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European Residents Exchange Scheme – new centres needed

Editor – We would like to take the opportunity to remind readers of *Clinical Medicine* about the European Residents Exchange Scheme, which has been running a highly successful exchange programme since 1977. The programme has enabled trainee doctors, who are usually within their first four years of registration, to undertake a period of 6–12 months of their training in other European centres. By the end of 2004, approximately 120 trainees had taken part in this successful scheme. The scheme works on a two-way basis, giving an opportunity to European doctors to come and work in the UK, as well as British doctors to work in a European country, and thereby allows young doctors to develop a critical knowledge of other healthcare systems and different ways of working.

The ongoing success of the scheme has resulted in it being adopted as the official exchange programme of the European Federation of Internal Medicine (EFIM), and the scheme has been described in a number of articles in the medical literature.^{1–5} Currently, only a limited number of centres take part in the scheme and potential exchanges have to be nominated by the scheme representative at their local centre.

The Steering Committee is chaired by Professor Jurg Schifferli, Universitatsspital Basle, and meets on an annual basis, in order to plan partnerships for future exchanges. The Steering Committee is keen to consider new centres in the UK as

potential points of exchange and interested parties should contact Professor Schifferli directly (j.schifferli@unibas.ch). We appreciate that training in the UK is becoming more formalised, but still consider this opportunity to be a very positive part of the trainees' educational experience and look forward to it continuing in the future.

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Clinical & Scientific letters

Letters not directly related to articles published in *Clinical Medicine* and presenting unpublished original data should be submitted for publication in this section. Clinical and scientific letters should not exceed 500 words and may include one table and up to five references.

Survey of flexible working amongst specialist registrars and consultants in respiratory medicine in the UK

There is currently a rapid and progressive change in the sex distribution within the medical workforce at all levels.¹ In addition, there is an increased tendency for senior consultants to consider early retirement.² In 2002 the British Thoracic Society formed a working party to examine issues around flexible training for specialist registrars and flexible working for consultants (defined as working less than full time or maximum part time), and between January and March 2003, three separate cross-sectional questionnaire surveys were performed of work patterns in all specialist registrars, consultants <50 years, and consultants ≥50 years in respiratory medicine in the UK.

Specialist registrar survey

The response rate, age, sex and working pattern are shown in Table 1. All those training flexibly (all female) had started in full-time training and 10/18 (55%) intended to continue to train flexibly, whereas 8/18 (44%) reported an intention to return to training full time. Of those training full time, 178/215 (82.7%) (M = 135, F = 43) reported having no intentions to train flexibly, 2/215 (1%) (M = 2, F = 0) made no comment and 35/215 (16.3%) were considering training flexibly in the future (3 (M = 1, F = 2)) declaring this as possible, 20 (M = 4, F = 16) probable and 12 (M = 1, F = 11) definite).