Observations and Report of the Short-term Fellowship Granted by EBCOG

I am Ecem Eren, I was 3 months far to finish my residency in Istanbul, Turkey. I am one of the three awardees’ of “European Board & College of Obstetrics and Gynecology (EBCOG) short-term fellowship scholarship” for 2022. I spent 3 months from may till the beginnig of august. With the generous support of the EBCOG fellowship, I was able to spend three months of my residency at the Florence University in Italy , with a special focus on ‘endometriosis’.

Endometriosis is a big topic in gynecology, and both its clinical approach and treatment and surgical operations are very difficult. However, as you know, it is more important than we think and it is late in diagnosis. Endometriosis is such an important issue in my clinic. when I saw the clinic headed by Felice Petraglia, one of the few professors in the world, on the EBCOG accreditation list, I was very excited and immediately applied to be his fellowship assistant, even for a short time. He helped me a lot both before the program started and during the program. I would like to express my deepest gratitude and respect to him and his team. In the clinic, only certain days of the week where endometriosis/adenomyosis patients are referred from other gynecology outpatient clinics are performed by the same team. Along with other assistants, I learned advanced ultrasound in endometriosis in this polyclinic on certain days of the week. Having an outpatient clinic dedicated only to these patients is an opportunity not to be missed for providing better information to patients and for close follow-up, as well as for collecting data and making observations from an academic point of view. In the remaining days, I observed the operations with Prof. Felice's team. The laparoscopy techniques are the same as in our country, but the thing that caught my attention here is that the residents can not perform as many surgeries as they do in Turkey, although they observe it. In the clinic where I graduated, an average resident is graduating with approximetely 40 total laparoscopic hysterectomy and 50 vaginal hysterectomy procedures, while the numbers do not exceed 10 in total here. However, patient management in outpatient clinics is more detailed than we have learned. The reason for this is that, according to my observations, they can spend a lot of time with the patient and they have a higher chance of observing their tutors. While a patient is treated every 5 minutes in Turkey, this time varies between half an hour and 1 hour per patient in Italy, which makes a big difference. In these polyclinic days, I learned how important ultrasound is in the diagnosis and follow-up of endometriosis. A game changer that completely changes surgery and medical treatment methods. I also noticed that in Italy there is a more conservative perspective for endometriosis. The patient is tried not to be operated until the last point, and maximum benefit from medical treatment is aimed. Patients are very conscious about their follow-up and have a high ability to observe and convey themselves. I think this is due to the large amount of time devoted to the patient.

My tutor was Prof Petraglia, he created a schedule for me every day to show me as much as possible. Because of this, I had a brilliant opportunity to observe all that is performed in clinic. I attended the emergency and delivery rooms, took part in the rounds at the obstetrics and gynecology units, spend a lot of time in the fetal medicine

obstetric examinations. Follow up of pregnancy system is very different from my country. Since every pregnant woman is followed up, the appointments that the pregnant woman should go to are made at the beginning of her pregnancy every month and the pregnant can not go out of these appointments in state hospitals. In Turkey, a pregnant woman can be seen by different obstetricians even one day apart. And since this increases the patient density, it can lead to quality problems in service.

In the urogynecology outpatient clinic, much more time is allocated to the patient than we do in Turkey, and the patient is valued in all respects. The conservative approach to most of the patients for whom we will decide to have surgery in Turkey stands out in terms of urogynecology, as in endometriosis patients in Italy.

Another subject that I am very impressed with is ‘the margharita system’.There is another delivery room apart from the normal delivery rooms called ‘Margharita’. It consists of 5 round rooms and the rooms open to another round midwife desk in the middle. Only pregnant women who have been completely checked and approved for physiological birth are accepted into this system. A file is given to the patient in advance so that the patient can apply directly to this room when the labor starts. One member of the patient's family will also accepted. This person will also helps the delivery. Inside the room there is a small pool, shower, kitchen and bed for the rest. Intervention on patients is done as little as possible, they are examined by only 2 nurses, and delivery takes place wherever the pregnant woman wishes, not on the lithotomy table, including the pool in the room. At the same time, these 5 rooms are connected to the cesarean section operating room of the routine delivery room with a door, so in case of an emergency, the patient can easily be transferred to the cesarean section room. This system was really different, and I can say that it is totally patient-friendly. Respect for each woman's needs is a rule in the clinic and there is a common understanding among midwives. Uneventful pregnancies, which constitute the majority of all pregnancies, are all being managed by only midwives.I found out that midwives actually feel safe with running the labor ward in terms of medico-legal problems.

I also spent time a great amount of time in urogynecology department.

I have seen the use of laser in terms of genitourinary syndrome of menopause. Since laser is widely used, clinical studies can also carried out. I observed that patients benefited a lot, especially for GSM.

I have fascinated with one other thing: the self-educations.A meeting is held at 07:30 every morning which takes around 30mins.In this meeting they talk about What happened during the night and interesting cases are discussed.There are another meetings starting at 12:00 in one or two days every week. The meetings consist of Interviews with experts in obstetrics and gynecology or other fields from many different hospitals.

Educational Courses

I had the honour of participating to ‘Toscana region hospitals laparoscopy courses’ which is held in Florence during my stay for 1 week.

During my stay i attend ‘ISGE 2022 - the 20th World Congress of Gynecological Endocrinology, Florence ‘

And ‘Le grandi sindromi ostetriche congress, 26-27 may, Florence’

It was a great experience that broaden my horizon. I enjoyed of every minute in Florence.I believe that I returned home with gaining many different perspectives that can make a difference around me. The EBCOG fellowship was an ideal experience and a great opportunity to get a different and valuable notion. I strongly recommend EBCOG to continue to support international exchange among the trainees and I highly encorage this clinical fellowship to the young gynaecologists and obstetricians. Special thanks to Dr. Felice Petraglia who not only organized my training program in the hospital, but also helped me with all the everyday difficulties.