INTRODUCTION
Genitourinary Medicine (GUM) is the speciality that informs the prevention and management of sexually transmitted infections (STI) including HIV. This speciality incorporates Venereology and HIV Medicine, as well as the area of Dermatology, particularly related to the genital region, and the area of Gynaecology, particularly related to the female genital region and contraception. The core elements of the speciality are the clinical management of STI's and HIV/AIDS, surveillance and reporting, the prevention of morbidity and mortality due to STI's and HIV by initiating treatment, partner notification and behavioural change. GUM physicians are required to have specialist skills in the delivery of HIV and GUM services, clinical governance, public health, epidemiology and the provision of contraception. The speciality of genitourinary medicine has a strong multidisciplinary team ethos and requires excellent communication skills. Close liaison is required with microbiology and virology, the specialities of acute medicine, obstetrics and gynaecology, sexual and reproductive health, paediatrics, dermatology, accident and emergency, public health departments and mental health services. The work of the specialist encompasses management of young person's psychosexual problems, victims of sexual assault and co-infection of HIV with Hepatitis or tuberculosis and liaison with other specialists who manage these disciplines. Management of complex antiretroviral treatments, drug interactions, understanding of antiretroviral drug resistance patterns, treatment side effects besides management of HIV in the antenatal, family, elderly and adolescent setting are taught during training. As the field is rapidly evolving it is expected that trainees will actively participate in research and audit.

TRAINING
Training shall take place in an institution/s which together offer trainees practice in the full range of the speciality, in particular gynaecology, dermatology and infectious diseases. They must have access to a full range of pathological, microbiological and virological investigations. They must have in-patient beds for the treatment of patients with HIV disease. The Institution/s must fulfil the criteria that the Maltese Association of Dermatology & Venereology (MADV) may, from time to time, determine.

There should be at least the equivalent of 2 full time accredited specialists in Genitourinary Medicine and/or Dermato-Venereology in the department. Trainees should be exposed to at least 2 trainers who shall be fully accredited in Genitourinary Medicine and/or Dermato-Venereology one of whom should have been practising as a specialist for at least 5 years. Trainees are expected to spend up to 2 years 9 months in a recognised overseas Genitourinary Centre which would have been pre-arranged by the component authorities. Furthermore, trainees are expected to undergo a rotation of at least 1 year 3 months in Malta in GenitoUrinary Medicine, Dermatology, HIV clinic (Infectious Diseases Department) and Gynaecology. The last 6 months of training are to be carried out in Malta.

ENTRY REQUIREMENTS

1. Completion of General Professional Training and possession of CCBST Medicine
   or
   Completion of Specialist Training Programme in Family Medicine leading to Membership of the Malta College of Family Doctors (MMCFD) or equivalent
   or
Membership of the Royal College of Obstetricians & Gynaecologists (UK) or equivalent, together with a minimum of 2 years experience in Gynaecology

2. Full registration with the Medical Council of Malta

3. Sufficient linguistic abilities to communicate with patients and colleagues.

TRAINING DURATION
This must meet the European minimum of 4 years for full time (or equivalent) speciality training (EU directive 2005/36/EC) plus 2 years BST common trunk in Malta.

PROGRESS ASSESSMENT
Trainees must keep a detailed log book throughout their training period, and this must be reviewed and endorsed by the trainers on a quarterly basis. Progression through higher specialist training is dependent on satisfactory appraisal. Trainees will be expected to obtain all the following qualifications (or European equivalents approved by MADV):

1. the diploma in Genitourinary Medicine (Society of Apothecaries, UK)
2. the diploma in HIV disease (Society of Apothecaries, UK)
3. Diploma of the Faculty of Sexual and Reproductive Healthcare, during the appropriate training modules (Royal College of Obstetrics and Gynaecology)

ACADEMIC ACTIVITY
Trainees shall participate in the various departments’ (Dermatology, Gynaecology, Infectious Diseases and Genitourinary) academic activities. There will be a minimum of 4 hours per week protected time for study/research. Research and publications are strongly encouraged. Trainees should have performed a minimum of 2 audits and have at least 2 publications in scientific peer-reviewed journals. Participation in national and international meetings is strongly encouraged.

CURRICULUM
The following is a brief summary of the knowledge and skills required.

1. To develop the ability to obtain a relevant focused sexual and medical history from increasingly complex patients. To synthesise history, record accurately, and formulate a management plan.
2. To progressively develop the ability to perform a general medical examination and specialist examination of the genitals, anus and rectum. To develop the ability to formulate a diagnostic and therapeutic plan for a patient. To develop the ability to prioritise the diagnostic and therapeutic plan.
3. To effectively communicate a diagnostic and therapeutic plan to both patients and the multidisciplinary team. To recognise the causes of error and to learn from them, to realise the importance of honest and effective apology and to take a leadership role in the handling of complaints.
4. To know, understand and apply appropriately the principles, guidance and laws regarding medical ethics and confidentiality. To understand the necessity of obtaining valid consent from the patient and how to obtain it. To understand the legal framework within which healthcare is provided in Malta and/or devolved administrations in order to ensure that personal clinical practice is always provided in line with this legal framework.
5. To progressively understand and interpret the results of laboratory tests for sexually transmitted infections, their limitations, optimum sampling sites; to collect these specimens and explain results to patients.
6. To understand bacterial sexually transmitted infections and their laboratory tests, knows how to collect these specimens and which are optimum sampling sites, interprets and explains the results to patients

7. To progressively understand the causes of genital ulceration and keep up-to-date with the available diagnostic tests; to collect specimens, interpret the results and explain these to patients

8. To progressively understand the aetiology of genital lumps and bumps. Know how to urgently refer if cancer included in differential diagnosis. Be able to diagnose, treat and explain warts and molluscum to patients. Encourage participation in screening/vaccination programmes.

9. To diagnose, explain and manage genital infestations and explain partner management to patients

10. To become conversant with the law as it pertains to sexual abuse of men, women and children and to protect and safeguard patients who allege such abuse. To provide emergency care, refer to a centre for forensic testing and/or the police/social care workers and document sexual history and examination findings, being aware of the importance of good documentation for medico-legal reasons.

11. To progressively understand how to diagnose, treat and manage sexually transmitted infections in pregnancy reducing risk of teratogenicity and transmission to the neonate.

12. To develop strategies for effective communication with the multi-professional team.

13. To progressively understand how to diagnose, treat and manage sexually transmitted infections in neonates and children. To understand when and how to manage under 16s with and without parental consent

14. To progressively understand the causes of vulvovaginitis and balanitis and the available diagnostic tests. To skilfully collect specimens, interpret the results and explain these to patients

15. To assess the contraceptive needs of patients and be proactive in offering and, to be able to and administer most of the methods of contraception, being aware of potential drug-drug interactions

16. To progressively understand the causes of acute and chronic pelvic pain. To be aware of the normal course of pregnancy and to recognise abnormalities requiring referral. To recognise and appropriately refer gynaecological problems such as abnormal bleeding, infertility, endometriosis and emergencies, working within local protocols.

17. To progressively understand common vulval and penile dermatological conditions and to know when to refer to dermatology or gynaecology.

18. To be familiar with simple diagnostic skin biopsy techniques.

19. To develop the ability to teach to a variety of different audiences in a variety of different ways. To be able to assess the quality of the teaching. To be able to train a variety of health care workers in different ways. To be able to plan and deliver a training programme with assessments

20. To progressively acquire knowledge and skills to safely and effectively test individuals for HIV infection. To learn to counsel patients regarding HIV testing, initially in traditional settings and then progressively outside of these settings. To develop the skills to counsel patients who do not disclose to their partners.

21. To progressively develop the skills to assess individuals for PEP (Pre and Post Exposure Prophylaxis) following possible sexual or non-sexual exposure and to counsel patients regarding the risks and benefits of PEP. To progressively learn how to assess the need for non-standard PEP. To have knowledge of other preventative HIV technologies and strategies from clinical studies and describe how these may be translated into clinical practice.

22. To manage early HIV infection, initially focusing on the asymptomatic newly diagnosed patient. To learn which tests to performed at the first visit and in routine
monitoring of individuals. To learn how to diagnose and assess individuals with primary HIV infection.

23. To progressively diagnose and manage advanced immunosuppression in HIV with antiretroviral therapy and prophylaxis for opportunistic infection. To demonstrate knowledge about antiretroviral therapy for late stage HIV disease constructing safe and effective drug regimens.

24. To progressively demonstrate knowledge of antiretroviral therapy and acquire prescribing skills in straightforward and then more complex patients. To develop knowledge of major clinical trials of antiretroviral therapy and use this knowledge to adapt therapy to individual patients.

25. To progressively diagnose and manage side effects of ARVs. To demonstrate knowledge of relevant drug-drug interactions and construct safe, effective drug regimens.

26. To progressively demonstrate knowledge of viral hepatitis A to C in patients including those with HIV infection, the tests required to establish stage of infection, when to refer for treatment and how to explain viral hepatitis to patients. To report to the HPA and encourage screening/vaccination of contacts. To encourage participation in vaccination programmes.

27. To progressively demonstrate knowledge of current treatment strategies for the complications of HIV disease as it may affect the various anatomical systems.

TRAINING COURSES
Trainees will be expected to attend the following courses organized periodically by the British Association of Sexual Health and HIV (BASHH), and the Royal College of Obstetricians and Gynaecologists (UK) or European equivalents.

1. BASHH STI and HIV courses
2. BSIG (Bacterial Special Interest Group) Microscopy (dark ground and light) courses
3. DFSHRH (Diploma of Faculty of Sexual & Reproductive Health Care) training course
4. Other courses that may be recommended by MADV