Raffaella Nenna¹, Laura Petrarca¹, Giuseppe Fabio Parisi¹, Isaac Almendros¹, Sabine Bartel¹, Jana De Brandt¹

¹For a full list of the authors' affiliations please see the Acknowledgements section.

jana.debrandt@uhasselt.be
@EarlyCareerERS

Zooming in on the ERS fellowships and the International Congress

Early career forum

R

An overview of ERS fellowship opportunities for early career members

ERS short-term research fellowship

These fellowships are focused on young scientists and clinicians in the early stages of their research career in respiratory medicine. They provide a unique opportunity to visit a host institution in a country other than the candidate's own for 1–3 months, with the aim of learning a research technique not available in the home institution. The call for applications will be open in the summer and will close on October 1, 2018.

ERS long-term research fellowship

These fellowships enable investigators and clinicians in the early stages of their career to learn and apply advanced research procedures and techniques not available at their home institution. Candidates can apply for basic, translational or clinical research projects in the respiratory field. ERS long-term research fellowships are between 6 and



An overview of @ERStalk fellowship opportunities with testimonials from previous fellows, and 12 tips for getting involved in #ERSCongress from @EarlyCareerERS http://ow.ly/XUal30jjpPc



Cite as: Nenna R, Petrarca L, Parisi GF, *et al*. Zooming in on the ERS fellowships and the International Congress. *Breathe* 2018; 14: 141–144.

12 months long. This call will be open in November and closes in January 2019.

ERS clinical fellowship

ERS clinical training fellowships are designed for qualified clinicians or healthcare professionals currently employed in respiratory medical practice in the early stages of their careers to learn a skill or procedure not available at their home institution. They enable the recipient to visit a host institution in a European country other than their own for up to 6 months. The call will be open in the summer and will close on October 1, 2018.

ERS fellowship in methodology

This fellowship, in collaboration with the National Institute for Health and Care Excellence (Manchester, UK) and the Cochrane Collaboration (Barcelona, Spain), provides the necessary training and placements for researchers to gain the theoretical and practical skills required for developing high-quality guidelines. The call will be open during spring and will close on June 18, 2018.

Other ERS fellowships

A third and final call for applicants for the RESPIRE3 Marie Sklodowska-Curie fellowship, and a new fellowship in public health is also planned to be launched later in 2018. ERS also hopes to continue to offer fellowship in industry opportunities in 2019. Please consult the dedicated fellowship page for the latest news at https://www.ersnet. org/professional-development/fellowships.

How to change your professional life by taking part in the ERS fellowships: experience from two early career members

The ERS fellowships give young researchers the chance to enrich their knowledge in the field of pulmonology, and are a great opportunity for professional and personal growth. Here, you can read the report of one short-term research training fellowship recipient, Laura Petrarca, a 32-year old medical doctor attending the fourth year of paediatric residency at the "Sapienza" University of Rome (Italy), and one long-term research training fellowship recipient, Giuseppe Parisi, a 29-year old medical doctor attending the last year of paediatric residency at the University of Catania (Italy).

Laura Petrarca

The main purpose of the ERS short-term research training fellowship is to learn new techniques and to facilitate exchange between European countries. In 2017, I had the chance to spend 3 months in London, UK, at Imperial College, under the supervision of Peter Openshaw, and to work on a new nasal mucosal sampling technique used in infants with bronchiolitis: nasosorption [1]. This technique is easy to learn and quick to perform; thus, it perfectly fulfilled the fellowship goals.

Nasosorption utilises a synthetic absorptive matrix that has to be held for 30 s on the mucosa of the lower nasal turbinate. As such, it is less invasive than nasal aspiration and it is able to sample neat mucosal lining fluid, thus allowing the detection of viruses, cytokines and chemokines.

In addition to the technical aspects, the fellowship allowed me to gain better knowledge on the health system of a foreign country (the UK) and the care facility differences in this country in comparison to mine (Italy).

Clinically, I took part in ward rounds and emergency medicine simulations with mannequins at the St Mary's Hospital (SMH) Paediatric Intensive Care Unit. Furthermore, I attended several clinical and research events including the Infectious Disease Clinical Meeting with case presentations and discussion, and the Paediatric Ground Round at SMH. Last, but by no mean least, during the 3 months, I also had the chance to write a news item for the *European Journal of Immunology* covering the different vaccine policies in Europe under the supervision of Peter Openshaw and Fabio Midulla [2].

Giuseppe Fabio Parisi

For my fellowship. I worked as a clinical fellow at the Dept of Paediatrics and Respiratory Medicine of the Erasmus University Medical Centre/Sophia Children's Hospital in Rotterdam (the Netherlands) between November 2016 and May 2017 under the supervision of Johan de Jongste. During these months, I had the opportunity to participate in all clinical activities, including outpatient clinics in respiratory medicine and allergology, clinical rounds, asthma clinics, and regular cystic fibrosis rounds. Thanks to this fellowship, I had the opportunity to see many respiratory diseases in children that I had previously read about only in books, enriching my cultural background and my experience in the field of complex pulmonary pathology. Because of this experience, my passion in the field of paediatric bronchoscopy grew even more and I am trying to implement this technique in the centre where I currently work. In addition, I dealt with a different organisational system, drawing positive ideas to improve the way I work in my country.

Beyond the clinical point of view, I also did a lot of research work by scoring lung magnetic resonance imaging (MRI) scans using novel morphometric digital technology. In particular, we validated new software that is able to calculate the lung volumes from MRI images. Thus, we studied the association of early growth characteristics (preterm birth and lower birth weight) with childhood lung function measured with this software and spirometry. This research demonstrated that children with a lower gestational age at birth had lower lung volumes, which might explain the increased risk of asthma in that population. We presented the results of that hard work during the last ERS International Congress in Milan, Italy, as a poster and during the last Italian National Paediatric Respiratory Medicine Congress as oral communication for which we received an award [3, 4].

During my fellowship, I worked on a team of paediatric pulmonologists. Everyone was very kind and helpful, and I have learnt something from each of them. Like the pieces of a puzzle, everyone represented an important part of my training.

The fellowship was definitely more exciting than expected, and it provided ample training advice. Last but not least, it was a great opportunity to live in a new country, to know a different culture, to meet a lot of people who remained friends, to practice and improve my English, and finally, to learn some Dutch. Time flies and those 6 months indeed passed quickly! I thoroughly enjoyed my time in the Netherlands and I appreciate having had the chance to work with all the pulmonologists in that famous hospital.

I really think that the ERS fellowship programme is an amazing development opportunity in respiratory medicine, enabling international mobility for willing medical doctors. From an academic point of view, the ERS fellowship programmes offer an additional educational and cultural experience you otherwise would not be able to gain. I strongly suggest that you have an experience like this.

How to successfully use the International Congress to get actively involved within the ERS: 12 top tips from the Early Career Member Committee

The ERS International Congress is the largest respiratory conference in the world. Thus, it is easy to get overwhelmed and maybe even lost. But don't panic, the Early Career Member Committee (ECMC) provides here a checklist of 12 top tips on how to make your Congress a success for yourself and your career.

- Sign up for an Assembly and Group within the myERS portal. The ERS is divided in 13 different assemblies based on members' research or clinical foci. Pick the one that best suits your own professional background, and find out who is your Assembly and Group head, secretary and early career member (ECM) representative (https://www.ersnet.org/the-society/assemblies). These are the people that can give you tasks within the Assembly and will be happy to do so.
- Sign up for the ERS competence list in the myERS portal [5]. The ECMC members and Assembly heads use this list to select ECMs to chair sessions at the Congress, to review abstracts or to write highlight articles about sessions at the Congress.
- Contact the responsible people of your Assembly prior to the Congress and indicate that you are willing to contribute. This will make you known to them and increase your chances of being selected for tasks that actually take place prior to the Congress.
- **Submit an abstract!** It will give you the great opportunity to get feedback on your data from leading experts in the field. Furthermore, it gives you the opportunity to invite important persons in the field to your presentation, which might ease the conversation/discussion.
- Set dates and locations for meetings with professors and collaborators beforehand. If you aim to meet an important person in your field who is attending the ERS, it would be wise to contact them beforehand to set a date and location for a meeting. The Congress venue will be huge and senior delegates especially will be rushing back and forth to fulfil their duties. Thus, it will be difficult or even impossible to track them down spontaneously to have a conversation.
- Develop your Congress agenda prior to your departure to Paris. By using the Congress app you can list all the sessions and speakers that you want to attend (and where you are presenting at). The congress is too large to spontaneously decide where to go or which session to attend so plan ahead in order to not miss anything or anyone important.
- Keep up to date with latest news during your Congress by following the ECMC on Twitter (https://twitter.com/ EarlyCareerERS) or ResearchGate (https://www.researchgate.net/project/European-Respiratory-Society-Early-Career-Members). If you do not have a social media account yet, it is worthwhile to get one fast so that you can stay tuned!
- Go to the Assembly and Group meetings (even if they are at 07:00 in the morning; they usually serve coffee) at the Congress: the dates and locations are listed in the online programme (http://k4.ersnet.org/prod/v2/front/ program/?e=90&step=10&height=800). These meetings are a great opportunity to make yourself known to your Assembly and Group heads (do not hide in the last row) as usually, these are not large meetings.
- Attend the ECM session (Tuesday, September 18, 2018 at 14:45-17:00). This session is an absolute must for ECMs as it is especially dedicated to your needs and your career development.
- Go to the networking evening after the ECM session. You can meet many other ECMs and important people in the ERS, and you will get food and drinks. So join us and have fun!
- Follow up after the Congress. If you have discussed your involvement with Assembly or Group heads, or ECMC members, or networked with important people in your field, write a follow up e-mail to confirm your interest and to start things off. However, try to keep it short and concise, and give your counterpart a few days to settle back in after the Congress.
- Stay up to date at all times about opportunities for ECMs by following the ECMC on Twitter and ResearchGate, and by reading our 3-monthly Early Career Forum in *Breathe*.

Conflict of interest

S. Bartel reports receiving grants from and has served on a scientific advisory board for Bencard Allergie GmbH.

Acknowledgements

The authors' affiliations are as follows. Raffaella Nenna, Laura Petrarca: Paediatric Dept, "Sapienza" University of Rome, Rome, Italy. Giuseppe Fabio Parisi: Pediatric Bronchopneumology and Cystic Fibrosis Unit, University of Catania, Catania, Italy. Isaac Almendros: Unitat de Biofísica i Bioenginyeria, Facultat de Medicina i Ciències de la Salut, Universitat de Barcelona, Barcelona, Spain; Centro de Investigación Biomédica en Red de Enfermedades Respiratorias, Madrid, Spain; and Institut d'Investigacions Biomèdiques August Pi i Sunyer (IDIBAPS), Barcelona, Spain. Sabine Bartel: Early Life Origins of Chronic Lung Disease, Research Center Borstel, Leibniz-Center for Medicine and Biosciences, Member of the German Center for Lung Research (DZL), Borstel, Germany. Jana De Brandt: REVAL – Rehabilitation Research Center, BIOMED – Biomedical Research Institute, Faculty of Medicine and Life Sciences, Hasselt University, Diepenbeek, Belgium.

References

- Thwaites RS, Ito K, Chingono JMS, et al. Nasosorption as a minimally invasive sampling procedure: mucosal viral load and inflammation in primary RSV bronchiolitis. J Infect Dis 2017; 215: 1240–1244.
- 2. Petrarca L, Midulla F, Openshaw PJ. Vaccination policies in Europe: Common goals, diverse approaches and public doubts. *Eur J Immunol* 2018; 48: 10–12.
- 3. Parisi GF, den Dekker HT, van Meel ER, *et al.* Influence of early growth on childhood lung function assessed by magnetic

resolution imaging and spirometry. The Generation R Study. *Eur Respir J* 2017; 50: Suppl. 61, PA4154.

- 4. Parisi GF, den Dekker HT, van Meel ER, *et al.* Influenza dello sviluppo polmonare precoce sulla funzionalità respiratoria valutata tramite risonanza magnetica polmonare e spirometria. *Rivista Pneumol Pediatr* 2018; 18: 10.
- 5. Kahn NC, Bartel S, Amaral AFS, *et al.* New kids on the block in the ECMC and opportunities for early career members in 2018. *Breathe* 2018; 14: 55-57.