



## LETTER TO THE EDITOR

### Current situation of Specialized Health Training in pediatrics and its specific areas: Challenges and needs

### Situación actual de la formación sanitaria especializada en pediatría y áreas específicas: retos y necesidades

Dear Editor:

The goal of education in pediatrics should be to train the professionals needed by society for the care of children. Reaching an agreement from different parties as to what is actually needed is a different matter.

Reading the article written by the Comisión Nacional de la Especialidad de Pediatría (CNEP, National Committee on the Pediatrics Specialty),<sup>1</sup> we found interesting that its efforts were fully focused on the development of highly specialized pediatrics providers who would work in hospital settings, who we do need, without a doubt, but in a small proportion, as the current demand in our society is an increase in the number of primary care (PC) pediatricians.

When PC works well, there is a reduction in hospital admissions, chronic diseases of moderate severity can be managed in primary care centers and health care is close to families.

Taking into account the needs of the population, independently of the training of pediatricians in different subspecialties, pediatric education should focus on training of a high percentage of PC pediatricians, and there should be greater involvement of PC pediatricians in pediatrics medical intern-resident (MIR) training.

There is a significant shortage of pediatricians at the PC level, which, based on the Report on the Supply and Demand of Medical Specialists for 2023–2035, has worsened in recent years.<sup>2</sup> Thus, the number of pediatricians increased 3.3% between 2021 and 2023, but the number of PC pediatricians decreased by 4.5%, while the number of hospital-based pediatricians grew by 12.7%, evincing the need to allocate a large proportion of residents to PC.

The importance of training physicians in PC has been emphasized from different domains. The CNEP itself has outlined various capacities that fall within the scope of PC, such as the development of relationships with families, schools and social health and welfare institutions or prevention-based medicine, among others.

In consequence, the Strategic Framework for Primary Care and Community Medicine,<sup>3</sup> endorsed by all the primary care societies, autonomous communities and the government, proposes to the CNEP the inclusion in the official medical curriculum of a mandatory rotation in PC lasting 6 months and the possibility of extending this rotation to 12 months on a voluntary basis. We hope that it will be amenable to this request.

Our objective is to convey this reflection to the CNEP so that the main goal of its activity be the overall improvement of pediatric care, at both the hospital and PC levels.

### Appendix A. Members of the Executive Board of the Asociación Española de Pediatría de Atención Primaria

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### References

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2. Barber Pérez P, González López-Valcárcel B. Actualización: Informe de necesidad de médicos especialistas en España 2023–2035. *EcoSalud*. Universidad de Las Palmas de Gran Canaria; 2024. p. 1–150.
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<sup>◇</sup> Appendix A lists the members of the Executive Board of the Asociación Española de Pediatría de Atención Primaria (Spanish Association of Primary Care Pediatrics).