Achievements of ESAM over the past years (March 2011):

Representing the global community of aerospace medicine professionals in Europe:

- -Membership of probably all existing associations of all European countries: 45 associations and 4000 professionals
- -Promoting to start up a national association in countries without associations (Portugal, Luxemburg, Estonia, Latvia, Lithuania, Iceland...)
- -to maintain our credibility and political influence it is absolutely necessary to keep all existing European associations as members

<u>Political recognition</u>:

- -Membership of the EASA SSCC (rulemaking steering committee of industry and professionals) representing all European aviation medicine professionals (is the only medical position in this group)
- -Membership in the 3 EASA ESSI groups for safety related initiatives (helicopters, commercial aviation and general aviation groups)
- -asked to participate in the EASA NPA review of the medical criteria for flight crew and cabin crew which lead to seriously changed rules for LAPL(*) in the EASA Opinion to the EU Commission, and in the elaboration of future ATCO medical criteria (participation in expert groups of EUROCONTROL and EASA)
- -Representing the AME's in the advisory medical group of the rulemaking directorate of EASA
- -ESAM should and probably will be invited to take part in the new rulemaking task which starts end 2011 to update the medical criteria for class 1 & 2 (the last amendment of JAA is 5 years old but was used as the basis for the new EASA class 1 & 2) -in order to keep our strong position we have to represent a maximum of European associations (European Air Sports represent 650.000 private pilots of all EU countries!)

Collaboration on the global international aerospace medicine scene:

- -Strong relations have been build up with AsMA, with mutual representation and links for info, and with a view to organise a common congress in 2016 in Europe -relations with the IAASM, also by linking our GA with the ICASM congresses held in Europe
- -we will continue to search official recognition by ICAO as a regional society and enabled to take part in international medical working groups

Training in aviation medicine:

- -Elaboration of a renewed syllabus for basic and advanced courses in aviation medicine (available as a booklet) by an ESAM working group
- -the content will have to be discussed with EASA when rules will be set up regarding training, and incorporated into the competence based model from ICAO -certification by ESAM of training courses is envisaged for the future

Scientific work (Advisory board):

- -a first multi-national specialist conference was organised which made a very large number of joint comments on the NPA about flight crew certification
- -Position papers are made or in progress (flight time limitations management, insulin in medical certification ...)
- -a Specialist group for Space medicine started up
- -2 ECAM's (European Congresses) have been held (in Budapest and Athens) and one is planned in London for 2012
- -The specialist conference groups, used for comments on the NPA, will assist EASA to elaborate the revised European Manual of Aviation medicine
- -in order to build up a truly pan-European scientific approach to aerospace medicine issues we need the know-how of all existing national associations specialists

(*) changes to the proposed LAPL medical:

- -intervals back to the ICAO class 2 standards
- -medical questionnaire based on the JAA/EASA model for class 1 & 2 without embedded criteria
- -medical criteria completely reviewed and now similar to class 2 (except for vision and cardiology)
- -GMP's are now establishing medical certificates (and not just countersigning a declaration by the applicant): this is only allowed when they have access to the **full** medical file of the applicant (in practice the UK only) and when they apply (and thus know) the LAPL medical certification rules
- -no limitations (except existing glasses) or specialist referral by a GMP
- -auditing of GMP's by the Authority is now possible

It is a fragile compromise with European Air Sports requests, with EASA support, and we need all the European medical associations in ESAM to follow up and where necessary influence (on scientific grounds and experience) possible developments in this highly politically influenced area.