

# Thirty-Six Years of the European Paediatric Association–Union of National European Paediatric Societies and Associations (EPA-UNEPSA)

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Managing the health care of infants, children, and adolescents in Europe requires balancing clinical aims, research findings, and socioeconomic goals within an international environment characterized by cultural and economic complexity and large disparity in availability, affordability, and accessibility of pediatric care. Since 1976, the European Paediatric Association (EPA), formerly Union of National European Paediatric Societies and Associations (UNEPSA), has been trying to establish this balance, involving almost two generations of European pediatricians. This report explores how EPA-UNEPSA has gone through evolutionary periods and describes the founding generation of pioneers, as well as the formulation of clinical aims. This is the first of several reports examining the highlights of the association and its congresses (EUROPAEDIATRICALS), including the research activities according to each stage of development.

During the international conference on the nutrition of infants and children in August 1975 in Montreux, Switzerland, 11 delegates of different European national pediatric societies decided to found UNEPSA. On June 20, 1976, the official foundation of UNEPSA took place in the St Sophia Children's Hospital in Rotterdam, the Netherlands, and the constitution was ratified by 18 representatives of national pediatric societies in Europe (Table I).

The first 10-year period of EPA-UNEPSA was an era of tremendous efficiency, with friendly interaction between the active members to promote communication among pediatric centers in Europe. EPA-UNEPSA continuously aimed to enhance primary, secondary, and tertiary pediatric care of all European children. Achieving the goal, EPA-UNEPSA relied on the principal challenges of international social responsibility with respect to children by initiating a strategy and basis for collection of demographic data, communication, confidentiality, cooperation, and consensus of all decision makers. In 1987, Bertil Lindquist and Klaus Betke gave a critical review of the achievements of UNEPSA during the first 10 years.<sup>1</sup> The two main achievements were: (1) the integration of European pediatrics into worldwide pediatrics as represented by the International Pediatric Association; and (2) the stimulation of professional contact between pediatricians from Eastern and Western Europe. The merit of the UNEPSA pioneers was that they created the basis for future communication and cooperation among European pediatricians.

During the next 15 years, the political situation in Eastern Europe changed dramatically and the Europe of 53 nations started a new chapter. The first generation of members of EPA-UNEPSA observed with great concern the fact that the rapid expansion of diagnostic and therapeutic facilities in Western European countries was not followed by a similar development in Eastern Europe, thus widening the gap of diversity of child health care in Europe with >250 million children aged <18 years.

In the 1990s, it became clear that, due to the expansion of scientific knowledge, technology, and specialization, pediatrics was running the risk of being fragmented into—and replaced by—an increasing number of subspecialties. This form of evolution would have gone against the rights of children and adolescents to receive care as individuals, rather than as organs or tissues, with a holistic approach. Therefore, after seeing the extraordinary and positive results of subspecialties in their role of advancing and promoting child health, EPA-UNEPSA particularly focused its attention on the aim of maintaining a strong general pediatrics and interculturally supporting the general pediatricians in their role of providing primary and secondary care to children and adolescents.

In the most recent 10-year period, EPA-UNEPSA focused on adapting to the new era in pediatrics by establishing continuous communication with those societies and associations offering health care to children (eg, general practitioners, family physicians, specialists, nurses, psychologists, parents' organizations) and inviting them to the EUROPAEDIATRICALS congresses for active exchanges of ideas.

EPA-UNEPSA also expanded to study diversity of pediatric health care in Europe and provided information on the provision of adequate, affordable, accessible, available diagnostic, and therapeutic care, as well as equity, efficacy, and efficiency of pediatric care for all pediatricians in Europe.<sup>2,3</sup> One of the most recent challenges has turned out to be the provision of a basis for rational use of essential drugs, their safety and distribution, as well as the use of high-tech medicine. EPA-UNEPSA aims at providing a panel for discussions for pediatricians to provide evidence-based practice guidelines that are based on scientific findings. However, EPA-UNEPSA is well aware that their national application may depend on country-specific priorities influencing

EPA	European Paediatric Association
UNEPSA	Union of National European Paediatric Societies and Associations

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**Table I.** Presidents and secretary generals of EPA-UNEPSA

	Term of office	Country
<b>President</b>		
Bertil Lindquist	1976-1982	Sweden
Angel Ballabriga	1983-1986	Spain
Jean Rey	1987-1990	France
Timothy Chambers	1991-1994	United Kingdom
Armido Rubino	1995-1997	Italy
Jochen H.H. Ehrich	1998-2000	Germany
Jan Janda	2001-2004	Czech Republic
Armido Rubino	2005-2007	Italy
Andreas Konstantopoulos	2008-present	Greece
<b>Secretary general</b>		
Klaus Betke	1976-1985	Germany
Eberhard Schmidt	1986-1993	Germany
Jochen H.H. Ehrich	1994-1997	Germany
Manuel Katz	1998-2001	Israel
David Branski	2002-2009	Israel
Massimo Pettoello-Mantovani	2010-present	Italy

appropriate use and updating. Last, but not least, EPA-UNEPSA and other organizations (eg, International Pediatric Association, European Academy of Paediatrics) have reached a high level of international communication, cooperation, and consensus to further the pediatric care of children.

In summary, in the 36 years of the existence of EPA-UNEPSA, it has become clear that the diversity of pediatric

**Table II.** Selection of congresses organized by EPA-UNEPSA

Congress	Organizer	Date	Location
1st EUROPAEDIATRICS 2000	Armido Rubino	March 18-21, 2000	Rome
2nd EUROPAEDIATRICS 2003	Manuel Katz and Jan Janda	October 19-23, 2003	Prague
3rd EUROPAEDIATRICS 2008	Mehmet Vural	June 14-17, 2008	Istanbul
4th EUROPAEDIATRICS 2009	Alexander A. Baranov	July 3-6, 2009	Moscow
5th EUROPAEDIATRICS 2011	Wilhelm Kaulfersch	June 23-26, 2011	Vienna
6th EUROPAEDIATRICS 2013	Terence Stephenson	June 5-8, 2013	Glasgow

**Table III.** Member countries of EPA-UNEPSA (1976-2010, in 2011 Armenia became the 37th member)

Albania	Germany	Poland
Austria	Great Britain	Portugal
Belgium	Greece	Romania
Bosnia-Herzegowina	Hungary	Russia
Bulgaria	Ireland	Serbia
Croatia	Israel	Spain
Cyprus	Italy	Sweden
Czech Republic	Latvia	Switzerland
Denmark	Lithuania	Slovakia
Estonia	Luxemburg	Slovenia
Finland	Macedonia	Turkey
France	Netherlands	Ukraine

care among 53 different countries in Europe is immense. Annual meetings with national pediatric presidents focus on the most urgent problems of pediatric health care. EUROPAEDIATRICS became the tri-annual congress for all general pediatricians and pediatric subspecialists in Europe (**Table II**). The main research activities of EPA-UNEPSA concentrate on identifying the demography of primary, secondary, and tertiary care pediatrics in Europe, with the objective of promoting strong advocacy and political intervention in order to ensure the delivery of high-quality health care to children throughout Europe. EPA-UNEPSA is an active pediatric association representing more than three-quarters of all European countries (**Table III**). After 36 years, it is still expanding and improving both medical care of all children and cooperation of their caretakers in Europe. ■

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