

SAC and its Commitment to Medical Residencies and Continuing Education

La SAC y su compromiso con las residencias médicas y la formación continua

The founders of the Argentine Society of Cardiology (SAC), who came from renowned national universities (such as those of Buenos Aires, Córdoba, and Rosario) as well as from prestigious public hospitals, had a strong commitment with the quality of medical education and clinical research. The intellectual heritage of the SAC is closely linked to Bernardo Houssay and is evident in its founders and presidents, including Braun Menéndez, Oscar Orias, and Alberto Taquini. These leaders demonstrated that the essence of our institution lies in education and research. (1,2)

As part of this founding commitment, the Teaching Department, which is now part of the Institute of Continuing Education, is proud to offer a biannual course generated from SAC's headquarters and a three-year course in the district of Córdoba. Between both, they have provided theoretical training to more than 550 residents throughout the country for over 30 years.

Doctors Trongé and Iglesias led the first medical education consensus in cardiology published in the Argentine Journal of Cardiology, where they established the objectives and procedures for training cardiology residents. (3)

From 2012 to 2015, the SAC developed the Medical Residencies Manual, a painstaking effort involving several members of our society, including Hugo Grancelli, Amanda Galli, Héctor Roiter, Alberto Alves de Lima, Jorge Thierer, and Ricardo Migliore, among others. This document served as the basis for the publication of the Reference Framework for Medical Residencies Training: Cardiology Specialty, published by the National Ministry of Health in 2015, which accurately describes the objectives of a residency and the competency profile for the training of medical human resources in cardiology. (4)

In light of the recent conflict with medical residents in national hospitals, the SAC addressed the medical community through the Medical Societies Forum, which represents a broad spectrum of specialties in adults. We communicated our position on the conflict, which we consider a symptom of the serious situation of the health system, which has suffered progressive deterioration over time. It is imperative to discuss how the residency system is financed, in-

cluding the teaching structure and the time devoted to teaching and research. This irreplaceable training system must be reevaluated, encouraging it as a path to medical specialties and ensuring the necessary tools for its sustainability and that of residents in their life projects.

For the SAC and the Medical Societies Forum, residency is, above all, an intensive learning stage that must be carried out under adequate supervision, with opportunities for reflection, training, and teaching support. Although healthcare is part of the training process, it cannot displace the main goal of the residency: the comprehensive training of resident physicians and, above all, the patient's safety.

Several public and private institutions, together with their medical professionals, are making a significant effort to sustain residency programs in order to ensure quality training. These programs, in addition to benefiting professional training, produce committed and well-trained specialists, adding value to the community.

The discussion in recent weeks about medical residencies should not be limited to the form of a salary or scholarship payment; it should include a reconsideration of the health system that values this training tool not only for its technical quality, but also as a means of transmitting values and academic rigor. It should consider the economic sustainability of the institutions that offer training systems, as well as the encouragement and recognition of teachers and mentors.

In light of the current worrying situation, characterized by a lack of coverage of vacancies in various specialties and an increase in dropouts during residencies, we must not lose sight of our priorities.

In this regard, the SAC is focused on the promotion of the "University Institute". Together with Drs. Héctor Deschle, Ricardo Iglesias, Marcelo Trivi, Alejandro Hita, Marisa Pagés, and others, and with the expert support of Amanda Galli, our objective is to develop a general profile of the physician, and based on this premise, to establish objectives for the design of a training system and the topics to be covered.

General Profile of the Physician We Need

"To accomplish the role of transformative leadership in health realities and of representative agent of



individuals and social groups before the health care system, in order to become defenders of the HEALTH CARE SYSTEM.”

The cardiologist must accomplish the following:

1. **Medical Knowledge**
Sound scientific and technical training in the corresponding field of health sciences, supported by knowledge and understanding of basic sciences and relevant social sciences. The candidate will possess the skills to recognize situations and problems that affect the health of individuals and social groups, promoting the preservation, maintenance, and development of these individuals, community groups, and general society health.
2. **Communication**
Development of broad communication and management skills to implement changes in the health system, and interact in multi-professional teams to provide comprehensive health care to both individuals and the community. The cardiologist must also be able to work cooperatively in interdisciplinary teams and perform effectively anywhere in the country, possessing the necessary knowledge to plan and evaluate health services and resources.
3. **Management**
Optimization in the use of new technologies, taking into account ethical and financial issues, and, especially, the patient’s benefit.
4. **Health Promotion**
Promotion training in healthy lifestyles through communication skills to guide individuals and groups in their health protection, and improve the quality of care by responding to all the patient’s health needs through promotion, protection, and recovery services. Acknowledge the health needs of each individual and the community, achieving a balance between the patient’s expectations and those of society at large, both in the short and long term.
5. **Research**
Adequate training to contribute to research and knowledge management related to health, to share and disseminate this knowledge, as well as to recognize its limitations and the need for ongoing updating of skills inherent to their professional practice.
6. **Professionalism and Ethics**
Have a broad humanistic education and a clear vision of responsibility and social justice, as well as ethical and deontological training to possess

a clear awareness that the honor and dignity of the profession constitute a paradigm of high performance and prestige in society. The cardiologist must strengthen behavioral sciences knowledge to establish an appropriate doctor-patient relationship, understanding the psychological, social, and cultural dimensions of health and disease processes, and practice the profession respecting professional ethics in the context of different delivery modalities (public, private, social security).

7. **Primary care training strengthening.**

Strong primary care can contribute to strengthening the overall performance of the health system by providing affordable and accessible care; coordinating patient care so that they receive the most appropriate services in the appropriate setting; reducing avoidable hospital admissions.

Cardiologists who promote the SAC must be competent professionals in the care of patients with cardiovascular conditions, respecting the cultural, humanistic, and ethical values of patients and their families, and acting within the framework of medical ethics.

The SAC’s commitment to its mission of improving the country’s cardiovascular health and its vision of being a leader in cardiovascular health training and information in our country and the region are the reasons for our existence and what we have been working for as a team on a strategic plan in line with the times we live in.

In memory of Dr. Houssay, I leave you with one of his quotes: “Science is not expensive; ignorance is expensive.”

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