ESAM Annual Report 2015.

ESAM is the only Pan-European Society of Aerospace Medicine.

ESAM is an independent, open Society.

**Background.**
Since its formalisation in 2006, ESAM has continued to grow. We are a scientific society using evidence based medicine, science, knowledge and experience to enhance the performance, safety, health and health preservation in people who fly or are in space. This includes Pilots, Aircrew, ATCOs and passengers. Over the past nine years we have increased our interactions with many organisations, both local and global.

ESAM is an umbrella organisation of Aeromedical examiners and experts across Europe. It is a not for profit society, governed by statutes and EU law and registered in Germany.

**ESAM IS NOT A UNION.**
**ESAM IS NOT A REGULATOR.**

Currently ESAM has 46 supporting member associations representing 4000 professionals and 1102 active AMEs from 34 countries. There is interest from other associations to become active members.

ESAM is directed by the Executive Committee (EC) under the supervision of the elected President. The EC is elected by the member associations every two years. The member associations elect the President-Elect who takes the office of President the following year. In 2015 Prof. Anthony Wagstaff was elected President-Elect.

The Advisory Board (AB) acts to provide advice, guidance and opinion for the EC. Each member association may appoint one member to the AB in accordance with local procedure. The AB draws its output from the expert resources of its associations. The output of the AB is managed by the Advisory Board Committee (ABC) and forwarded to the EC. The ABC is appointed by the EC in accordance with the statutes.

The other elected administrators include the two auditors and the two members of the Nominations Committee. Experts are also co-opted to the EC and the ABC, subject to requirement.

A permanent office of AsMA Liaison Officer has been active for many years and has served ESAM with distinction.

ESAM is the only medical body that can represent at EASA.

**A synopsis of the year 2015:**
This has been a very busy and important year for ESAM. Details of the events are available on our website at [www.esam.aero](http://www.esam.aero)

**EC-ABC Meetings:**
- **12th April** University Hospital, Köln
- **18th July** Amsterdam
- **20th September** (ICASM), Oxford

**ABC Meetings:**
- Detailed in ABC Report Page 5.

Fly Safe, Fly Well programme.
ESAM continued to work on the programme in 2015. Following the success of the European Congress of Aerospace Medicine (ECAM) held in Bucharest in September 2014 exploring the topic.

Over the year ESAM met with the European Association of Aviation Psychologists (EAAP), initially in Schiphol and then with representatives from the European Cockpit Association (ECA) in Brussels, culminating in a Joint Statement which I have attached to this document.

The nature and evidence of aeromedical pathology was explored and debated. The notion of the involvement of “non-medical” stakeholders in the decision making process was debated. The meeting culminated in recommending further action and interaction with stakeholders to advance the concept of Fly Safe, Fly Well.

Below is a copy of the Joint Statement of the ESAM ECA EAAP consultation process. The full document is available on line on our website.

Joint statement by the European Society of Aerospace Medicine (ESAM), the European Association for Aviation Psychology (EAAP) and the European Cockpit Association (ECA) on the Aerospace Medical Association (AsMA) Pilot Mental Health: Expert Working Group Recommendations – Revised 2015

The three organisations have individually, and jointly, reviewed the latest AsMA pilot mental health recommendations of Sept. 2015 and wish to endorse them as a valuable guidance for assessing pilot health, and – more generally – for raising awareness of mental health issues.

This endorsement includes the following observations:

GENERAL

- Guidelines like the ones from AsMA are relevant to any safety critical occupation, and pilots should not be seen to have a greater risk of mental health issue than comparable professionals.
- Safe pilot performance during a long, healthy and fulfilling career should be the joint aim of professional pilots, aeromedical and psychological specialists, airline managers, and authorities. For the pilot, in addition to adequate lifestyle, active support from company, peers, family and relationships are known to positively contribute to these aims. Further developing and maintaining career relevant knowledge and flying competence, and timely raising of any possibly performance- or safety-relevant health issue or circumstance are among the responsibilities of the individual pilot. Health and mental fitness issues may arise during the professional career. When happening, recognition and acceptance are the first step in solving them. Any raising of such issues or request for assistance in this regard by the pilot should be taken seriously and be positively appreciated and reacted upon by the pilot’s environment, e.g. airline management, company’s occupational health service, peers, regulators, and aeromedical examiner (AME).

PILOT HEALTH ASSESSMENT
• A professional relationship, based on openness and mutual trust, between pilot and AME is the cornerstone of any robust health assessment. This is also reflected in the joint ESAM-EAAP-ECA paper on the Pilot-AME relationship (see Appendix 1).

• Mental health should be seen as an integral part of the overall health and wellbeing of any professional.

• A comprehensive psychological/psychiatric mental health evaluation as part of the routine aeromedical assessment is neither productive nor cost effective and is therefore not warranted. However, addressing and discussing mental health and psychosocial stress factors during the routine aero-medical assessments to gain insight into the circumstances of the pilot is an important element of a medical examination. It is recommended that the AME should use the support of a clinical psychologist or psychiatrist with expertise in aviation any time this discussion raises concerns about flight safety.

CONFIDENTIALITY OF PILOT HEALTH ASSESSMENT

• It needs to be understood that in Europe the application of a universal principle that the risk to public safety may override the duty of confidentiality is problematic, given the different national legal systems and cultural approaches. However, maintaining confidentiality of medical information is an important basis for an open and trusted relationship between pilot and AME.

• In this context, it is important to stress that discussion and information disclosed to AMEs, that does not directly impact on fitness to fly, shall remain confidential between pilots and AMEs in any event.

SAFETY MANAGEMENT

• ESAM, EAAP and ECA give strong support to the acknowledgement of the value of pilot Peer Support Programmes. Such programmes have proven successful in enhancing safety and addressing health-related issues, while minimising career jeopardy and the possible stigma of seeking assistance. Many European examples of such programmes exist and can serve as best practice (examples see appendix 2).

• In this context, it is important to stress that the stigmatisation of mental health issues should be avoided, which in turn would facilitate disclosure by the individuals concerned.

• An initial psychological evaluation of pilots at pre-employment stage in accordance with internationally accepted standards is appropriate.

• Aviation industry management processes and procedures have an important role in fostering an open safety and reporting culture, based on ‘Just Culture’ principles (see below link to the European Just Culture Declaration). In particular, some types of ‘atypical’ aircrew employment can be an impediment to such a culture, and discourage individuals to seek support.

AsMA. 86th AsMA meeting. Orlando.

Ries Simons, yet again, created an excellent lunchtime meeting which generated a lot of discussion and debate. He set up four presentations that were co-chaired by Dr. Kevin Herbert and myself. The presentations were:

1. Prof. Henri MAROTTE: Physiological aspects of parabolic and suborbital flights, and aptitude of the passengers.
2. Dr. Claudia STERN: First Direct Return of a European Astronaut.
4. Dr. Ries SIMONS: Impact of Psychosocial stress on flight safety.

They are available on our website. www.esam.aero
The ESAM EC-ABC and AsMA ExCom business lunch expanded this year with the presence of members from the Norwegian Society. In fact, Dr. Trond Erik Strand, Medical Assessor at the Norwegian CAA flew in for the meeting and left for Oslo immediately afterwards.

The main topic of the meeting revolved around increasing bonds between ESAM and AsMA, but in particular, the collaboration to make ECAM 5 in Oslo a success, AsMA has agreed to support the venture of a shared meeting in Europe with ECAM and the Norwegian Aerospace Medicine Association (NAMA) A memorandum of understanding was drawn up following this meeting. An Organising Committee, Scientific Committee and Programme Committee have been formed and are acting on the project, each comprising two representatives from each of the three organisations.

**Germanwings Task Force.**

ESAM was invited to present to the GWTF, and a presentation was made by the President. Representation was also made by ESAM members at the Medical Fitness Workshop carried out in Cologne, Germany in early December 2015. The meeting included members from stakeholders across the aviation industry. It addressed the six recommendations drawn up in the EASA report. [www.easa.europa.eu](http://www.easa.europa.eu)

**Paolo Tosco Award**

ESAM created the Paolo Tosco Award to be presented to the best scientific paper delivered at the ECAM. It was named in honour of Col. Dr. Paolo Tosco, former Secretary General ESAM who sadly passed away in 2012. The first recipient of the Award was Dr. René Maire, Switzerland for his work on cardiological risk stratification in single commercial pilot operations.

ESAM continues to provide Aeromedical Expert Representatives to an increasing number of aviation bodies.

**ICASM 2015.**

ESAM was well represented as delegates at the ICASM at Oxford, UK in September 2015. This was a highly successful Congress.

**9th General Assembly**

This was held prior to the ICASM and fourteen member associations were present with proxies from two other associations that could not attend.

One item considered at the GA was the proposal for the creation of an award, to be called a ‘Chevalier of ESAM’, (a historic title which denotes a combination of chivalry and public service). This award would be made for exceptional contribution to the activities of ESAM. The proposed designs created by Seppe Celis for the award were shown to Assembly. The final details and the mechanism for the award of this honour have not been completed. However, there was unanimous acceptance of the concept of such an award, by those attending the GA.
Current ESAM representation includes:

**AsMA:**
- ESAM representative at AsMA: Prof. Hans Pongratz
- AsMA Vice President: Roland Vermeiren

**EASA:**
- SSCC Representative: Roland Vermeiren

**ESSI Representatives:**
- ECAST: Lars Tjensvoll
- EGAST: Vacant
- EHEST: Anthony Wagstaff
- EHFAG: Ries Simons

**SubSSCC Representatives:**
- Medical Expert Group: Kevin Herbert
- Flight Standards Sub SSCC: Vincent Feuille
- Aerodromes Sub SSCC: Vacant
- General Aviation Sub SSCC: Declan Maher
- ATM Sub SSCC: Roland Vermeiren

ESAM also presented at the following meetings in 2015:

- World Air Sports Games Medical Symposium, Dubai, UAE.
- National Association meetings of AMEs

References:

http://esam.aero
www.easa.europa.eu

Dr. Declan Maher
Secretary General,
ESAM.
In 2015 the Advisory Board Committee (ABC) had a meeting on 30 January 2015 (Davos Hospital) and joint meetings with the Executive Committee of ESAM on 11 April 2015 (University Hospital Cologne), 22 September (Oxford, UK). The chair of the ABC attended the EC meeting on 18 July 2015 (Amsterdam).

In 2015, the Advisory Board Committee (ABC) consisted of Ries Simons (chair), Stefan Drechsel (secretary), Hedi Ranfelt (vice-chair), and co-opted members René Maire, Claudia Stern, Martin Hudson, René Germa, Alexander Usachev, and Roland Vermeiren (liaison with SSCC). In 2015 Jean Francois Paris resigned as co-opted member and was replaced by Olivier Manen.

In 2015 the ABC has worked on age limits of commercial (single) pilot OPS; contributions to ESAM’s Fly Safe Fly Well initiative; colour assessment and diagnosis (CAD test); suborbital flights: medical requirements pilots and passengers; and guidance material on how to assess medications in aircrew / ATCOs. A recommendation and Algorithm was made for the risk assessment of class 1 pilots after coronary artery event, PTCA, or CABG into a low and a higher risk category. This recommendation will be published as a position paper on the ESAM website.

The ABC has proposed a research program to European Commercial Aviation Safety Team (ECAST): ‘Effects of psychosocial and job stresses on pilot’s performance and alertness: identification and prevention’

The ABC made preparations for the ESAM Lunch meeting at AsMA meeting ‘The black holes of aerospace medicine…..how can we find them?’ A symposium on optimal support of our space and aircraft pilots to fly safe and fly well. Speakers were Prof. Henri Marotte (France), Dr. Claudia Stern (ABC member, Germany), Dr. Vivianne Fonne (Norway), and Dr. Ries Simons (ABC member, Netherlands).

The ABC initiated the contacts and prepared the inaugural meeting for the collaboration between ESAM and EAAP (European Association of Aviation Psychology) on the 9th of June 2015 at Schiphol Amsterdam Airport. The aim of this collaboration is to improve the identification and prevention of mental health problems of pilots and ATCOs. The AB as well as the EC is enthusiastically involved in this collaboration. As a first achievement, ESAM, EAAP, and ECA (European Cockpit Association) have formed a working group in which EC and ABC members are representing ESAM. This group discussed the preliminary proposals of EASA concerning the recommendations of the Germanwings Task Force. Because a main conclusion was that trust between the pilot and AME is a prerequisite for a high quality aeromedical evaluation, the group produced a brochure aimed at building trust on the side of the pilots as well as on the side of the AMEs. Further collaboration will be aimed at stimulating the development and implementation of Peer Support Groups in Europe. In this context, contact has been made with the Mayday Foundation (Germany).

An ABC-member gave a presentation on alcohol and drugs prevention and screening at the Aircrew Medical Fitness workshop, which was organised by EASA on 7 and 8 December 2015. A presentation on Effects of pilot’s social and work stresses on flight safety was given at the medical symposium of the World Air Games in Dubai on 4 December 2015.

Dr. Ries Simons,
Chair,
Advisory Board Committee,
ESAM.