



## Editorial

## Incoming President's editorial



2020 was a challenging year for medical physicists in Europe. We had to deal with two seismic events, Brexit and coronavirus, that were outside of our control and that have had major effects on the future of our organisation and profession. As we approached the end of the year, we had some good news on both fronts with a vaccination programme in sight and an agreed trade deal.

2020 also saw the end of Marco Brambilla's successful presidency. The phrase "hard act to follow" immediately comes to mind. One can go back to the editorial written in 2018 [1] which shows that the ambitions have largely been achieved by Marco, and the dedication of the board, committees and council. This year I am humbled and honoured to assume the presidency of a federation of 36 National Member Organisations (NMOs) that is in good shape and has moved from strength to strength. Indeed, it is the strength of the organisation that has helped us get through the recent challenges that we have faced.

In the following paragraphs and Table 1 I will outline some of the developments and ambitions that I would like to build on as well as some of the necessary consequences of the most extraordinary year that was 2020. Ursula von der Leyen highlighted the TS Eliot quote [2], which resonates in this transitional period:

"What we call the beginning is often the end. And to make an end is to make a beginning. The end is where we start from."

### 1. Move of the administration function to the Netherlands:

EFOMP celebrated forty years in 2020 from when Professor John Clifton inaugurated the federation in London. Britain voted to leave the European Union in 2016. However, real change in regulatory and other matters will only be experienced from January 2021. For EFOMP, access to funding from the EU, data protection and other regulations influenced our decision to move our administrative headquarters to the Netherlands. EFOMP operates a non-profit making company that is able to receive and distribute funding to achieve the advancement of medical physics in Europe. For forty years, this company ran successfully in York in the UK. The immense contribution of IPEM, the UK (National Member Organisation) NMO, and Fiona McKeown to this success must be acknowledged. This move does not alter the status of the relationship with either the UK or Dutch NMOs, however, the work in assisting the move by both organisations is much appreciated. The new entity in the Netherlands will be administered by the company Cantrijn, which performs a similar role for NVKF, the Dutch NMO. This move of offices and bank accounts may lead to some short-term technical issues around administration and financial transactions; however, in terms of EFOMP's role in advancing medical physics in Europe, "business as usual" will

apply.

### 2. Medical physics response to the pandemic

December 2020 had both sad and hopeful moments. We were saddened by the loss of our Hellenic Association of Medical Physics colleague Maria Kotzasarlidou, due to COVID. Dr. Kotzasarlidou made a significant contribution to the education of young medical physicists in the Nuclear Medicine field. On the positive side, we were happy to see the tweeted images of Italian NMO president Michele Stasi receiving the vaccine.

The pandemic had a devastating effect on health services, patients and staff during the last year. Medical physicists in Europe adapted to maintain existing services, treat patients and rapidly develop new facilities in response to the pandemic. EFOMP assisted by sharing knowledge and experience through its online COVID forum [3]. It also provided lockdown lectures, webinars in collaboration with EUTEMPE and our first successful online EFOMP School for Medical Physics Experts (ESMPE) school on particle therapy. The recording of these events on our educational platform has created a unique resource that points a way forward for EFOMP. The success of the online information sharing is down to the volunteers who give their time and commitment. It is intended that EFOMP will assist in the provision of digital resources, such as access to webinar platforms for NMOs, to maximise the benefit of our volunteers.

### 3. ECMP 2020 and 2022

The pandemic led to the inevitable postponement of the European Congress of Medical Physics, (ECMP) 2020 till June 2021 and the moving online of all EFOMP face-to-face meetings. The rapid development of the vaccine means that the next ECMP is planned to go ahead face-to-face in Torino this summer. Of course, this will be dependent on the public health advice given by the local organizing committee and European authorities at the time. It is hoped to have some blended elements to facilitate those who will not be able to travel. The flexibility of the Spanish NMO in postponing their annual congress has been acknowledged by EFOMP.

Prior to my role as Vice President of EFOMP I had chaired the bid for ECMP 2022, which was successful for Dublin against strong competition. It is also planned to go ahead with the ECMP in Dublin 2022 as a blended event. The ambition of the outgoing president to exceed one thousand registrants should be achievable and we will do whatever we can, particularly for young medical physicists from all 36 countries of EFOMP, to facilitate their participation.

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**Table 1**  
Areas of interest for the current presidency.

Area	
Education	<ul style="list-style-type: none"> <li>• Increased online access and content on EFOMP education platform.</li> <li>• Liaison with EBAMP and EEB to look at accreditation of MSc and PhD programmes. Continuation and development of ESMPE school editions.</li> </ul>
Identity	<ul style="list-style-type: none"> <li>• Increased relevance of EFOMP in day-to-day medical physics activities through WGs.</li> <li>• Increased participation of young and early career physicists in EFOMP structures and a voice for their future, reflecting inclusion and diversity.</li> <li>• Enabling tools such as science writing, ethics, mentorship in research.</li> <li>• Development of medical physics profile activities and volunteerism in non-ionising physics: MRI, ultrasound, laser, AI.</li> <li>• Increased EFOMP accreditation of National Registration Schemes</li> <li>• Look at potential to provide software resources, procurement, risk assessment tools and spread through EFOMP.</li> <li>• Double number of IAMs.</li> <li>• Create a European medical physics mailing list, for information and regulation distribution.</li> </ul>
European Congress of Medical Physics	<ul style="list-style-type: none"> <li>• Increased participation through online communication.</li> <li>• Increased profile and support from vendors to facilitate further resources for NMOs.</li> </ul>
International Bodies	<ul style="list-style-type: none"> <li>• Continue to develop contribution of EFOMP in a complementary manner to such bodies.</li> </ul>

The willingness of NMOs to put in so much effort in competing to host such events, schools, administrative functions is a bedrock of the federation. Although not everyone can be successful for each event, the experience gained in compiling such bids will ensure that future bids can be successful for such events and increase the quality of the congress.

#### 4. What to expect during the next presidency

EFOMP is an organisation with clear ambitions and structures [3]. NMOs are the essential elements of the federation. The committees carry out the essential work of the federation. The new Individual Associate Membership (IAM) category reflects the increasing capability of EFOMP to deliver its aims of communication, integration and education through its digital platform. It also helps us to create access in countries where NMOs are not yet established. Although this is my first time as part of the board of EFOMP, there is a wealth of dedicated experience surrounding me on the board thanks to these structures. However, our future is only as good as the next volunteer or participant who is nominated by the NMOs. When possible, I will continue the previous policy of visiting NMOs for leadership meetings face-to-face or online at local and regional meetings.

The recent creation of a special interest group for dosimetry in therapeutic nuclear medicine allows for development of special medical physics centred activity groups that can be accommodated using existing structures and that have an appropriate home in EFOMP.

#### 5. Professional development

EFOMP under the guidance of the professional matters committee has recognised four national registration schemes (NRS) to date. It should be possible that the majority of NRS can be accredited by the end of the current presidency; this would increase the mobility of physicists in our community. When travel is permitted, the restoration and expansion of exchange programmes and mentorship is something to look forward to. The European Examination Board (EEB) will assist in setting standards for mobility and harmonisation.

Although European Board for Accreditation in Medical Physics

(EBAMP) is independent from EFOMP, a mechanism for European accreditation of academic elements of the NRS is something I would also like to see.

In different countries medical physicists assume different roles outside of EU directive 13/59 [4]. For example, in the Netherlands they are involved in invasive and non-invasive therapies and physiological monitoring. The recent publication of the updated statement on the role of the physicist in MRI shows how patient experience may be benefitted and can help make business cases for medical physicists in new roles. The desire to use scientific expertise in new ways is something that we are all passionate about. EFOMP will continue to drive the visibility of the physicist in bringing patient benefits.

The directive underpins the requirement for future medical physics expertise. The recent issues of European Medical Physics News [3] highlight the very strong role of early-career medical physicists within our NMOs. During my presidency, I hope that we can increase EFOMP's relevance to these young physicists who are the future of medical physics and that we can set up structures and communication channels to consolidate their involvement.

#### 6. New challenges

The recent pandemic showed how quickly medical physicists could adapt their science to face new challenges. There are some new important areas that are being developed and that will figure strongly over the term of the next presidency. Some current themes are the increasing availability of particle therapy, flash therapy, dosimetry in nuclear medicine therapy, assessment of image quality for optimisation in CT and mammography. These are only parts of a long list. The need for expertise in these new technologies underpins the important role of research in medical physics in Europe. EFOMP plays a vital role in many European consortia through its Projects and European committees. I hope that in the next few years our visibility will be enhanced even further, through these bodies and the medical industry representative bodies such as COCIR. The contribution of artificial intelligence (AI) in medical physics is something that needs to be planned and trained for with clearly defined roles. The Working Group (WG) structure in EFOMP provides a mechanism for delivering the best expertise in these areas and the enthusiasm for participation is welcome. The joint ESTRO EFOMP WG on the core curriculum (CC) in Radiotherapy points to the role that EFOMP plays as the voice of medical physicists in Europe and how the medical physics voice is strengthened by our collective identity as EFOMP. Similar updates are required for Nuclear Medicine and Radiology CCs. The interactions with other organisations as defined by our memoranda of understanding should be collaborative and complementary, created by a strong EFOMP identity which articulates the role of the medical physicist in the hospital, university, research or industry setting.

The WGs have been producing quality control protocols and guidance. One of my themes will be the relevance of EFOMP in medical physicists' everyday activities. The use of common software tools in combination with these protocols is something that will increase their relevance further.

The development of digital communication tools by the Communications and Publications committee over the last number of years has been impressive. The development of the educational platform is also very impressive. Although face-to-face teaching is preferred, in many cases it is not always possible. Throughout the pandemic, EFOMP showed that significant education can be imparted through the use of these platforms. With this in mind the Education and Training committee will see how we can enhance the use of these resources in a sustainable manner.

It is also time to acknowledge the contribution of Paolo Russo who finishes as editor in chief of the European Journal of Medical Physics after eight years. Since 2017 the impact factor has increased from 1.99 to 2.5 indicating the strong voice, the research contribution and identity

for medical physics in Europe. We welcome the new editor Iuliana Toma-Dasu. It is my hope that through the use of digital media with the help of Elsevier we can boost the impact factor even further

Finally, I would like to quote a phrase from the Irish language which resonates with the role of EFOMP for medical physics in Europe:

“Ni neart go chur le cheile”

There is no strength compared to working together.

## References

- [1] Brambilla M. Editorial: New President of the European Federation of Organizations for Medical Physics, 2018;45:207-209. <https://doi.org/10.1016/j.ejmp.2018.01.002>.
- [2] Remarks by President Ursula von der Leyen at the press conference on the outcome of the EU-UK negotiations [https://ec.europa.eu/commission/presscorner/detail/en/SPEECH\\_20\\_2534](https://ec.europa.eu/commission/presscorner/detail/en/SPEECH_20_2534) [accessed December 2020].
- [3] EFOMP website <https://www.efomp.org/> [accessed December 2020].
- [4] European Council Directive 2013/59/Euratom on basic safety standards for protection against the dangers arising from exposure to ionising radiation and repealing Directives 89/618/Euratom, 90/641/Euratom, 96/29/Euratom, 97/43/Euratom and 2003/122/Euratom. OJ of the EU. L13;2014, 57: 1–73.

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