The President's Year

The President of the American College of Chest Physicians has responsibilities related almost exclusively to continuing education in cardiopulmonary medicine and surgery. As a purely professional specialty society, it is our highest priority to provide authoritative current information which will assist our members in practice, teaching, and research. These educational endeavors are also shared with other physicians and members of the health care team who seek excellence in patient care. I am pleased to have the opportunity to relate to the readers of Chest my perspective of the year of my presidency.

Education

The Committee on Continuing Education, under the chairmanship of Dr. Leonard D. Hudson, presented 17 postgraduate courses in pulmonology, cardiology, cardio-thoracic surgery, and critical care medicine. At a time when the clinician became eclectic in his choice of postgraduate education courses, I am delighted to tell you that a record number of physicians chose to attend educational events sponsored by our Division of Education. These programs included three major “board review courses,” that is, courses designed to assist the physician who plans to take his sub-specialty boards in fields related to chest medicine. The review courses presented in the past year included one in thoracic surgery, a board review course in cardiology, and a course in critical care medicine. In addition to those who aspired to take the board examinations, registrants included physicians who had passed their boards but found these five days of intense education to be a superb way to remain current in their discipline. Of course, the largest “postgraduate course” sponsored each year by this society is the Annual Scientific Assembly. The 1980 Scientific Assembly was held in Boston and more than 4,200 registrants attended the panels, motion pictures, symposia and personalized instruction sessions.

There are many other projects sponsored by our Committee on Education (and the Division of Education). The projects in the past year included a correspondence course in Lung Cancer; this was supported by an educational grant from the National Cancer Institute. Approximately 40,000 physicians received the visual aids and the monograph describing the relationship of cigarette smoking to lung cancer and asbestosis. The year 1981 also saw the completion of a three-part series of monographs on the diagnosis and treatment of asthma; this series has become an important reference source throughout the world. The Section on Fungus Diseases of ACCP published a superb monograph on mycotic diseases and this book is yet another addition to a distinguished series of texts published by College faculty members. Our Division of Education obtained another major grant from NIOSH to support a postgraduate course on byssinosis and a special issue of Chest devoted to the proceedings of that conference. This issue is the most authoritative current reference on byssinosis. The depth of authority and clinical utility of these educational events explain why the educational programs were lauded by the ACME Accreditation Committee which provided full accreditation for future ACCP educational courses.

The Division of Publications, a responsibility of the Executive Director of this society, achieved an enviable record during the 12 months of my leadership. More than 1,731 editorial pages were published in Chest from October 1980 through September 1981. Two supplements were given to our readers as “bonuses;” these included the supplement on byssinosis and a special issue as a result of the 1980 Aspen Conference. Incidentally, three supplements have been scheduled for publication in the 1981-1982 publication year. Three issues of Cardiopulmonary Medicine, the Bulletin of ACCP, were published during this period. We are looking forward to the last issue of 1981 which is to be devoted to the scientific contributions of the 17 Scientific Sections of the American College
of Chest Physicians. The special issue of Cardiopulmonary Medicine will provide current "state-of-the-art" articles on the disciplines represented by our Sections. This issue will be mailed to more than 30,000 clinicians.

REPRESENTATION

I appreciate the skillful assistance of Mr. Ray Cotton, our consultant in Washington, D.C., and the Committee on Government Liaison, which have played such a large role in having our voice heard in Washington, D.C. regarding research and education in cardiopulmonary medicine and surgery. The American College of Chest Physicians has, during the past decade, persuasively and regularly articulated the views of the cardiopulmonary specialist, and in many instances the medical practitioner in general, before virtually every branch of the Federal Government—from the White House to the Department of Health and Human Services to the U.S. Congress. In recognition of our consistent, reasoned support of the educational and research needs of the cardiopulmonary community, our opinions and recommendations have been and are solicited by Congress and the Executive Branch on a multitude of issues: National Institutes of Health funding and programs; reimbursement for health technologies, including ultrasound; health professionals educational assistance; Black Lung Benefits reform; amendments to the Federal Food, Drug, and Cosmetic Act; establishment of standards for medical devices; air quality standards; anti-smoking and other health promotion and disease prevention initiatives; and health planning, just to name a few.

This year your College and its executive officers demonstrated a responsiveness and flexibility almost unique for a professional society as a result of the recently changed bylaws. We have been able to respond to national issues of major importance to the College with the single voice of the Executive Council within hours to a few days. We are able to establish ad hoc committees to develop prompt substantive position papers when requested, utilizing our new structure of forums and sections. The forums and sections now make major contributions to the entire annual meeting. They provide a functional locus within the College for individual members' major areas of interest.

INTERNATIONAL ACTIVITIES

The International Chapters of the American College of Chest Physicians and the International Academy of Chest Physicians and Surgeons have been unusually active in the past year. International chapter meetings were held frequently in many countries and the ever-popular Regional Congresses were highlights of the year. I am pleased to report the European Congress on Diseases of the Chest conducted in Thessaloniki, Greece in June, 1981 was a great success. Plans were announced at the administrative session of the European Regents and Governors to have the next European Congress in Lisbon, Portugal in 1984. The next Pan American Congress will be held in Mexico City in 1983. Following the Asia-Pacific Congress on Diseases of the Chest to be held in Hong Kong at the end of this year, plans will be announced for the next Asia-Pacific Congress. The international event we all anticipate so keenly is the XIV World Congress on Diseases of the Chest, which will be held in Toronto, Canada, October 10-15, 1982. An exciting aspect of this Congress is that for the first time in the history of this College, the World Congress will be combined with the Annual Scientific Assembly. We expect a record attendance of registrants, as well as a record number of speakers at the 1982 Congress. The bylaw changes for the International Academy being submitted to the members at the 1981 meeting will assure an orderly evolution of the Academy that parallels that achieved in the College over the last several years.

FINANCE AND MEMBERSHIP

It is with pleasure that I can report to you that, once again, the College finances are a bright page in our Annual Report. In this period of rampant inflation, the Administrative Office has worked closely with your Treasurer and me to maintain our enviable position. Income has been maintained higher than expenses for another year, allowing for the continued steady expansion of programs and services without an increase in dues in 1982. Especially pleasing is the fact that these programs remain, for the most part, self-sustaining. Membership dues and fees have historically been a relatively small part of College income, and the budget for Fiscal 1982 shows that they will represent only about 27 percent of the total. The remaining 73 percent is being generated by an enthusiastic staff through such sources as advertising revenue, grants, investment income, and various other programs. Financially, as well as scientifically, the College is quite a bargain for the individual member.

Membership activity has had a great resurgence over the past few years. There are approximately 800 new Fellows eligible . . . or soon to be eligible to receive their certificates. This is an all-time high for the College for any similar period. Currently, the Membership Committee is under the chairman-
ship of Dr. Dick Briggs, Chairman of the Council of Governors. This dual role emphasizes the important role of Governors in identifying new College members.

Particular attention is paid each year to the younger physicians still in training, because it is from these that the future Fellows of the College will emanate. This year’s campaign is progressing nicely to attract these young affiliates through the cooperation of our College Governors, participating individual Fellows, and the Directors of the various “chest” training programs in medical schools and teaching hospitals.

Let me say that both as your President and as a long-time member of the Credentials Committee, it is my observation that the quality of candidates for full Fellowship is superb. The meaningful and rigorous standards used by the Credentials Committee in its review of candidates bodes well for a healthy and vigorous future.

**Education Fund**

The personal highlight of the year has been the remarkably successful inauguration of the American College of Chest Physicians Education Fund. At present, 42 percent of our membership have contributed in excess of $77,000. The projected income from this principal will permit awarding our first training fellowships in July 1982. It is my fervent hope that this fund will attract handsome support from every ACCP member, as well as others interested in medical education and research. Remember, 100 percent of each contribution goes to the fund. All expenses are borne by the College.

While this has been a year of harmony and growth, I must remind you of two future issues of potentially grave consequence to the College: 1) the Graduate Medical Education National Advisory Committee Report which may radically alter the entire spectrum of medical education; and 2) the effect that the emerging “new” subspecialty of Critical Care Medicine (CCM) may have on College activities and the many College members who have been actively engaged for years in teaching, investigation, and patient care in the sphere of CCM. These areas are currently under review so that the College can continue to effectively represent its members.

It has been an enjoyable and rewarding year for me. I am indebted to my colleagues on the Board of Regents and Board of Governors who have made my tasks productive and happy. I wish to express my appreciation also to a dedicated and skillful staff at Park Ridge, Illinois. I look forward to working with the officers and staff in the years ahead as we continue to forge historical contributions to education in cardiopulmonary medicine and surgery. *Ave atque vale.*

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