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PAHO-COORDINATED PATHOLOGY TRAINING PROGRAM
IN LATIN AMERICA

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1. **Background**

   It has long been evident that the training of Latin American pathologists needs strengthening. In the period 1966-1973, PAHO awarded 8,619 fellowships; only 38 or 0.5 percent of them went to pathology trainees. As shown in the slide, these 38 grantees received their training in the United States (15); Europe--France, UK, Spain, West Germany--(8); Colombia (10); Jamaica (12); Mexico (2); and in Argentina, Brazil, Canada, Guatemala, Uganda, and Venezuela (1).

   A 1965 survey of 27 pathology departments in general or university teaching hospitals in Argentina, Brazil, Chile, Colombia, Guatemala, Mexico, Peru, and Venezuela showed the following:

   - With very few exceptions, the concept of clinical pathology did not exist in the hospitals.

   - Almost all the departments were short on standard pathology textbooks and journals.

   - Although records of 210,000 postmortem and 600,000 surgical pathology examinations were kept on file in these hospitals, the results of these procedures could not be properly studied because they had not been correctly codified. The same was true of the 14,000 autopsies performed annually and the 140,000 surgical pathology specimens examined each year in pathology departments.

   - Most of the hospitals suffered from a critical shortage of qualified histotechnologists. The few Latin American schools that were training such personnel were under financial strain, some to such an extent that their training programs were endangered.

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2. **Approach**

On the basis of such findings, the Pan American Health Organization and several interested pathology bodies have been striving to improve pathology training and practice in Latin America. The variety of problems encountered and the scarcity of textbooks, journals, and audiovisual materials essential to any pathology training program, have prompted us to act along the following lines.

a) **Provision of teaching books**

As a result of meetings with leading Latin American pathologists, members of the American Society of Clinical Pathology have begun donating pathology textbooks written not more than 6 years ago to various Latin American pathology departments to build up their basic specialized reference collections. The Pan American Health Organization receives the books, studies their suitability for pathology training programs, catalog them, and finally forward them to the countries of the Region.

Through its own textbook program, PAHO has also begun distributing to medical students at low cost several pathology textbooks written by Latin American authors.

b) **Role of the PAHO Regional Library of Medicine and the Health Sciences**

The distribution of both current issues and bound volumes of past numbers of pathology journals in Latin America has made rapid progress, and the PAHO Regional Library of Medicine and the Health Sciences (RLM) in São Paulo has been the focal point of this effort. Because such journals will remain in short supply in Latin America for some time, however, a feasibility study is now under way to determine whether the journal article abstracts prepared by pathology residents in the United States and other countries (Pathology Journal Clubs) can be circulated to pathology departments in Latin America.

With the development of RLM's MEDLINE service, first in Brazil and later throughout the rest of Latin America, pathologists and pathology
residents who require specialized bibliographies in their field will have almost instantaneous access to the hundreds of thousands of citations in the MEDLINE data base. RLM is now translating into Portuguese medical subject headings for physicians who do not read English.

c) **Visual aids**

The practice of exchanging and distributing 35-mm color pathology transparencies began in Brazil, Ecuador, and Mexico. The National Medical Audiovisual Center in Atlanta, Georgia, a part of the U.S. Public Health Service, has duplicated many of its thousands of transparencies and other audiovisual materials for distribution in Latin America. This Center's efforts in Latin America will, it is hoped, gradually be taken over by the new audiovisual center at RLM.

d) **Training of pathologists in Latin America**

Because many Latin American pathology residents and investigators want to train and later tend to settle in the United States, efforts are under way to make known the existence of high-quality pathology training programs in certain Latin American countries and to assign fellows and grantees to such programs.

In 1973 a comprehensive pathology training program was organized in Mexico at the request of that country's Secretariat of Health, Social Security Administration, and National University. The heart of this scheme is a 3-year residency program in clinical pathology but it also includes shorter, more specialized courses and training for laboratory technicians. Promotion of this training program has been started to recruit suitable candidates.

As a result of a national survey of pathology resources organized by PAHO in 1972, a 2-year postgraduate training program in pathology was established in Ecuador in March 1974. The survey had been undertaken at the request of Ecuador's Association of Medical Schools and had the support of the national health authorities and the cooperation of the professors of pathology in the medical schools at Cuenca, Guayaquil, and Quito.
This program should have doubled the number of pathologists in Ecuador by 1976.

By incorporating instruction in not only anatomic pathology but also bacteriology, hematology, and biochemistry, it should help overcome the traditional emphasis on morphology that has burdened so many pathology training programs in Latin America. The 1972 survey in Ecuador also resulted in the development of a training program for laboratory technicians in that country. The goal of this program is to enhance the country's capability in pathologic diagnosis.

e) Intersociety scientific exchange programs

At the annual meeting of the American Society of Clinical Pathology in October 1974, for the first time a half-day session on tropical pathology will be held under the full responsibility of Latin American pathologists. Efforts are also being made to foster closer cooperation among various pathology societies in Latin America. In Brazil, for instance, the Brazilian Society of Pathologists and the Brazilian Society of Clinical Pathologists will soon begin holding joint scientific sessions at their yearly meetings. The purpose of this endeavor is to bridge the gap between clinical laboratory and morbid anatomy.

PAHO has been represented at several national and regional pathology society meetings in Latin America, and through such representation has become better aware of the problems facing Latin American physicians in this specialty and has promoted its training and research programs.

f) Standardization of pathology data

1. Protocols

To make better use of autopsies and surgical pathology material, protocols have been developed and have been tested in Brazil, Colombia, and Ecuador. Several requests have been received at PAHO for provision of a child autopsy protocol, and the Organization has been collaborating closely with the American Pediatric Pathology Club in formulating a suitable one.
ii. Nomenclature and coding manuals

Since 1962, the World Health Organization has issued 10 publications in English, French, and Spanish dealing with standardized tumor nomenclature. Each publication is accompanied by a collection of 35-mm transparencies for reference and teaching purposes; many hundreds of these publications and slides have already been distributed in Latin America.

PAHO in 1972 published the Portuguese version of the American Cancer Society's Manual of Tumor Nomenclature and thereafter began making the manual available without charge to pathologists in Brazil and Portugal. A Spanish version is now available and will be sent to Spanish-speaking pathologists in Latin America. Several workshops have been organized in various countries to explain the practical use of the manual.

Thanks to the College of American Pathologists, free copies of the Systematized Nomenclature of Pathology have been provided to pathology laboratories in Brazil, Ecuador, Mexico, and Peru. So far this publication exists only in English, though it is hoped that eventually it will be translated into Spanish and Portuguese.

Practical demonstrations of the use of this pathology coding system have been conducted in Brazil, Ecuador, Mexico, Peru, and Venezuela for interested specialists. The American Society of Clinical Pathology, the American Cancer Society, the International Academy of Pathology, the U.S. Armed Forces Institute of Pathology, and the Department of Pathology of the U.S. National Cancer Institute have helped provide support for these efforts.

iii. Histotechnology Manual

Finally, PAHO has edited a simplified Histotechnology Manual in collaboration with the U.S. Armed Forces Institute of Pathology. It was used for the first time last week in a new short course in histotechnology given in Belém, Brazil. Plans are to expand it, taking into account comments and suggestions made.
3. Conclusions

Within its available resources PAHO has responded to the needs and requests made by Latin American countries and has started coordinating pathology training programs. More pathologists and technologists must still be trained to staff general hospitals of the Ministry of Health and Social Security System.

The integration of pathologists in the health team will:

a) improve diagnosis and the quality of vital statistics;

b) give support to epidemiologic studies of prevailing diseases in the community;

c) permit the establishment of quality control programs in laboratory services;

d) provide training opportunities for new pathologists;

e) generate research ideas or projects geared to the solution of health problems.

REFERENCES

