

LETTER TO THE EDITOR

Much more than a recognition, Emergency and Emergencies specialty

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I would like to take this opportunity to once again extend my congratulations, on behalf of the Spanish Society of Pediatric Emergency Medicine (SEUP), on the well-deserved and definitive establishment of the specialty of Emergency Medicine in our country.

As the author states, “the year 2024 has been the year,” with Spain joining 34 other European countries in establishing the specialty of Emergency Medicine. This achievement marks the culmination of a long process involving the efforts of various public administrations, particularly the explicit support of the autonomous communities and the invaluable collaboration of Scientific Societies, including the SEUP.

The Spanish Association of Pediatrics advocates for the recognition of 19 ACEs (Areas of Specific Training), and in December 2024, the Ministry issued the royal decree for the ACE in Neonatology. This marks a year of celebration, with two significant milestones in 2024 that demonstrate we are on the right path. The establishment of the Emergency Medicine specialty will ensure that Spanish patients receive care from specialists with regulated, standardized, and recognized training, regardless of their location. Furthermore, the recognition of the ACE in Neonatology is expected to enhance the quality of life for neonates and reduce their morbidity and mortality rates, as has been observed in other countries.

Similarly, both the Emergency Medicine specialty and the ACE in Neonatology will lead to the standardization of our professionals with those in other European countries, facilitating professional exchange and mobility. In addition, this will enable better planning of human resources in both the short and long term, which is essential for the financial sustainability of our National Health System.

Finally, in the case of ACEs, it will be possible to define the positions to be filled with professionals possessing the appropriate skills, always within accredited teaching centers. However, there are critical aspects that must not be overlooked, such as a structured training calendar and the evaluation of training. Emergency Medicine must address urgent and emergency needs across all age groups, including children. This is particularly important as many emergency physicians work in lower-complexity hospitals without pediatricians. Consequently, it would be an excellent opportunity for the SEUP to collaborate in developing a training program tailored to emergency physicians who care for children in their daily practice. Such a program would not only ensure the effective and safe care of pediatric patients but also enhance the value and recognition of training within the specialty.

The SEUP is making significant efforts to achieve its ACE, with the necessary documentation already submitted to the regional ministries. This represents the right path forward, as the substantial advances in recent decades have necessitated the acquisition of specific competencies and the incorporation of highly specialized knowledge and techniques, whose mastery requires dedicated training in accredited centers. These recognitions mark a clear advancement in our health-care system, and by working together, progress will become more achievable. My sincere congratulations.

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