Article reprinted from other sources

Utility of regular medical examinations of occupational divers
[Abstract]
Sames C, Gorman D, Mitchell SJ, Gamble G

The utility of regular medical fitness-for-diving examinations of occupational divers is unknown. The aim of this audit was to investigate the impact on the employment of occupational divers of a five-yearly medical examination and an annual health surveillance questionnaire administered in intervening years. The medical records of all New Zealand occupational divers registered with the Department of Labour for at least five years were audited (n = 336). Each record included at least two full medical examinations (mean spacing of 5.6 years). An impact on career was defined as the diver being issued with either a conditional certificate of fitness or being graded as temporarily or permanently unfit for diving. The means by which the relevant medical issue was identified was recorded. Ten (3%) of 336 divers had an assessment outcome, that had a career impact. One was considered permanently unfit, four were temporarily unfit, and five were issued with conditional certification. Two were identified by respiratory function testing and eight by way of their responses to the questionnaire; none was found by the medical interview and examination process. The questionnaire system did not ‘miss’ any divers who developed a critically important health problem, and detected most of those with less important problems. Five-yearly medical examinations have a low detection rate for important health problems, but remain useful for discussion of risk understanding, acceptance and mitigation.

Naval Health Services, Royal New Zealand Navy, Diving Medical Directorate to the New Zealand Department of Labour, and School of Medicine of the University of Auckland, Auckland, New Zealand


Commentary

At each pre-dive risk assessment working divers have the duty to report any recent illness or injury that might affect their fitness to dive. Examination by a medical practitioner (‘approved’ and audited by the relevant diving jurisdiction) is needed periodically to assess fitness to return to diving after illness or injury but is more commonly met as an ‘annual diving-medical examination’. It is refreshing that this paper from New Zealand provides evidence to challenge the comfort of that universal tradition. Potential application of the five-yearly medical examinations in New Zealand to other jurisdictions (as determined by their maritime boundaries or by the ‘flag’ of diving support vessels) should next be assessed where there are some thousands of working divers, many of whom may be exposed to a great range of occupational hazards.

Such a review needs to include the extent to which an annual questionnaire can or cannot recognise and monitor the consequences of exposure to diving hazards, e.g., hearing loss, juxta-articular necrosis, welding-fume exposure or exposure to in-water contaminants, including carcinogens, acid muds and complex, dissolved hydrocarbons. Perhaps a central expert is best placed to evaluate the level of risk determined by occupational hygienists and others, and to recommend the need for medical surveillance of the individual. Additionally, what checks need to be recorded on the physical strength and endurance that each diver needs to maintain for an emergency out-of-bell rescue? In jurisdictions in which there is no statutory upper age limit for working divers, should the full assessment of cognitive and cardio-vascular factors by an approved doctor become more frequent with the diver’s increasing age?

The minimal training required by a medical examiner of divers is determined by the relevant national authority. Many national authorities no longer approve ‘overseas’ doctors because these cannot be held legally accountable for errors they might make from within another jurisdiction. Training requirements differ around the world and some nations also require medical examiners to have refresher training plus minimal annual experience to maintain validation. International training objectives, with a greater definition of detail, exist to cover potential gaps in sparse national regulations but, though required by some international diving contractors, these are not applied universally.

The foundation has now been laid for introducing an effective change for divers but, for international acceptance, more may be needed on the medical surveillance of exposure to hazards at work.

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Key words
Occupational diving, diving at work, health surveillance, occupational health, fitness to dive, abstracts
SPUMS notices and news

South Pacific Underwater Medicine Society Diploma of Diving and Hyperbaric Medicine

Requirements for candidates (updated October 2008)

In order for the Diploma of Diving and Hyperbaric Medicine to be awarded by the Society, the candidate must comply with the following conditions:

1. The candidate must be medically qualified, and be a current financial member of the Society.
2. The candidate must supply evidence of satisfactory completion of an examined two-week full-time course in Diving and Hyperbaric Medicine at an approved facility. The list of approved facilities providing two-week courses may be found on the SPUMS website.
3. The candidate must have completed the equivalent (as determined by the Education Officer) of at least six months’ full-time clinical training in an approved Hyperbaric Medicine Unit.
4. The candidate must submit a written proposal for research in a relevant area of underwater or hyperbaric medicine, in a standard format, for approval before commencing their research project.
5. The candidate must produce, to the satisfaction of the Academic Board, a written report on the approved research project, in the form of a scientific paper suitable for publication. Accompanying this written report should be a request to be considered for the SPUMS Diploma and supporting documentation for 1–4 above.
6. In the absence of documentation otherwise, it will be assumed that the paper is submitted for publication in Diving and Hyperbaric Medicine. As such, the structure of the paper needs to broadly comply with the instructions to authors – full version, published in Diving and Hyperbaric Medicine 2008; 38(2): 117-9.
7. The paper may be submitted to journals other than Diving and Hyperbaric Medicine; however, even if published in another journal, the completed paper must be submitted to the Education Officer for assessment as a diploma paper. If the paper has been accepted for publication or published in another journal, then evidence of this should be provided.
8. The diploma paper will be assessed, and changes may be requested, before it is regarded to be of the standard required for award of the Diploma. Once completed to the reviewers’ satisfaction, papers not already accepted or published in other journals will be forwarded to the Editor of Diving and Hyperbaric Medicine for consideration. At this point the Diploma will be awarded, provided all other requirements are satisfied. Diploma projects submitted to Diving and Hyperbaric Medicine for consideration of publication will be subject to the Journal’s own peer review process.

Additional information – prospective approval of projects is required

The candidate must contact the Education Officer in writing (e-mail is acceptable) to advise of their intended candidacy, and to discuss the proposed subject matter of their research. A written research proposal must be submitted before commencing the research project.

All research reports must clearly test a hypothesis. Original basic or clinical research is acceptable. Case series reports may be acceptable if thoroughly documented, subject to quantitative analysis, and the subject is extensively researched and discussed in detail. Reports of a single case are insufficient. Review articles may be acceptable if the world literature is thoroughly analysed and discussed, and the subject has not recently been similarly reviewed. Previously published material will not be considered.

It is expected that all research will be conducted in accordance with the joint NHMRC/AVCC statement and guidelines on research practice (available at <http://www.health.gov.au/nhmrc/research/general/nhmrcavc.htm>) or the equivalent requirement of the country in which the research is conducted. All research involving humans or animals must be accompanied by documented evidence of approval by an appropriate research ethics committee. It is expected that the research project and the written report will be primarily the work of the candidate, and that the candidate is the first author, where there are more than one.

The SPUMS Diploma will not be awarded until all requirements are completed. The individual components do not necessarily need to be completed in the order outlined above. However, it is mandatory that the research project is approved prior to commencing research.

The Academic Board reserves the right to modify any of these requirements from time to time. As of October 2008, the SPUMS Academic Board consists of:

Associate Professor David Smart, Education Officer;
Associate Professor Mike Davis;
Associate Professor Simon Mitchell.

All enquiries and applications to the Education Officer:

Associate Professor David Smart
GPO Box 463, Hobart, Tasmania 7001
E-mail: <david.smart@dhhs.tas.gov.au>

Key words
Qualifications, underwater medicine, hyperbaric oxygen, research, medical society
ANZHMG Chairman’s report

Members of the Australian and New Zealand Hyperbaric Medicine Group (ANZHMG), representing the comprehensive diving and hyperbaric medicine facilities (as defined in the Commonwealth Medicare Benefits Schedule, CMBS) in Australia and New Zealand have just completed a major submission to the Australian Federal Government Medical Services Advisory Committee (MSAC). This submission seeks to achieve long-term funding from Medicare for hyperbaric oxygen treatment (HBOT) of soft-tissue radiation injury and necrosis, and non-diabetic problem wounds where hypoxia can be demonstrated. The process of submission was an enormous undertaking, akin to performing a complete Cochrane evidence review, combined with disease load, epidemiology, quality of life and economic analyses, submitted in Government format for each specific condition to be funded.

The issue has caused headaches (literally) for ANZHMG members for over a decade, and we have yet to achieve full closure. The current submissions (two documents totaling over 500 pages) are supported by the Australian Healthcare and Hospitals Association and the Australian Society of Anaesthetists as co-applicants, and are also backed by the Australian Medical Association. A brief history is outlined below, as this may be of value to hyperbaric physicians fighting the same battles in their own jurisdictions.

HBOT has been funded since the CMBS started, and, until 2001, the use of the treatment was at the discretion of the specialists who work in the field. These specialists were already exercising considerable self-regulation by adhering to treatment for cases where clinical opinion considered the evidence to be high enough for efficacy. For example, treatment was not offered for multiple sclerosis, sports injuries, cerebral palsy, autism, and many other conditions.

In 1999, a manufacturer of monoplace hyperbaric chambers applied to have a separate Medicare item number added to the CMBS, via MSAC. There was, of course, no difference in the treatment (monoplace versus multiplace), in a properly constituted hyperbaric treatment facility, but MSAC in its first report 1018-20 sought to severely restrict the medical conditions that could be treated by HBOT, citing “evidence” as their guiding principle. In essence, a process that had been set up to review new technologies had been used to review an existing technology, and then to withdraw the funding from that technology (HBOT). As a result, ANZHMG was inadvertently dragged into a saga that has lasted a decade.

The website is at www.spums.org.au

Notice of SPUMS Annual General Meeting 2010

The AGM for SPUMS 2010 will be held at Berjaya Redang Resort, Redang Island, Malaysia at 1700h, Thursday 27 May 2010.

Agenda

Apologies:

Minutes of the previous meeting:

Minutes of the previous meeting will be posted on the notice board at Berjaya Redang Resort and were published in *Diving and Hyperbaric Medicine*. 2009;39(4):243–7.

Matters arising from the minutes:

Annual reports:
- President’s report
- Secretary’s report
- Education Officer’s report
- Annual financial statement and Treasurer’s report
- Journal Editor’s report
- Presidents’ Committee report

Subscription fees for 2011:
- Treasurer

Election of office bearers:
- No positions are open for election in 2010.

Appointment of the Auditor 2010:
- Treasurer

Business of which notice has been given:
- No notices have been received at this stage for other business. Any notice for other business must be received in writing to the Secretary by 31 April 2010.

Members’ news

Commodore Robyn Walker, former President of SPUMS, has been made a Member of the Order of Australia (AM) - Military Division for exceptional service as a medical officer in the Australian Defence Force.

Dr Simon Mitchell has been promoted to Associate Professor in the Department of Anaesthetics, Faculty of Medicine and Health Sciences, The University of Auckland, New Zealand.
made further submissions to MSAC to restore full funding of soft-tissue radiation injury and necrosis, and non-diabetic problem wounds where hypoxia can be demonstrated. Four ANZHMG members joined the supporting committee to review the evidence. Despite positive conclusions from the supporting committee, the conclusions that were published in the final report (2004) were not the same as those that left the supporting committee, and had been modified by MSAC, without further consultation, to a negative tone with only short-term funding provided. Since 2004, three-yearly funding only has been achieved.

This year, the submissions have been split. The HBOT for soft-tissue radiation injury or necrosis submission has reviewed all of the evidence for all treatments, from the perspective of a patient presenting with the condition. If a patient has soft-tissue radiation injury, what are the best treatment options and what is the evidence supporting the treatments? The review found that there were only 27 papers in the world literature of level 3C evidence or above, for all treatments including surgery and other medical treatments! HBOT had evidence of clinical efficacy that was equal to or superior to all other available treatment options.

For non-diabetic problem wounds, a detailed literature review has also taken place, but with considerable emphasis on the results of an ongoing prospective study of refractory hypoxic problem wounds being treated at Australasian facilities (see a previous progress report in Diving and Hyperbaric Medicine).1 We believe that the work completed by members represents an extremely strong case, and we have been assured by Federal Department of Health Australia representatives that MSAC has a fresh, new approach. The process will unfold during the year.

Reference


Standards Australia report 15 January 2010

For the past two years, there has been very little activity with Australian Standards. Soon after Australian Standard 2299.1(2007) was released, a major corporate shake-up occurred at Standards Australia, which has prevented further progress on diving standards. From 2008, a change in strategic direction meant that all future development of Australian standards required full funding and sponsorship by industry groups. That, coupled with an apparent embracement of ‘international standards’, regardless of their quality, has led to serious disillusionment amongst members who have previously given much effort and time to serve on Standards Australia committees.

I have seen e-mailed documents, touted as international diving training standards from the recreational diving industry, that are nowhere near the quality of documents that already exist among our training organisations within Australia and New Zealand. The move to adopt ‘ISO or perish’ seems to be politically driven, and, in my opinion, the latter is likely to be the consequence. I had become somewhat cynical of the whole process until recently, when a breath of fresh air blew through with the latest Acting CEO’s newsletter (December 2009):

“In November, Standards Australia announced the immediate reopening of its funded and supported development pathways for new projects. This revised approach was developed in conjunction with and supported by the Commonwealth and major member groups. In brief, if proposed Standards development projects can demonstrate the delivery of Net Benefit to communities of interest, and these projects cannot be financially resourced, then Standards Australia will allocate resources on a prioritized basis to see the work through to completion.”

This may offer an opportunity for SPUMS to develop its newly revised recreational diving medical assessment form into an updated Australian recreational diving standard.

David Smart
South Pacific Underwater Medicine Society Representative to Standards Committee for Occupational Diving Australia, Standard Australia

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Key words
Fitness to dive, medicals – diving, recreational diving, standards
Australian and New Zealand College of Anaesthetists
Certificate in Diving and Hyperbaric Medicine

Eligible candidates are invited to present for the examination for the Certificate in Diving and Hyperbaric Medicine of the Australian and New Zealand College of Anaesthetists.

Eligibility criteria are:

1. Fellowship of a Specialist College in Australia or New Zealand. This includes all specialties, and the Royal Australian College of General Practitioners.
2. Completion of training courses in Diving Medicine and in Hyperbaric Medicine of at least four weeks’ total duration. For example, one of:
   a. ANZHMG course at Prince of Wales Hospital Sydney, and Royal Adelaide Hospital or HMAS Penguin diving medical officers course OR
   b. Auckland University Diploma in Diving and Hyperbaric Medicine.
3. EITHER:
   a. Completion of the Diploma of the South Pacific Underwater Medicine Society, including six months’ full-time equivalent experience in a hyperbaric unit and successful completion of a thesis or research project approved by the Assessor, SPUMS
   b. Completion of a further 12 months’ full-time equivalent clinical experience in a hospital-based hyperbaric unit which is approved for training in Diving and Hyperbaric Medicine by the ANZCA.
   OR:
   c. Completion of 18 months’ full-time equivalent experience in a hospital-based hyperbaric unit which is approved for training in Diving and Hyperbaric Medicine by the ANZCA
   d. Completion of a formal project in accordance with ANZCA Professional Document TE11 “Formal Project Guidelines”. The formal project must be constructed around a topic which is relevant to the practice of Diving and Hyperbaric Medicine, and must be approved by the ANZCA Assessor prior to commencement.
4. Completion of a workbook documenting the details of clinical exposure attained during the training period.
5. Candidates who do not hold an Australian or New Zealand specialist qualification in Anaesthesia, Intensive Care or Emergency Medicine are required to demonstrate airway skills competency as specified by ANZCA in the document “Airway skills requirement for training in Diving and Hyperbaric Medicine”.

All details are available on the ANZCA website at: <www.anzca.edu.au/edutraining/DHM/index.htm>

Dr Margaret Walker, FANZCA, Cert DHM (ANZCA)
Chair, ANZCA/ASA Special Interest Group in Diving and Hyperbaric Medicine

ANZCA Certificate in Diving and Hyperbaric Medicine
Examination results

Successful candidates, November 2009
On behalf of the SIG executive and examiners court, I wish to congratulate the following candidates who were successful at the recent examination:

   Neil Banham (Western Australia)
   David Cooper (Tasmania)
   Ian Dey (Western Australia)

Michael Bennett
Chair, Examination Committee

The Executive Committee of SPUMS would also like to congratulate the candidates, all three of whom are SPUMS members.
1st Joint Meeting
Asian Hyperbaric and Diving Medical Association

The 39th SPUMS Annual Scientific Meeting combined with the 6th ASM of the Asian Hyperbaric and Diving Medical Association
23–28 May 2010
Venue: Redang Island Beach Resort

Theme: Decompression and Hyperbaric Medicine into the 21st Century

SPUMS Guest Speaker
Michael L Gernhardt, PhD
NASA Astronaut, Manager of the Environmental Physiology Laboratory and Principal Investigator of the Prebreath Reduction Program
Johnson Space Center, Houston, Texas

AHDMA Guest Speaker
Folke Linde, MD, PhD
Professor, Department of Anaesthesiology, Surgical Services and Intensive Care
Karolinska University Hospital, Stockholm, Sweden

MEETING CONVENOR
Dr Glen Hawkins
PO Box 1674
Maroubra, NSW 2035
AUSTRALIA
E-mail: <glen@hawkeyemedical.com.au>

Full details for submission of Abstracts and Posters are on line, and Registration, Accomodation and Travel should be booked on line. Full details are available on the SPUMS website.
Members are urged to book as soon as possible.

The website is at
www.spums.org.au
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The European Underwater and Baromedical Society  
website is at  
www.eubs.org  
Members are encouraged to log in
EUBS website news

Explore the EUBS website! It offers the following sections:

For all (non-members and members):

Events, courses and Research pages: lists the currently available multicentric research initiatives seeking collaboration and recruiting investigators; also listing courses and events to provide you with possibilities for CME and scientific exchange and interaction.

Links page: lists international, national and regional organisations and scientific societies dealing with hyperbaric and diving medicine.

Our Constitution and Bylaws: so that you know what EUBS stands for.

The Executive Committee or ExCom: you are invited to contact any of them if you have suggestions, critique, propositions etc.

Our Corporate Members: institutions and organisations who support the works of the EUBS with their contribution.

For members only:

A direct link to the comprehensive bibliography database: offered graciously by the GTUeM (German Society for Diving and Hyperbaric Medicine). This database provides full text files of all published material in the field of diving and hyperbaric medicine—also non-peer-reviewed material such as Annual Meeting Proceedings. The full text of previous issues of DHM will also be available, from three years previous.

EUBS membership directory: with full search capability: your source to locating colleagues within Europe.

Membership maintenance: check your membership dues history; renew your membership online.

Private Discussion Forum: while it takes some discipline to regularly visit the Forum, this may be a good way to obtain information and/or exchange ideas. It is divided into topics so there is little chance that off-topic discussion will clutter your screen. Who will start a discussion topic?

Peter Germonpré
EUBS webmaster

Election of Member-at-Large: candidates sought

A new Member-at-Large (2010–2013) needs to be elected to serve a three-year term on the Executive Committee. Candidates should be a full member of EUBS and willing to donate some of their time to help run the Society. This is your chance to actively help the EUBS grow and develop!

Please send a one-page CV with digital photograph to our Honorary Secretary <joerg.schmutz@eubs.org> before 30 April. If you do not think you are up to this task, please nominate someone you think might be willing and able (send an e-mail with your suggested nominee to Joerg).

Towards a European diploma in diving and hyperbaric medicine

The current European standards for diving and hyperbaric medicine post-graduate education, as defined by the European Committee for Hyperbaric Medicine (ECHM), together with the European Diving Technology Committee (EDTC), and in agreement with the Diving Medical Advisory Committee (DMAC—commercial diving), were defined during the ECHM 2004 European Consensus Conference on Hyperbaric Medicine (Lille 2004) and the coincidental closing meeting of the European Union COST B14 Action. It was decided that the above-mentioned medical education programmes be accredited by the European College of Baromedicine (ECB), in strict accordance with the standards as set out by the ECHM/EDTC.

This international endeavor has so far involved a number of academic and clinical institutions in many European as well as extra-European countries, such as, to name a few, Belgium, Cyprus, Denmark, France, Germany, Holland, Italy, Malta, Portugal, Serbia, Sweden, UK, South Africa and the USA, through the Undersea Hyperbaric Medical Society. The educational process is currently organized into three levels:

- Level I: basic information: Medical examiner of divers and/or assistant in a hyperbaric medicine practice;
- Level II: Diving medical officer and/or hyperbaric medical officer;
- Level III: Expert in diving and/or hyperbaric medicine.

The ECHM/EDTC standard and ECB accreditation system foresee the development of a European post-graduate education modality which will be both modular and offer full reciprocity amongst the participating academic and medical education institutions. Therefore, it accepts courses which are modular in design so that they cover selected, specific sections of the entire curriculum, whilst allowing for their accreditation, methods for the recognition of prior learning and reciprocity with other participating institutions where the education programme may then be continued or completed. The goal is to achieve a recognized European diploma in baromedicine!

Medical institutions (academic, clinical and educational) interested in receiving more information and participating in this European programme are invited to visit the websites of the ECHM, <http://www.echm.org>, and the ECB, <http://www.ecbm.eu>, or to write to <ecb@daneurope.org>.

Alessandro Marroni,
Vice President, ECHM, Secretary General, ECB

Key words
Diving medicine, hyperbaric medicine, qualifications, training, general interest
EUBS Annual Scientific Meeting 2010
14–18 September 2010
Istanbul (European Cultural Capital 2010)

Venue: The Marmara Hotel, Istanbul, Turkey

Prof. Maide Cimsit, Istanbul University
Secretary General, EUBS ASM 2010
E-mail: <mcimsit@istanbul.edu.tr>

Istanbul is a centuries-old city, located on the Bosphorus Strait connecting Asia and Europe. It was the capital of three empires: Roman, East Roman (Byzantine), and the Ottoman Empire. Many historic areas are on the UNESCO World Heritage List. Istanbul is unique with its location, cultural and historical heritage, palaces, and monuments, museums and bazaars, blending with modern architecture, shopping centres, and all sorts of restaurants, clubs and friendly wine houses.

The scientific programme will cover a broad spectrum of topics in diving and hyperbaric medicine.
Full details of the scientific programme and workshops are available on the meeting website:

<http://www.eubs2010.org>

Submission of Abstracts
Deadline for Abstract submission is 15 June 2010. Work can be presented as either a poster or an oral presentation.

Zetterström Award:
Authors of accepted poster abstracts are encouraged to submit their poster for the Zetterström Award.

Student Travel Grants
Applications for student travel grants should be in the hands of the Scientific Secretariat by 15 May 2010.

Details about how to submit an Abstract, apply for and the conditions of the Zetterström Award, or apply for a student travel grant can be found on the conference website.
Official language of the conference will be English.

Social programme
Details of the many optional activities, including a diving programme, tours and excursions, in the Social Programme may be found on the website or are available from the Congress Secretariat.

We hope that you will enjoy the meeting, and the unique ambience and hospitality of Istanbul.

For important dates, registration, accommodation and other details please visit the meeting website.

Contacts:
Congress Organization Secretariat
Figür Congress and Organisation Services
Ayazmaderesi Cad. Karadut Sok. No:7
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Central European Conference of Hyperbaric and Diving Medicine and Ostrava’s Days of Hyperbaric Medicine

**Dates:** 17-18 June 2010  
**Venue:** Lanterna Hotel, Leskove 659, Velke Karlovice 756 06, Czech Republic  
**Conference Chairman:** Michal Hajek, MD  
**Scientific topics:**  
- Diving medicine and physiology; decompression illness; news in diagnostics and treatment of PFO  
- Hyperbaric medicine – recommended, optional and experimental indications  
- Hyperbaric physiology; experimental HBO; oxygen toxicity  
- Organizational aspects of HBO treatment; education of HBO staff  
- Aviation medicine

**Organizing Committee address:**  
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**E-mail:** odhm@mnof.cz  
**Website:** <www.hbova.cz> and <www.cshlm.cz>

Diving Diseases Research Centre (DDRC), Plymouth, UK

**Diving medicine courses for 2010**

- Level I (Medical Examiner of Divers) Course: 17 September  
- Medical Examiner of Divers, Refresher Course: 10–11 June and 25–26 November  
- Level IIa (Diving Medical Physician): 20–24 September  
- Introduction to Hyperbaric Medicine Course for Physicians (UHMS): 13–17 September  
- Combined Introduction to Hyperbaric Medicine Course for Physicians (UHMS) and Level I (Medical Examiner of Divers) Course: 13–19 September

For further information: <www.ddrc.org>

7th National Congress of the Società Italiana di Anestesia Rianimazione Emergenza e Dolore

**Dates:** 29–31 May  
**Venue:** Villasimius, Cagliari, Sardinia.  

A major part of the programme is dedicated to diving and hyperbaric medicine, with an international faculty.

Website: <http://www.siared.it/congresso/siared_2010_congresso_locandina.pdf>

The Royal Swedish Navy in cooperation with Sahlgrenska University Hospital, Gothenburg University

**Basic course in diving medicine and HBO**

**Dates:** 20 September – 1 October 2010  
**Venue:** Gothenburg, Sweden

For further information:  
**E-mail:** Lena Fridman <lena.fridman@mil.se>

Oxygen and Infection; European Committee for Hyperbaric Medicine (ECHM) Conference Proceedings

Free video lectures <www.hyperbaricoxygen.se>  
Video lectures and panel discussions from three exciting conference days in Stockholm, Sweden 7–9 May, 2009 are now available for your iPhone or computer for free!

5th Karolinska Postgraduate Course in Clinical Hyperbaric Oxygen Therapy

14 lectures on fundamental concepts and front-line knowledge in the clinical use of HBO.

ECHM Conference ‘Oxygen and Infection’  
22 lectures and three panel discussions are available on topics such as necrotizing fasciitis and the diabetic foot.

Our site offers free, high-quality presentations from leading authorities and principal investigators in the field of Hyperbaric Medicine. Our goal is to spread knowledge, and to support clinical practice and research for the benefit of patients around the world. Welcome and enjoy!

For further information contact:  
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**Website:** Editor <www.hyperbaricoxygen.se>

Inter-university Diploma in Diving and Hyperbaric Medicine, France

University Course (1-year duration) in diving and hyperbaric medicine, organised concurrently by 13 French universities (Angers, Antilles-Guyane, Besançon, Bordeaux II, Lille 2, Lyon II, La Réunion, Marseille, Nancy, Nice, Paris XIII, Strasbourg, Toulouse).

For further information go to:  
<http://www.medsubhyp.org> or  
<http://medecine.univ-lille2.fr/format/diu/hyperbar.htm>
German Society for Diving and Hyperbaric Medicine (GTUEM)

An overview of basic and refresher courses in diving and hyperbaric medicine, organised by the GTUEM in Germany, can be found at:
<http://www.gtuem.org/212/Kurse/_/Termine/Kurse.html>

Scott Haldane Foundation, The Netherlands

The Scott Haldane Foundation is dedicated to education in diving medicine, and has organised more than 100 courses over the past few years, both in the Netherlands and abroad. Below is an overview of courses planned for 2010.

More information can be found at:
Website: <www.scotthaldane.nl>
E-mail: <info@scotthaldane.nl>

29 May–6 June: Basic course “Diving medicine for ENT specialists” (Negros, Philippines)
11 June: 16th Advanced course “Diving and ENT” (Driebergen, NL)
2–9 October: Basic course “Diving medicine for pneumologists”
14–15 October: Advanced course “Evidence-based diving medicine” (Doorn, NL)
6–13 November: Basic course in diving medicine (Zanzibar, Tanzania)
13–20 November: 17th Advanced course in diving medicine (Zanzibar, Tanzania)
13–20 and 20–27 November: 17th Advanced course in diving medicine (Zanzibar, then Mafia Island, Tanzania)
11 December: Refresher course “Neurology and diving”

Undersea and Hyperbaric Medical Society Annual Scientific Meeting 2010

Dates: 3–5 June 2010
Venue: Tradewinds Grand Island Resort
St Pete Beach, Florida, USA

Pre-courses: 2 June
Wound care
How to prepare for accreditation

UHMS is accredited to provide continuing medical education for physicians

Full details of the programme, registration and accommodation are available on the UHMS website <www.uhms.org> or for further information contact:
Lisa Tidd, UHMS
Phone: +1-(0)877-533-UHMS/919-490-5140
E-mail: <lisa@uhms.org>

Conference proceedings available
The future of diving: 100 years of Haldane and beyond

Michael A Lang and Alf O Brubakk, editors
Smithsonian Institution Scholarly Press

The proceedings of “The Future of Diving: 100 Years of Haldane and Beyond” symposium, convened 18–19 December 2008 in Trondheim, Norway, by the Baromedical and Environmental Physiology Group of the Norwegian University of Science and Technology, are reported in 28 papers and 3 discussion sessions.

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<schol_press@si.edu>
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The Hyperbaric Research Prize

The Hyperbaric Research Prize encourages the scientific advancement of hyperbaric medicine and is awarded annually whenever a suitable nominee is identified. It will recognise a scholarly published work or body of work(s) either as original research or as a significant advancement in the understanding of earlier published science. The scope of this work includes doctoral and post-doctoral dissertations. The Hyperbaric Research Prize is international in scope. However, the research must be available in English. The Hyperbaric Research Prize takes the form of commissioned art piece and US$10,000 honorarium.

For detailed information please contact:
Baromedical Research Foundation
5 Medical Park, Columbia, SC 29203, USA
Phone: +1-803-434-7101
Fax: +1-803-434-4354
E-mail: <samir.desai@palmettohealth.org>

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British Hyperbaric Association 2010 Annual Conference

**Dates:** 18–21 November  
**Host:** East of England Hyperbaric Unit  
James Paget University Hospitals NHS  
Lowestoft Road  
Gorleston Great Yarmouth  
Norfolk NR31 6LA

For further information contact:  
Karen Turner <karen.turner@jpaget.nhs.uk>  
or Maxine Palmer <maxine.palmer@jpaget.nhs.uk>  
**Phone:** +44-(0)1493-453526  
**Fax:** +44-(0)1493-453261

Introductory Course in Diving Medicine New Zealand

**Dates:** 24–27 September 2010  
**Venue:** Navy Hospital, Devonport, Auckland

This course is designed to provide GPs who have an interest in diving medicine with a basic understanding of the principles involved.

RNZCGP approved for 20 hours CME.

For details and application form please see the website: <www.navyhyperbaric.mil.nz>

CO₂: The rebreather incident

Freely available from: <www.hse.gov.uk/diving/video/co2video.htm>

The following is a quote from the HSE website:  
“This video made by SKY news shows real footage of an incident where a rebreather diver suffers from acute carbon dioxide poisoning. The video takes the viewer through the incident, explaining how it came about and the lessons that can be learnt. Whilst the video is primarily aimed at rebreather divers, there are issues such as bail-out gas consumption, team size and rescue that may be useful to all divers. [Also, it gives insight for diving physicians into one of the potentially fatal causes of rebreather accidents. — Editor] HSE is providing approved recreational training organisations with DVD copies of the video for distribution to their rebreather instructors. Any divers who want a copy of the DVD should contact their training agency. The film carries no copyright and can therefore be distributed to all interested parties.”

Royal Adelaide Hospital Diving Medicine Medical Officers and Diver Medical Technician Courses 2010

**Medical Officers Course:**  
Week 1, 21−25 June  
Week 2, 28 June – 2 July

**Full DMT Courses:**  
2nd DMT course in November still t.b.d.

**DMT Refresher Course:**  
26–30 October

For more information contact:  
Lorna Mirabelli  
Senior Administrative Assistant  
Hyperbaric Medicine Unit, Royal Adelaide Hospital  
**Phone:** +61-(0)8-9882-5116  
**Fax:** +61-(0)8-9832-4207  
**E-mail:** <Lmirabel@mail.rah.sa.gov.au>

2010 Royal Australian Navy Medical Officers Underwater Medicine Course

**Dates:** 25 October−5 November 2010  
**Venue:** HMAS PENGUIN, Sydney  
**Cost:** to be advised

The course seeks to provide the medical practitioner with an understanding of the range of potential medical problems faced by divers. Considerable emphasis is placed on the contra-indications to diving and the diving medical, together with the pathophysiology, diagnosis and management of the more common diving-related illnesses. The course includes scenario-based simulation focusing on management of diving emergencies and workshop covering the key components of the diving medical.

For information and application forms contact:  
Mr Rajeev Karekar for Officer in Charge,  
Submarine and Underwater Medicine Unit  
HMAS PENGUIN  
Middle Head Rd, Mosman, 2088 NSW, Australia  
**Phone:** +61-(0)2-99600572  
**Fax:** +61-(0)2-99604435  
**Email:** <Rajeev.Karekar@defence.gov.au>