

The academy of Psychosomatic Medicine and Psychotherapy (APM) in Berlin—specialist training in a complex field

Herbert Menzel, Bernhard Palmowski *

Academy of Psychosomatic Medicine and Psychotherapy (APM), Droysenstr. 5, D-10629 Berlin, Germany

Abstract. Psychosomatic Medicine and Psychotherapy has been a separate medical specialty in Germany since 1992. Training takes a minimum of 5 years in an approved training centre and includes 3 years in Psychosomatic Medicine and Psychotherapy, 1 year in Psychiatry and 1 year in Internal Medicine. The specialty is etiologically defined and includes all diseases in the development of which psychosocial and psychosomatic factors play a decisive role. The section of the population requiring care thus ranges from patients with depression or anxiety disorders and personality disorders through the wide area of somatoform syndromes to cardiological or oncological illnesses with somatopsychic syndromes. Specialist training in Psychosomatic Medicine and Psychotherapy is characterised by the acquisition of a solid double-qualification in both somatic medicine and psychotherapy. Furthermore sound knowledge and skills, particularly in the outpatient sector, are indispensable to later professional activities. The concept presented has enabled a highly qualified and broad-based specialist training programme to be developed. The large numbers of applicants for trainee positions have shown that it is extremely attractive to young physicians. © 2005 Elsevier B.V. All rights reserved.

Keywords: Psychosomatic medicine; Specialist training; Double-qualification; Outpatient care; Training cooperative

1. Introduction

Psychosomatic Medicine and Psychotherapy has been a separate medical specialty in Germany since 1992. Training takes a minimum of 5 years in an approved training centre

* Corresponding author. Tel.: +49 30 3241844; fax: +49 30 324 18 22.

E-mail address: info@palmowski.de (B. Palmowski).

and includes 3 years in Psychosomatic Medicine and Psychotherapy, 1 year in Psychiatry and Psychotherapy and 1 year in Internal Medicine. The German Medical Council has entrusted the field with the task of providing care for a large number of patients with a broad spectrum of diseases. This concerns the (approximately) 25% of the population who, according to the epidemiological study by Schepank, are suffering from psychogenic disease. Our specialty is etiologically defined and includes all diseases in the development of which psychosocial and psychosomatic factors play a decisive role. The section of the population requiring care thus ranges from patients with depression or anxiety disorders and personality disorders through the wide area of somatoform syndromes to cardiological or oncological illnesses with somatopsychic syndromes.

2. Specialist training within the academy

In the field of psychosomatic medicine, the teaching of competences for outpatient care is of fundamental importance. In our field, even more strongly than, for example, in internal medicine, obstetrics and gynaecology or surgery, inpatient problems have a different focus to outpatient problems. Thus many treatment cases span time-frames ranging from several months to, perhaps, years. Some patients even require ongoing psychosomatic care. The acquisition of sound routine and self-confidence by the trainee, particularly in the outpatient sector, is indispensable to later professional activities. The sheer multitude and complexity of the contents to be conveyed, i.e., practical medical experience as a trainee, theory, training analysis in both group and one-to-one settings, supervision, Balint groups, etc., make cooperation between the authorised specialists absolutely essential. Only in a cooperative of inpatient and outpatient training centres can the high quality requirements of structure and process be fulfilled.

When a group of specialists active within the German Society for Psychosomatic Medicine and Psychotherapy (DGPM) came together in Berlin in 1996 to develop a model for a specialty-oriented high-level training programme in the form of the Academy for Psychosomatic Medicine and Psychotherapy, this was a ground-breaking idea and numerous obstacles related to form, content and organisation had to be overcome. For this reason, it was extremely helpful to be able to refer to the well-tried and well-tested regulations and procedures in outpatient training for other medical specialties. These were the foundations on which the particular procedures necessary for our specialty could be developed by the medical council, the Association of Statutory Health Insurance Physicians and the Academy.

The first step is taken at Medical Council level. The Medical Council is responsible for recognising the respective practices as specialist training centres and granting the training licences. The outpatient practice must represent the medical spectrum of the specialty in diagnosis and treatment, and be able to care for a sufficiently large number of patients. Documentary evidence of this must be submitted in the form of summaries of the Association of Statutory Health Insurance Physicians accounts. In addition to providing psycho-dynamic individual therapy, group therapy is also compulsory. A minimum of 50 treatment cases per quarter would make a 1-year training licence possible. With over 100 cases, a licence could be granted for a maximum of 2 years. One individual prerequisite for the granting of the training licence is that the physician must provide evidence of at least 5

Download English Version:

<https://daneshyari.com/en/article/2577250>

Download Persian Version:

<https://daneshyari.com/article/2577250>

[Daneshyari.com](https://daneshyari.com)