The Sociedade Brasileira de Pneumologia e Tisiologia (Brazilian Society of Pulmonology and Phthisiology) and its international relationships

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Approximately five years ago, the board of the Sociedade Brasileira de Pneumologia e Tisiologia (SBPT, Brazilian Society of Pulmonology and Phthisiology) realized that, after significant internal development and growth, closer contact with international societies of the same specialty would be fundamental and mandatory in order to increase its external visibility.

The society has a significant number of associates - approximately 3000 -, the magnitude of which impresses even the directors of American societies. Our scientific production is comparable to that of large international centers, if not in numbers then definitely in quality.

Our first contact was with the Asociación Latino Americana de Tórax (ALAT, Latin-American Thoracic Association), whose first congress was held in the city of São Paulo. The ALAT was still in the process of formation and did not present the same level of development as did the SBPT.

Later, we formed a liaison with the American Thoracic Society (ATS), the most famous American society, which has always seduced Brazilian pulmonologists with their annual congresses. These events have been based on an approach that especially favors research in pulmonology, thereby attracting Brazilian specialists. Since then, the SBPT board has organized meetings with the ATS board during these events in order to create an even closer relationship, become known and enhance our partnership in a solid and continuous way. This partnership, in a practical and special fashion, has produced significant results: some American professors have participated in our Brazilian congresses with sponsorship (airfare, etc.) by the ATS, and our Brazilian pulmonologists have had access to special (discount) registration fees.

Subsequently, the boards of the SBPT and of the European Respiratory Society (ERS) had their first meeting. The ERS also organizes an annual congress, albeit on a smaller scale than that of the ATS. However, it allows us to come into contact with traditional European pulmonology and with a group of specialists from countries in similar political and economical situations (the eastern European countries). Both the ATS and the ERS have maintained a close partnership with the SBPT, sponsoring international guests for our congresses as well as granting special membership fees for Brazilian pulmonologists.

Our relationship with the American College of Chest Physicians (ACCP) has also become closer. Their annual congress, CHEST, has a small number of participants than does that of the ATS. However, it has a focus on more practical clinical aspects of pulmonology routine. Currently, the ACCP may be our closest partner, presenting greater partnership possibilities than do any of the other medical societies. The interchange of ACCP lecturers at the SBPT congresses, as well as the number of Brazilians participating in CHEST, has been increasing every year. Consequently, it is very important that our members try to take part in this event.

The current SBPT board officially contacted the board of the Asian Pacific Respirology Society (APRS) - definitely the pulmonology society with the greatest number of members - immediately upon taking office, demonstrating our interest in having the same type of relationship with the APRS that we have with the other international societies. Although they were highly receptive to the idea, we have as yet found no opportunity for the two boards to meet. We definitely intend to schedule a meeting between the SBPT and the APRS boards, but we have to overcome the problem of the great geographic distance between us.

The fact is that, in this globalized world of instantaneous contact, we need to be known by

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who we are, who we represent and what we produce. Establishing partnerships with all international societies is what interests us and what will be continually stimulated.

The SBPT needs even greater international political and scientific exposure in order to solidify our position in the global pulmonology scenario. With this in mind, we cannot be exclusionary. It is in our interest to maintain these contacts and partnerships, making them ever closer. It is also our interest to gather our peers together so that we have our guaranteed preserved space, not only politically but scientifically. All of the great international associations have given proof of the success of partnering efforts for the development of pulmonology and for greater visibility. For us, it can be no different. We cannot go against the tide of history. We must continue to dream great dreams and keep believing in them!

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