

# International perspectives in PMR education and training

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## Generalities

Physiatry training differs markedly between countries. There is no universal agreed upon residency training curriculum, there is no uniformity with respect to training duration, or requirements, and no universal PM&R certification process. There is little reciprocity among countries with respect to physiatry training and certification.

## Realities

Our work and lives are increasingly global, interconnected and unpredictable. Diseases cross the borders of countries and people travel freely throughout the globe. Also, globally the population is aging, and disparities and inequities in health care are deepening. In the United States the health care system is becoming less accessible and affordable and a significant shortage of health care professional apparently looms. Yet, at the same time the promise and potential of medicine to cure disease, alleviate suffering, overcome disability and improve quality of life has never been better. The great challenge to us as health care leaders is how we navigate this crossroads, strengthen the communities we serve and improve the health and the quality of life of the public. Core values of the field of physical medicine and rehabilitation are noted in table 1.

**Table 1 CORE VALUES OF THE FIELD OF PHYSICAL MEDICINE AND REHABILITATION**

- Functional improvement is as important as treatment or cure of impairment.
- We respect all who can help provide care and help our patients improve, including our patients themselves, and their families and friends.
- Teams can accomplish much more than individuals.
- Physical agents may be as useful as chemical ones for the treatment and management of diseases.
- Education is a key to improving health and function.
- Our obligation to our patients compels us to change not only the patient, but also our community and our environment.
- Our roles as physiatrists include social advocacy.

## Issues to Address

What is our common ground? Is it physical medicine, musculoskeletal medicine and/or rehabilitation? How should we engage in and promote greater inter-professional collaboration among other physicians and allied health providers. In planning our future, some strategic questions that need to be added are noted in table 2.

**Table 2 STRATEGIC QUESTIONS FOR ISPRM AND ITS MEMBER PM&R SOCIETIES/COUNTRIES**

- How do we serve our members in a way that promotes the public good?
- Who are our stakeholders?
- Where is our focus?
- How should we balance our focus on patient care, education, research and advocacy?

## Practice Forces Directing Future Change

Consumers are becoming more active and are beginning to use new technologies such as the internet, to access information about their health. The exposition of the human genome and the development of new diagnostic and therapeutic tools will create new opportunities for medical practice. However, this technology probably will cause some difficult ethical issues as definitions of quality of life vary. Stem cell transplantation and other new healing interventions may markedly improve central nervous system damage and present more rehabilitation potential to those affected. Also pharmaceutical agents that can constrain tissue rejection that will markedly enhance limb transplant and organ/joint replacement. More advanced materials (tissue engineering) will allow more varied implant devices. Robotics, alternative medicine and nanotechnology will each have profound effects on

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our ability to enhance functional capacity.

### Large scale trends/issues

The composition and structure in society, especially the population demographics and work trends will continue to shift dramatically. By the year 2050, the world's population is expected to be 9.5 billion, with many older individuals. At the same time society is more culturally and ethnically diverse. Health care providers want to achieve a greater balance between their professional and personal lives. There will be an increased number of non-physician providers.

The use of information technology and the need for information management will increasingly permeate society and medicine. Information technology will change the way we perform work, and allow for new collaborative and innovations. Licensure and legal issues if resolved could allow a physiatrist to treat patients in other countries and continents. However, society will increase its expectations and accountability of medicine in fulfilling its role to the public in producing better quality outcomes.

### Summary

Globalization will continue to influence the medical enterprise as people, ideas and microbes can cross-geopolitical boundaries. The aging population is a tremendous opportunity for physiatrist throughout the world. We need to decide upon uniform curriculum for our training programs in areas such as spinal cord injury, head injury, cerebral vascular accident, etc. That can be modified for specific local needs. We need to develop objective measures to measure the clinical skills of our diplomats. We need to produce excellent clinicians who are valued by their health care delivery system. At the same time we need to teach experimental design, research methodology, data analysis and statistics to produce inquisitive minds and build the scientific base of the specialty. This is an exciting time and the International Society of Physical and Rehabilitation Medicine can play a major role in improving the lives of those with disabilities throughout the world.

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