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Mentoring as the cornerstone of continued education in Allergy and Clinical Immunology:
10th anniversary of the EAACI mentorship program

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1 **Editorial**

2 Mentoring as the cornerstone of continued education in Allergy and Clinical Immunology: 10th
3 Anniversary of the EAACI Mentorship Program

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92 **Main text**

93 The prevalence and complexity of allergic disease have risen over the last decades, both in adults and
94 children, resulting in a significant burden for the allergic patients and their families, also including
95 quality of life and indirect effects, such as losing days of work or school (1–4). Hence, training in
96 Allergy and Clinical Immunology (ACI) needs to keep up with the rising professional demand in the
97 field. ACI education patterns vary worldwide (5,6). A recent survey conducted mainly in European
98 countries highlighted a significant heterogeneity between countries with regard to training aspects,
99 recognition of the specialty, and numbers of practicing specialists (1–4). In addition, there are
100 numerous discrepancies in pediatric ACI training. Children and adolescents with allergic diseases are
101 commonly managed by pediatric specialists, who, after this training, may have to carry out integrative
102 subspecialty training in ACI in their countries (2,4,7). Such differences may limit the number of
103 HealthCare Professionals (HCPs) and researchers undergoing ACI training in the future.
104 Consequently, the ageing of currently active specialists in the field may pose a substantial limitation

105 to the future growth of the ACI community. Therefore, creating awareness and new opportunities for
106 ACI education and harmonization of training pathways are deemed priorities to attract young HCPs
107 and researchers to these specialties (1). The ACI field is undergoing a period of fast changes, with
108 new findings and the inclusion of cutting-edge technologies, e.g., the understanding of molecular
109 mechanisms of disorders and omics sciences (8), leading to the development or optimization of
110 innovative approaches for HCPs, e.g., in the fields of allergen-specific immunotherapy (9) or
111 treatments with biologics (10), that represent prototypes of precision medicine. Moreover, the
112 environment-related health crisis (11) is providing the opportunity to rediscover and deepen the
113 relationship between humans and nature to guarantee a brighter future for the people and the world,
114 according to the broader “One Health” vision. This can be elaborated further, from the immunological
115 point of view, with the epithelial barrier hypothesis; indeed, an impaired epithelial barrier has been
116 demonstrated in allergic, autoimmune and chronic diseases (12).

117 The EAACI and the Section and Board of Allergology from the Union Européenne des Médecins
118 Spécialistes (UEMS) highlighted their vision for the professional development of the specialty
119 through a blueprint, with a further intention to align their vision with the Pediatric Section of the
120 UEMS (3). Within this context, the EAACI/UEMS Knowledge and Pediatric Exams in Allergology
121 and Clinical Immunology represent highly regarded certifications to test applicants’ theoretical
122 knowledge of the field (4). Moreover, they may serve as a potentially valuable tool to reach
123 international harmonization concerning allergy and clinical immunology education across several
124 different geographical environments (3).

125 Support and mentoring of young HCPs and researchers are considered important assets to achieve
126 this goal (7). Having an adequate number of senior academics in ACI, with specific skills, motivation,
127 and awareness of their central role in mentoring, seems imperative (13). Exposure to excellent senior
128 academics as positive role models is acknowledged to be critical in influencing career choices among
129 undergraduate and post-graduate students (14).

130 Mentoring in medicine and research, including the ACI field, has been described as an art and a
131 responsibility (15). Mentors need to practice productive interactions to guide mentees through their
132 professional path, support their professional growth and help them develop long-term goals (16).
133 Mentors may also find this educational experience of great value for their own professional aspiration
134 (17). The ultimate goal of mentoring is to prepare mentees to become independent and high-quality
135 HCPs and researchers. The success of the mentorship process strongly relies on the level of
136 motivation and commitment of mentees to a high workload. The quality of the interactions between
137 mentors and mentees is also critical and should be based on a sense of frankness and a trust of shared
138 goals to guarantee an advantageous engagement in the process.

139 Selecting a shared project is a core feature of the mentorship process (18). The collaboration project
140 chosen should be realistic for the pair, in line with the mentor's capability to support the mentee's
141 expertise, to promote creativity and collaborative efforts between them. Successful projects leading
142 to career-long relationships should be highlighted to demonstrate a positive track record for other
143 potentially interested professionals in the specialty field (17). A calendar of regular meetings of the
144 pair should be planned, in association with periodical progress reports regarding identified objectives
145 (15).

146 Regularly discussing both positive and negative experiences is of high value to highlight how the
147 mentee is progressing to find personal solutions to potential problems. This approach allows mentees
148 to leave their comfort zone and be open-minded and ready for the possibility of alternative solutions
149 that may influence their individual professional trajectory. Of note, mentors should guide mentees
150 considering their strengths and preferences, which are deemed of critical importance for career
151 success (15).

152 Scientific ACI societies should have a significant role in the growth of the ACI community and
153 promoting mentorship programs should be part of their educational goals. Since 2011, the European
154 Academy of Allergy and Clinical Immunology (EAACI) has promoted a successful mentorship
155 program targeting post-graduate junior members (JMs), which has recently reached its 10th year

156 **(Table 1)**. The EAACI Mentorship Program was developed as an active tailored experience based on
157 a bipartite working model in which the mentee and the mentor are both protagonists of the relationship
158 through active collaboration, beginning with a shared plan **(Figure 1a)**. This program aims to support
159 young HCPs and researchers to enhance their professional skills and network by optimizing their
160 interaction with senior experts from leading institutions in the field. Recently, a new EAACI
161 mentorship program has been designed for undergraduate students, called the EAACI Allergy
162 College, to promote the ACI field as a desirable career choice (19) **(Figure 1b)**. Moreover, the EAACI
163 offers the opportunity for JMs to apply for Clinical and Research Fellowships in the field of allergy,
164 which aims to promote education and research, favoring the mobility of young physicians and
165 researchers to other countries (19). For all these projects, committees composed of junior and senior
166 members work together to find candidates and optimal matches between couples based on specific
167 features according to every program's particular characteristics.

168 In conclusion, the ACI field is going through a period of exciting transformation, with breakthrough
169 advancements for scientists, HCPs, and patients, comprising novel management and preventive
170 options (20). The EAACI Mentorship Program model, which, together with the other initiatives from
171 the Academy, has been proven successful, may serve as an educational model for other scientific
172 organizations in the ACI field and other fields to build up the next generation of high-level HCPs and
173 researchers.

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182 **Table 1.** The EAACI JMA Chairs and MP Coordinators 2009-2024.

	2009- 2011	2011- 2013	2013- 2015	2015- 2017	2017- 2019	2019- 2022	2022- 2024
JMA Chair	Chrysanthi Skevaki	Enrico Heffler	Alexandr a Santos	Olympia Tsilochrist ou	Ibon Eguiluz	Carmen Riggioni	Leticia De las Vecillas
MP Coordinator	Chrysanthi Skevaki*	Serena O'Neil & Milena Sokolows ka	Serena O'Neil	Ibon Eguiluz	Pavel Kolkhir	Mattia Giovanni ni	Daniela Carvalho

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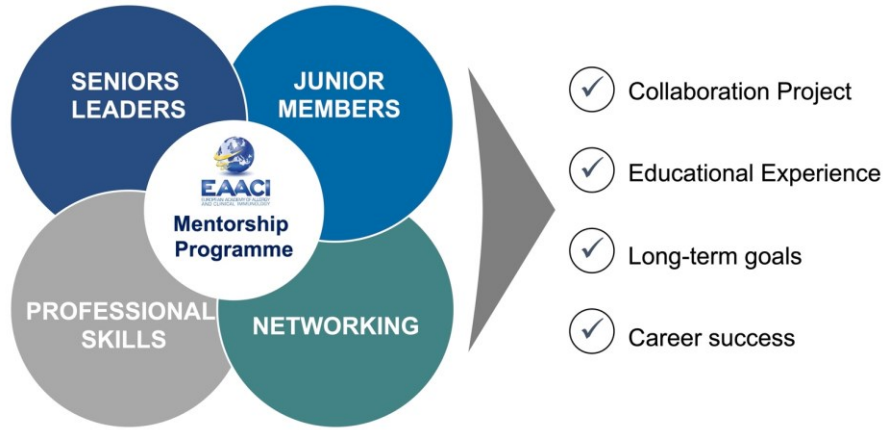
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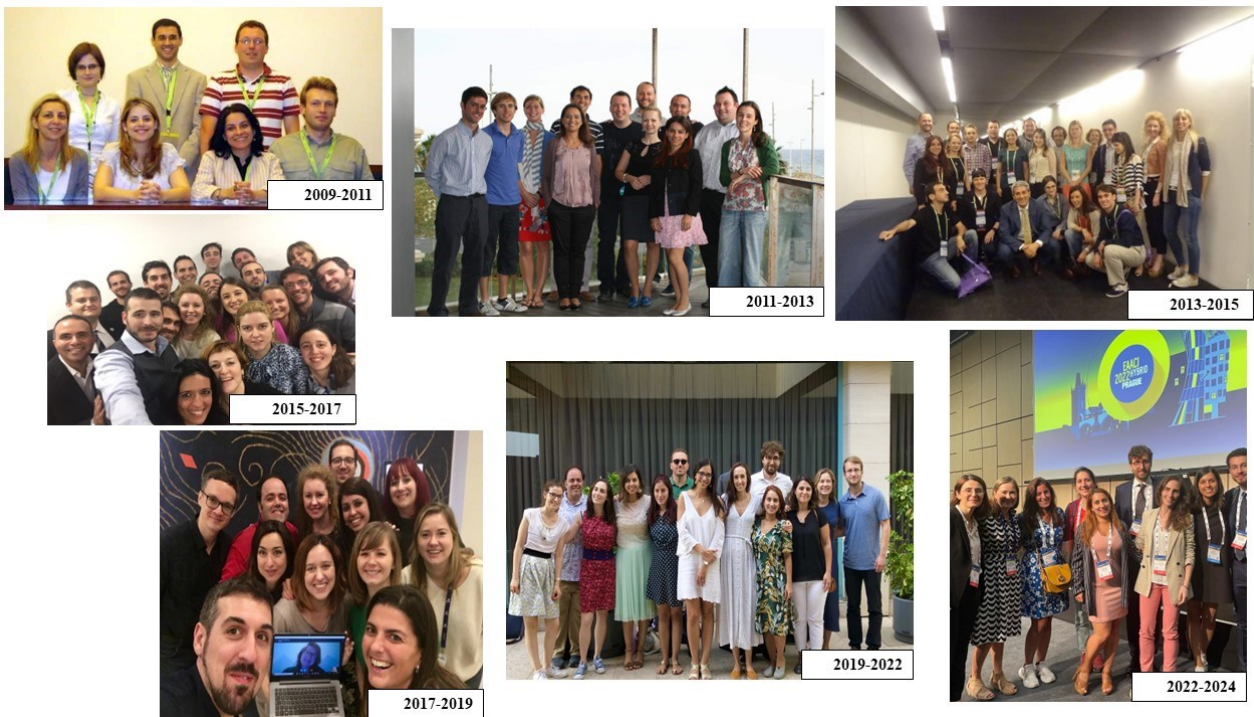
198 **Figure 1a.** Working model of the EAACI Mentorship Program



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201 **Figure 1b.** The EAACI JMA Board (2009-2024).



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257 **Conflict of interest:**

258 I.A. gets consulting fees from Pfizer, AstraZeneca, Chiesi, and Sanofi; payment or honoraria for
259 lectures, presentations, speakers bureaus, manuscript writing or educational events from Pfizer,
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264 speakers bureaus, manuscript writing or educational events from Novaartis, Thermofisher, and
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266 R.G.W. served as the President of the UEMS Section and Board of Allergology until 16 September
267 2022.

268 P.K. gets consulting fees from ValenzaBio; Payment or honoraria for lectures, presentations, speakers
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270 M.S. served as the Chair of the Board of the EAACI Basic and Clinical Immunology Section; member
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272 S.G. has been serving as the President of EAACI between 2022-2024.

273 M.J. gets consulting fees from Allergopharma, Stallergenes, Regeneron, Pfizer, and Chiesi; Payment
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276 Monitoring Board or Advisory Board of Allergopharma; Clinical Investigator Honoraria from GSK,
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