steadily increasing its membership from 390 paying members in 2008 to 689 in 2012. More vascular meetings started granting free access to EVST, but, more importantly, EVST members gained their own podium presence, organizing scientific sessions and social activities in the ESVS annual meeting and in the Charing Cross symposium. EVST maintained an active role in facilitating training initiatives and workshops as part of the ESVS Education and Training Committee. A major project fulfilled during that time was the detailed collection of European training profiles and certification models.²

Presently, EVST is a vibrant organisation with 21 council members representing 680 trainees. There are trainee members from 46 countries in Europe, Africa, Asia, North and South America. The EVST council is the heart of EVST and the decision making body. The council is presided over by the secretary, who is elected by all EVST members. Every European country with at least 10 EVST members can elect a representative in the council. The councillors have close contact with the trainees in their countries, forwarding the ideas and thoughts of trainees to the council and vice versa. Councillors also connect to the National Societies regarding training and other related issues. In 2016, the EVST secretary obtained the privilege of voting within the ESVS exco and council, forwarding the trainees’ voice into the heart of ESVS. ESVS and EVST have come closer, now working on training and the future of vascular surgery together. Where EAVST started off with one scientific session, EVST is now actively participating in the organising and programme committee of the annual ESVS meeting. Trainees are co-chairing main scientific sessions and continue to organise educational and specific training sessions and symposia.

Since the formation of the ESVS Academy, trainees from EVST have helped it grow. Trainees assisted in the

development and organisation of workshops but also as (co) conveners of one of the many workshops of the ESVS academy. Thanks to the hard work of the many enthusiasts, the ESVS Academy has become a fantastic training and learning platform during, but also outside, the ESVS annual meeting.³ EVST members receive the *EJVES* and furthermore benefit from priority seats and reduced prices for ESVS workshops, reduced fees for the ESVS annual meeting, and free or reduced access to many congresses and symposia. Active in 2019 every ESVS guideline document will include a trainee in vascular surgery as part of the writing committee. This and other publications in *EJVES*, which is specifically aimed at European vascular surgeons and trainees, offers trainees a broad impact of their scientific work.⁴ Furthermore, trainees are challenged to review for the *EJVES*; first as an additional reviewer of submitted manuscripts, later as a full *EJVES* reviewer. Specific workshops are organised by the Academy on performing research, presenting work, writing a manuscript, and performing a peer review. Currently, ESVS, *EJVES*, and EVST are working on an online platform improving rapid distribution of science and knowledge.

Increasingly, national vascular surgical societies recognise the value of being an EVST member. Switzerland, Luxembourg, Lebanon, and The Netherlands have a national membership for ESVS and EVST. Sweden, Denmark, Austria, and Norway have group membership for all trainees in vascular surgery. These four countries consider EVST membership to be so important that they will cover membership fees.

Beyond all that has been achieved there remains much to wish for. Vascular surgical training programmes still vary widely between, and sometimes even within, countries. This includes exposure to numbers (quantity) and variation and complexity (quality) of cases, access to technologies or materials and training/working conditions to name a few. EVST would very much like to harmonise vascular surgical training in Europe. The Fellowship of the European Board of Vascular Surgery exam organised by UEMS is a great step towards this harmonisation and EVST is actively promoting it. The ESVS travel grant is an excellent opportunity for trainees willing to learn new techniques. It would be great if more trainees could profit from this experience in other countries and bring back home the skills learned. But not all trainees can travel from home and family for several months. Ideally, short visits with hands on experience are enhanced by online learning: freely available and constantly updated textbooks with interactive surgical atlases, interactive e-courses, and in depth instructional videos on all possible procedures. The vascular surgeons of the future are

not restricted in their training by the cases they accidentally come across but receive tailor made training based on their specific skills and talents.

Enthusiasm, vision, determination, and hard work of many trainees in vascular surgery has brought us to where we are now. EVST is very grateful to all who contributed to progressing training in vascular surgery and for all the help and support we received from tutors, congress organisers, and industrial partners.

Modern technology has dramatically changed the ways we treat our patients resulting in low mortality, swift recovery, and enhanced quality of life. Training in vascular surgery has evolved accordingly; from learning from your tutor and the patients you come across, to learning from the whole vascular community, all embracing training programmes, and standardised examination. Vascular surgeons have a responsibility to treat their patients in the best way possible. EVST, together with ESVS is dedicated to giving all vascular surgeons the opportunity to do so. This challenge is tough, but with the prospect of enthusiastic and talented trainees willing to invest their best to help vascular surgery in Europe, the future looks bright.

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