Post-gradient training, continuing education and fellowships in ophthalmology in Spain

In Spain, training in the specialty of Ophthalmology lasts four years, and takes place after obtaining a degree in medicine and passing it with a sufficiently high score as to be able to choose this option in the annual announcement of selection tests for access to the residency training program known as MIR (médico interno residente or resident medical intern). Training is carried out in accredited healthcare centres and is evaluated by teaching committees. At this stage, the new specialists will have acquired sufficient knowledge to enable them to prevent and correctly perform medical-surgical treatment of eye diseases. It is also customary for them to have had experience in helping to train more junior residents and other professionals, and in taking part in research projects. They can usually be considered to have received adequate training as general ophthalmologists. Moreover, during this residency period, the training plan will often have allowed them to expand their knowledge in a certain rotation, and to develop skills to focus their work on more specific tasks.

After this period ends, the new (and old) specialists have to update and improve their competencies in the light of the technological evolution and the demands and needs of patients and the healthcare system. This active, ongoing process of teaching and learning is what is known as continuing education. Training can also be completed with university studies, such as PhD (doctorate) programmes, masters degrees other diplomas ruled by each university. Although continuing education is a right and duty of the professional, it is even more necessary in ophthalmology, owing to the enormous transformation that the specialty has undergone in the last 30 years, with changing technology, diagnostic tools, treatments, and innovation in surgical procedures that require knowledge, experience, abilities and skills that are not necessarily covered during the residency.

In the United States and the United Kingdom, or in Latin American countries such as Mexico or Colombia, there is a long tradition of training ophthalmologists in fellowship programmes following their residency. These cover sub-specialties, when the professional becomes an expert in a certain activity within ophthalmology (cornea, retina, glaucoma), or supra-specialties, when the ophthalmologist has to dip into other disciplines for comprehensive management of ophthalmology patients (ocular pathology, uveitis, neuro-ophthalmology). Apart from improving the candidate’s job prospects, fellowship programmes give the ophthalmologist the opportunity to conduct research studies, and to develop a network of contacts that can be very useful for their subsequent professional development. Fellowships enable the ophthalmologist to be independent in the diagnosis and treatment of the specific study area (retina, cornea, glaucoma, etc.). If the reader is interested in pursuing a fellowship abroad, it is advisable to be well informed about the programme, if possible with short stays or visits to the selected centre, and to commence the interview and selection process well in advance (one or two years).

In Spain, these fellowship programmes (fellows, super-specialties or sub-specialties) and continuing education have been recently regulated, and are described below:

First are the Specific Training Areas (STA) (Áreas de Capacitación Específica [ACE]), regulated by Royal Decree (R.D.) 639/2014: “A set of knowledge, skills and attitudes, added in depth or in extension, to those required by the official programme of one or several specialties in Health Sciences, provided that this set of skills is the object of relevant healthcare, scientific, social and organisational interest”. The creation of an STA requires positive reports from the
Spanish National Health System Human Resources Committee (formed by autonomous region delegates and national ministry authorities) the National Council for Specialties in Health Sciences, and the National Commission for the Specialty. Training is in a residency system, and requires an entrance test. The program is full time and remunerated.

Continuing education has also been recently regulated by R.D. 639/2015, with the following programmes:

**Diploma of Accreditation (DA)** (*Diploma de Acreditación [DA]*): “A credential that certifies that the healthcare professional has achieved the skills and continuing education requirements established in a specific functional area for a certain period of time”.

**Advanced Diploma of Accreditation (ADA)** (*Diploma de Acreditación Avanzada [DAA]*): “A credential that certifies that the healthcare professional has achieved the advanced skills and continuing education requirements established in a specific functional area that accepts and requires a higher level of professional training, for a certain period of time”.

They are approved by the Continuing Education Commission described above and require reports from the National Commission for the Specialty and the National Council for Specialties.

Finally, **functional area** is defined as “the organisational area that arises from grouping jobs that are common as regards the aim of the work carried out, specialisation of the functions assigned and the characteristics of the professional activities assumed”.

It is hoped that the continuing education programmes offered by universities will adapt to the new situation, and that interested parties (professionals, scientific societies, teaching commissions, etc.) suggest STA, DA and ADA for their accreditation.

As a practical example, the University of Oviedo, through the Instituto Universitario Fernández-Vega, has its own post-graduate programmes, among which are one-year **Master’s degrees** (Ocular Surface, Lens, Cornea and Refractive, Glaucoma, Retina and Regenerative Medicine, and advanced therapies) and shorter **Post-graduate Certificates** (Corneal additive surgery, Phakic lenses, Uveitis). It also has a **Continuing Education Programme** which consists of the subjects included in regional seminars, research seminars, clinical sessions, refresher sessions and bibliographic sessions during the entire academic year. These programmes will be presented in upcoming courses for accreditation as AD, ADA and, if all those involved agree, some could qualify for an STA.

Residents and ophthalmologists who wish to improve their knowledge of research issues can participate in doctorate programmes, which end with writing of a doctoral thesis and academic recognition, with the title of Doctor. Several Spanish universities offer participation in doctorate programmes through post-graduate centres. In our case, the University of Oviedo has a doctorate programme in Medicine and Health Sciences, within which there is a research line in Ophthalmology and Vision Sciences. Entry to this doctorate programme is detailed on the University website. The selection period usually opens in August each year. Regardless of the alphabet soup and acronyms, whether a doctor is starting or finishing his residency and he is attracted by a fellowship, whether he wants to improve his knowledge of biomedical research or have specific training in a specific subject, now might be a good time to seek information and start a new adventure. I am sure that it will be good for the patients, for the professional, and for the health system.

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