

Medium-Term Research Strategy of the Spanish Society of Pulmonology and Thoracic Surgery (SEPAR)

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Scientific associations today cannot ignore the challenge to promote, stimulate, and influence events in social, professional, and scientific arenas in order to optimize the adaptation, ongoing improvement, and continuous innovation of their specialties and the professionals who practice them. The Spanish Society of Pulmonology and Thoracic Surgery (SEPAR) aims to be such a motor of change and has therefore recently defined its research strategy for the coming years. SEPAR's plan is to be a leader in knowledge acquisition on respiratory and thoracic diseases and take an active part in managing such knowledge. In this way, we will become a point of reference for and a necessary ally of all those who are playing an active part. SEPAR's mission is to contribute to the professional development of its members, to be of use both to them and to citizens and patients in general.¹ Accordingly, based on the values of the SEPAR community and in line with our association's objectives and specific projects, one of our strategic priorities is research into respiratory and thoracic diseases.

The current state of respiratory disease research in Spain is the fruit of sustained, collective effort, throughout which SEPAR has played and continues to play a decisive role (Table), under the leadership of a group of highly esteemed Spanish pulmonologists. As early as 1999 the association's scientific committee, at the request of the directors, proposed an organizational structure through which SEPAR would promote research. The proposal led to the creation in 2001 of the Breathe Research Center (Centro Respira de Investigación). The work carried out by this entity later enabled 18 institutions, comprising 69 research groups with more than 500 researchers (mostly SEPAR members) to form the Breathe Network (Red Respira)—a thematic network for cooperative research (RTIC C03/11) at the Carlos III Health Institute. Activity carried out by the Breathe Network from 2003 to 2006 under the direction of Àlvar Agustí made it possible at the end of 2007 to approve, within the new structure of the Network of Centers for Biomedical Research (CIBER), the CIBER for Respiratory Diseases (CibeRes).² In short, the CibeRes (a research consortium with its own legal standing at the Carlos III Health Institute) is largely a product of the

Breathe Network, which in turn is the result of work carried out by the Breathe Research Center, a strategic initiative of SEPAR. Recalling the sequence in which these events happened is an exercise that is in keeping with our values and an act of gratitude.

During the same period, in 2004, SEPAR started its Integrated Research Programs: a coordinated grouping of lines of investigation, each to be implemented through specific scientific projects, with the medium-term objective of producing scientific knowledge on complementary aspects of an important health problem. To achieve the goals of these programs (produce knowledge, transfer it to clinical practice, and evaluate the adequacy of the transfer), all are to include the following lines of inquiry: basic, or translational, research; clinical-epidemiological, or operational research; technological innovation/clinical management; and evaluative research, regarding standards and their transfer. To date, SEPAR's board of directors, in response to proposals by the scientific research committee, has approved 6 such programs—on asthma, chronic obstructive pulmonary disease, sleep apnea-hypopnea syndrome, lower airway infection, tuberculosis, and diffuse

Dates and Important Events in the Recent History of Spanish Research on Respiratory Disease

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| 1999 | The Scientific Committee of the Spanish Society of Pulmonology and Thoracic Surgery (SEPAR) proposed the development of an entity to promote research |
| 2001 | The Breathe Research Center was conceived |
| 2002 | May: the Official State Bulletin (BOE) of Spain announced a meeting of the thematic networks for cooperative research (RTIC), of the Carlos III Health Institute |
| 2003 | The Breathe Network was launched (RTIC C03/11, of the Carlos III Health Institute) |
| 2004 | The Integrated Research Programs of SEPAR were conceived Post-residency research (Spanish Ministry of Health and Consumer Affairs) were begun National Plan for Scientific Research, Technological Development and Innovation 2004-2007 (Spanish Ministry of Education and Science) were organized |
| 2005 | SEPAR approves a new charter The Cimera Foundation (the International Center for Advanced Respiratory Medicine, of the government of the Balearic Islands) was launched |
| 2006 | Accreditation for the Breathe Network (at the Carlos III Health Institute) was extended |
| 2007 | The Network of Centers for Biomedical Research on Respiratory Diseases (CibeRes) was begun |
| 2008 | SEPAR's research strategy was designed |

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interstitial pulmonary disease—which will soon undergo medium-term evaluation.

The Integrated Research Program model is currently being analyzed and reviewed by the SEPAR board of directors as a new approach to research. Not all these programs have reached the same level of implementation, development, and participation; nevertheless, they offer opportunities we must take note of. The programs constitute a far-reaching and proactive SEPAR strategy for addressing important problems and offer a framework for research that is appropriate for all areas of SEPAR, stimulating cooperation and synergy across the profession. They facilitate cooperation with other research structures, especially with CibeRes groups, and they are of interest to the Spanish government, the pharmaceutical industry, and other stakeholders.

In this context, an event that we consider of particular importance was the signing on April 17, 2008, of the Framework Agreement for scientific collaboration between SEPAR and the CibeRes. This agreement has constructed a framework for collaboration aimed at achieving scientific and technological advances to further improve respiratory health care. Together with some general commitments, SEPAR and the CibeRes will implement the Framework Agreement through the signing of specific sub-agreements (addenda).³ The 2008 addenda concerned 2 important initiatives: *a*) setting up a multicenter Spanish lung tissue biobank coordinated by and compliant with the requirements stipulated in the Law for Biomedical Research of July 2007,⁴ and *b*) the development of the Platform of Randomized Controlled Trials. SEPAR and the CibeRes clearly share scientific objectives, and the possibilities for cooperation and synergy are numerous. The objective of the Framework Agreement is to facilitate and strengthen those common objectives. In fact, the CibeRes is organized around 9 research programs (on asthma, pulmonary fibrosis, chronic obstructive pulmonary disease, cancer, new therapeutic targets, sleep apnea syndrome, acute lung injury, pneumonia and sepsis of respiratory origin, and tuberculosis) in a manner that is very similar to the structure of SEPAR's Integrated Research Programs.⁵ This similarity facilitates interaction.

It is often said that there are conceptual, personal, institutional, and sociopolitical issues that motivate research, and these motivations are important. Accordingly, in Spain both the National Plan for Scientific Research, Technological Development and Innovation, and the INGENIO Plan are intended to potentiate the activities under their compass and have provided a research and development budget for 2015 of 2.5% of the gross national product and a research staff of 8% of the active population.⁶ The international projection of Spanish research in the area of respiratory and thoracic disease is another objective in and of itself, centered on objective and tangible production of valid knowledge that has high scientific, professional, and social impact. The driving force of CibeRes in the development of high quality research on respiratory diseases in Spain and the inclusion of chronic respiratory disease in the Seventh Framework Agreement (2006-2013) of the European Union provide 2 clear opportunities at this time. The Seventh Framework is organized into 4 programs focused on cooperation, ideas, people, and capacities. The

proposed budget exceeds €50 000 million, which is an average annual increase of 60% compared with the budget for the Sixth Framework Agreement.⁷

Particularly noteworthy is the training of young Spanish respiratory medicine specialists and thoracic surgeons and their gradual incorporation into research teams, a process in which SEPAR plays an important role through its working groups and the Integrated Research Programs. SEPAR also contributes through periodic provision of working grants and funding opportunities for national and international research, through specific initiatives such as the SEPAR-PRESTIGE project, and through diverse educational and training activities made possible by the SEPAR board of director's various advisory committees.

We foresee that having a research career will become possible in the next few years and that individuals will belong to the Spanish national health care system or other institutions in the capacity of researchers. A composite model to support research careers has already been developed for Spain by the Carlos III Health Institute, through funding for predoctoral training in health research, the Sara Borrell postdoctoral contracts for further study, the Rio Hortega training and research contracts for personnel with specialized training, and the Miguel Servet contracts for the incorporation of researchers into the national health-care system.

In this aspect, SEPAR and the CibeRes should also find clear opportunities for synergy and cooperation. The objectives of the CibeRes educational program are to promote integrated basic and clinical knowledge acquisition, encourage interest in research on respiratory diseases among young professionals during their medical training, and facilitate interaction and mobility among the CibeRes teams.⁵ SEPAR, in turn, in its recently approved research plan,¹ has decisively chosen a model of continuing professional development known as the integral curriculum plan. That model focuses on training and evaluation to assure "competence" in fundamental aspects of respiratory medicine, such as research. Continuing professional development is intended to be a mechanism that affords a range of ways to improve, including a program of skills development, a tutorial system, structuring of curriculum vitae and, where needed, the issuance of degrees and certifications.

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