

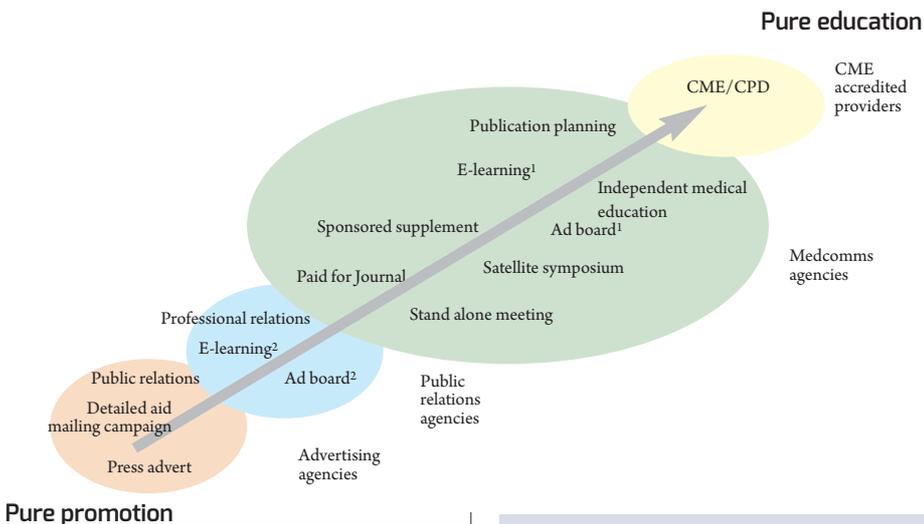
# Medical Writing

Medical education implies providing education or training of unbiased scientific or medical content. However, the reality is that medical education is now more a spectrum of educational activities that span from more promotional to purely educational.

Medical education has nevertheless maintained its role as the mainstay medical communication tool. Pure medical education is considered to be at one end of the education-promotion spectrum, while detailing or advertising are at the opposite

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**Figure:** The education–promotion continuum, coined by Eugene Pozniak, represents the broad selection of activities that medical education covers. At one end of the spectrum is a pure promotional activity, press advertisement, which is fully sponsored by industry and promotes a specific product (pink bubble). At the other end lies pure continuing medical education (CME)/continuing professional development (CPD), an ideal situation where CME is provided by accredited CME providers and funding is independent of pharma (yellow bubble). In between are activities provided by medcomms agencies, who are mostly sponsored by pharma (green bubble) and those provided by public relations agencies, who are not usually accredited for CME (blue bubble).

end. In the middle of the spectrum are activities by medical education providers, which are most often supported by industry, and which aim at raising awareness or the profile of a specific therapeutic area by communicating results from basic, clinical or epidemiological research. This information is disseminated during satellite symposia, stand-alone meetings, or advisory board meetings, which continue to be considered by health professionals to be of high educational value, even though the content is sometimes related to a specific product or device. Medical education providers include continuing medical education (CME) organisations, independent providers, and in some countries' universities. These providers have no or limited industry support and provide educational content under strict guidelines, independent of any promotional motive or industry control.

With the rapid development of European CME, the European CME Forum and the Good CME Practice group recently published a set of standard core principles with a view to adoption by European CME providers and other key organisations providing CME programmes. Details about Good CME Practice can be found at <http://goodcmeppractice.eu>.

Traditionally, physicians were the main receivers of medical education, but today, participants include other health professionals such as nurses, midwives, and various allied health professionals. Increasingly, patients also seek to have access to sophisticated medical information.

This issue of *Medical Writing* showcases some different types of medical education activities in Europe and India to illustrate the various roles of the medical writer in medical education. **Susan** ▶



**Amy Whereat**

► **Harris** and **Christopher Kelly** start off with an article describing patient education in clinical trials throughout the product lifecycle. They highlight the importance of ensuring that patients are adequately informed about medical treatments that affect them. **Elodie du Potet** offers us the French perspective on medical education, which is highly regulated and is limited to communicating about a specific therapeutic area, and **Catrin Marx** and **Christopher Baethge** discuss how

CME is performed in Germany and the advantages of using multiple choice questions to improve the quality of CME training units. Meanwhile, **Namrata Singh** and **Ritu Sharma** provide us with an insight into the role of the medical writer in running advisory board meetings in India. Finally, **Melody Watson** and **Mark Esser** describe how to best write a review paper, with lots of very practical advice, and **Yvonne Anderson** and colleagues share with us

their experience building an independent medical education event.

### Acknowledgement

I'd like to thank Eugene Pozniak, managing director of Siyemi Learning and Programme Director of the European CME Forum for giving me his valuable time to explain the facets of medical education today and sharing his views on the changing landscape of medical education.

## President's Message

### Dear EMWA Members,

Since my last message your committee have been busy on several initiatives. In November we held a very successful conference in Brussels with over 200 delegates. This provided 18 foundation and 10 advanced level workshops and an extended Freelance Business Forum as well as an opportunity to network with fellow professionals and taste the famous Belgian beer and chocolate. We continue to reach out to those considering or just embarking on a career in medical communications and provided a free seminar entitled 'Introduction to Medical Writing' as part of the conference.

There are a number of updates to our website planned or already available. These include a revised FAQ document and an updated Career Guide to Medical Writing which includes information on the different types of writing and employment possibilities. We are also investigating a new website platform which will significantly improve response time and allow us to develop the website further.

We maintain our profile within the medical communications arena. By the end of September CORE Reference had hit 3,000 downloads and

a growing list of companies have adopted, or otherwise support its use. We also worked with AMWA and GAPP and ISMPP in providing a response to an article in the BMJ criticising the important and ethical contributions medical writers make to the scientific literature. All four organisations have been working toward transparency and disclosure for more than 15 years and we believe great progress has been made although, of course, more can be done in some areas.

A survey was sent out in October as part of EMWA's commitment to representing, supporting, and training all our members, which I hope you all completed and returned. This has provided us with up-to-date information on who are members are, what they do, and what they want from the organisation, and we are currently in the process of analysing the data. The results of the survey will be reported in *Medical Writing* next year.

As we come to the end of 2016, I would like to take this opportunity to thank all those who make EMWA what it is, the volunteers and workshop leaders, the Executive Committee (EC), all those of you who contribute to our



journal and of course the staff at Head office who keep everything running. This month you will receive an e-mail inviting you to apply for the vacant positions on the EC. Please consider whether this is something you would like to do. We are a friendly bunch and although it can be hard work there are also definite rewards. It is always good to have new faces and ideas.

Happy Christmas and best wishes for 2017 to you all. Enjoy the holiday!

Best wishes  
**Alison**

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## Call for Companies

The 2nd Medical Writing Internship Forum will be held at our May 2017 Conference in Birmingham, UK. Please contact [internship@emwa.org](mailto:internship@emwa.org) for more information.