Pathology across Europe 4: Chemical pathology

M G Rinsler

The science of clinical biochemistry (chemical pathology, clinical chemistry) in Europe shares a common technological culture. A visitor to laboratories in different European countries will find similar apparatus and methods applied to similar clinical problems almost everywhere. Differences in the organisation of health care and the packaging of services, however, both within and outside the European Community, influence the delivery of laboratory medicine considerably.

Organisation of pathology services in Europe

University hospitals tend to be very large with more than 1000 beds, but the traditional community hospital is about 300 beds in size. New regional centres, such as the Centres Hospitaliers in France may approach the size of teaching hospitals and often have this function. For this reason it has been uneconomical in most of the rest of Europe to adopt the United Kingdom principle of monospecialist departments, and the usual practice is to have a multidisciplinary clinical pathology department alongside a separate histopathology department or pathology institute. Nevertheless, single laboratory specialties such as clinical biochemistry are found in nearly all university hospitals and the larger regional centres. In some countries, particularly Holland, Denmark, and Scandinavia, clinical chemistry departments often combine the quantitative aspects of laboratory haematology and clinical biochemistry.

Outside the United Kingdom hospital outpatient services are not so extensive, and a greater proportion of ambulatory consultant practice takes place in the physician’s own office. In these circumstances the provision of laboratory analyses is undertaken by clinical pathologists (or non-medical scientists) practising in the private sector. There are small numbers of biochemical laboratories specialising in some areas such as endocrinology or drug measurement. In some countries very large commercial analytical laboratories are attracting an increasing amount of work because of low unit costs, the range of service provided, or the provision of specialised communication facilities.

In West Germany consortia of general practitioners or medical specialists may run their own laboratories to provide services for their own patients. This type of organisation depends very much on the structure of fees and the rules for payment in an insurance based health service. Many non-medical scientists contribute to clinical biochemistry (and clinical pathology services generally) in most European countries—in French-speaking countries they are often specially trained pharmacists. In France the “pharmaciers” take the same certificates in the various branches of clinical pathology as doctors.

Training

The training of clinical biochemists falls heavily on university departments and the larger regional or sub-regional hospital centres. Most countries have a professional overview of training with specified programmes for trainees. The content of these programmes is very similar among countries, taking into account the operational differences. Training, in most instances, will be directed towards the production of a multidisciplined pathologist unless he or she intends to be an academic or a histopathologist.

No European country has examination procedures for single specialties as comprehensive as those provided by the Royal College of Pathologists in the United Kingdom. Some universities in Italy provide masters degrees in clinical pathology, but single specialty degrees such as those provided by the universities of London or Surrey, or the Master in Clinical Biochemistry, are not provided in the rest of Europe at present, but European diplomas may be with us in the near future.

Existing professional examinations are often university based or are nationally conducted by professional organisations on behalf of health ministries. In France a competitive examination (concours des internes) is held to select trainees at the United Kingdom equivalent of registrar. The EC requirements are that the trainee should complete a minimum of four years of appropriate training in a department recognised for training.

In most European countries the responsibility for certification of medical specialists lies with national, or in some cases, regional licensing bodies for doctors. In the United Kingdom the General Medical Council is the responsible licensing authority for confirming training if a United Kingdom specialist wishes to practise in other parts of the EC, or of recognising training if a medical specialist who has undertaken his or her specialist training in another EC country wishes to practise in the United Kingdom. As only about half of the EC countries formally recognise chemical pathology as a medical specialty the mobility of chemical pathologists is restricted compared with histopathologists whose specialty is recognised in every EC country.
Pathology across Europe 4: Chemical pathology.

M G Rinsler

J Clin Pathol 1990 43: 881
doi: 10.1136/jcp.43.11.881

Updated information and services can be found at:
http://jcp.bmj.com/content/43/11/881.citation

These include:

Email alerting service
Receive free email alerts when new articles cite this article. Sign up in the box at the top right corner of the online article.

Notes

To request permissions go to:
http://group.bmj.com/group/rights-licensing/permissions

To order reprints go to:
http://journals.bmj.com/cgi/reprintform

To subscribe to BMJ go to:
http://group.bmj.com/subscribe/