LETTER FROM ROME.....

Competency in occupational health

Work is unanimously considered a major health determinant. Knowledge of people's working conditions greatly contributes to the recognition and prevention of damages to their health and to health promotion. Following in the footsteps of Ramazzini and Thackrah, the study of the complex web of events linking people's work history to their disease status has over the centuries produced a systematic body of scientific knowledge—occupational medicine (OM)—which has received academic and professional recognition worldwide. Medical societies, university programmes, and national and international governmental agencies have been established in the field of occupational health. OM enjoys contributions from different medical specialties and other scientific disciplines as well. Today, working life appears to affect, although less obviously than before, a very wide array of health conditions. Discovering, contrasting, investigating, and managing those links between work and ill health require, more than ever, involvement of specialists with relevant experience, defined specific training, and constant updating of knowledge and skills through continuing professional development.

These are the arguments on which representatives of 17 000 Italian occupational and preventive health professionals based their serious concern regarding an Italian Parliament and Government decision to change the certification and accreditation rules for being a "competent physician" in occupational health care. According to law 626 of 1994, framed within the European regulations, specific training in occupational medicine was considered a prerequisite to serve as occupational health physicians. However, early this year, the Italian Parliament approved a law on "Urgent Measures for Health Professionals" unexpectedly containing an article enabling specialists in forensic medicine, in addition to those in preventive medicine and medical hygiene, to serve as "competent physicians" in occupational health in both public and private companies. The International Commission on Occupational Health (ICOH), in its mid-term meeting in Rome (Italy) in March this year, expressed concern at this development and officially offered its support to the Italian colleagues, reaffirming that "anyone who deals with matters related to health and safety at the workplace must have undergone the appropriate education and practical training".

Italian OM physicians recognise areas of overlapping competencies with other medical specialties. If, however, the requirements for occupational health practice are diluted, and the unique contribution of occupational medicine reduced, two major consequences may ensue: the failure to identify and address appropriately the novel health problems caused by the dramatically changing work type and organisation (and, hence, lifestyle) in developed societies; and the inability to assist effectively developing societies with the management of "traditional" types of problems.

While accepting the need for collaboration among disciplines to achieve the common goal of reduction and prevention of occupational diseases and ill health, in particular, occupational, environmental, and preventive medicine, we hope that *OEM* readers will support our contention that those deemed competent to practise occupational health must be suitably trained and qualified in the field.

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