



FIMM

Fédération Internationale de Médecine Manuelle - Internationale Gesellschaft für Manuelle Medizin - International Federation for Manual/Musculoskeletal Medicine

Minutes of the 2016 FIMM General Assembly
Varna BULGARIA
September 16, 2016

Secretary-General

Draft Version for Exec Board Approval – Full Notes

Delegates, guests and representatives representing fifteen (15) National Societies from around the world convened in Varna for the 51st FIMM General Assembly (GA). All were cordially greeted by **Ilia Todorov, MD** secretary of FIMM's host National Society, the Bulgarian Society for Manual Medicine (BSMM) and **Todor Todoroff, MD**, the BSMM president. Also present were invited guests representing a manual medicine society in South Korea (applying for membership) and an invited guest from the British Institute for Musculoskeletal Medicine (BIMM).

PRE-PUBLISHED AGENDA of the 2016 FIMM General Assembly held in collaboration with the Bulgarian Society for Musculoskeletal Medicine on Friday, September 16th 2016. No additions or modifications.

Morning session 08:30-13:00

1. *Opening by the President, election of two counters of the votes*
2. *Presentations of the representatives of the national societies (limit 4 min/presentation)*
3. *Matters arising from the minutes of the last General Assembly (Copenhagen, Denmark)*
4. *Report from the President*
5. *Report from the Secretary General*
6. *Report from the Treasurer*
7. *Report from the Auditors*
8. *Election/confirmation of the Auditors*

Afternoon session 14:00-17:00

9. *Report from the Chairman of the Education Board*
10. *Report from the Chairman of the Health Policy Board*
11. *Decision on the proposed changes of the FIMM statutes*
12. *Decision on the membership fees for the next year*
13. *Membership (admissions/suspensions)*
14. *Date and place of the General Assembly 2017*
15. *Any other business*
16. *Closing the General Assembly by the President*

AGENDA ITEM # 1: Opening & Logistics

The 2016 FIMM General Assembly was called to order in the hall of the Swiss-Belview Hotel Varna (Bulgaria) by the president at 9AM. Two Vote Counters were nominated: **Yacov Fogelman** (Israel) & **Craig Appleyard** (Canada) – Accepted Unanimously

Present:

- Executive Board Members: **Simon Vulfsons, Michael Kuchera, Aharon Finestone, Wolfgang von Heymann, Bernard Terrier, Marc-Henri Gauchat, Sergey Nikonov**
- National Society Delegates/Representatives: See TABLE from Item #2
- Regrets from Hungary, Japan, Poland, Slovak Republic and Spain.

- Invited South Korean MM Society advocates: **Byung-Cheul Shin; Tae-Yong Park, Hoe-Cheon Yang;** and **Jung-Han Lee**. Also in attendance was **Sung Soo Chung** (Associate Director, Institute of International Health at Michigan State University and Honorary Board Member of the Korean Society of Manual Medicine.)
- Invited Board member from the British Institute of Musculoskeletal Medicine (BIMM): **Richard Smith MD**

Thanks were extended to the Danish national society for hosting us last year and to the Bulgarian national society for their work to host us this year. The president reviewed the pre-published Agenda as well as logistics related to signing in and the various dinners and social activities to follow this Assembly.

AGENDA ITEM #2: National Society Reports

Consistent with past FIMM tradition, the hosting national society (from Bulgaria) was invited to present first followed alphabetically by national society reports made in person (or offered via correspondence). The table below lists the official representatives and any guests along with pertinent membership statistics; information presented indirectly or via correspondence appear in italics. Complete powerpoints or portions thereof (as provided by the representative delegates are to be found in the [NATIONAL SOCIETY REPORT SUPPLEMENT](#) – see hyperlink).

<i>National Society / Delegation Representing Manual Medicine Physicians in COUNTRY:</i>	<i>Reported Membership</i>	<i>Example of Content in REPORT SUPPLEMENT</i>
Bulgaria (HOST SOCIETY) Ilia Todorov with Todor Toderoff	n=44	Society made major educational modification to move towards FIMM Educational recommendations in MM
Canada Craig Appleyard	n=53	Strong membership interest in prolotherapy; North American regional potential if FIMM reorganizes in that way
Czech Republic Vlasta Tosnerova	n=300	240 contact hours + 60 non-contact hours; has refresher courses for teachers and for students
Denmark Helle Borgstrøm with Karen Goss and Peter Stæhr	n=503 (77 meeting 300+ hour level)	Faculty:Student teaching ratio of 1:6 with recertification every 5 years; FIMM has helped by providing access to more/varied MM teachers
Finland Olavi Airaksinen	n=230	Last year celebrated the 50-year anniversary of national society which included FIMM president Vulfsons ; many courses; own society diploma
France Nadine Fouques-Weiss with M Rosenblatt and Norbert Tessiere	n=510	15 official university courses with diploma; contribution of French translation of the <i>FIMM Guidelines</i> ; copy of text by Robert Maigne (gift) presented to FIMM President Vulfsons
Germany Wolfgang von Heymann with Mathias Pszolla	n=5064 at "capacity MM level"	Core Curriculum = 320 hours (max 15:1 teaching ratio; Medical Specialist with Additional Competence in Manual Medicine; physician-level osteopathy = core 320 + additional 160 hours
Hong Kong Andrew Ip	n=109 with 24 fellows	Fellowship (2 years minimum education with testing) is benchmark musculoskeletal standard & qualification for teaching faculty
<i>Hungary</i> <i>Gabor Ormos - Regrets</i>	?	<i>Regrets – No new information</i>
Israel Yacov Fogelman with Negev Bar, (Simon Vulfsons & Aharon	n=92	Special outreach to teach Family Doctors; plan for FIMM 300 hr; willing to export knowledge to all members of FIMM at no cost unless wish certificate (internet coursework)

Finestone)		
Italy Carla Correggia for Carlo Mariconda	n = 170 (750-hr masters = 57 members; 150-hr = 25)	MM is sub-specialty of physiatry
<i>Japan - regrets</i>	n=425	Arthrokinematic Approach (Hakata Method) – Powerpoint slides sent and presented by Vulfsons
Kazakhstan Nadezhda Krasnoyarova	n=51	Two courses with focus on practical hands-on osteopathic MM; 12 articles to be presented by society members at upcoming neurological congress in Almaty (Oct 2016)
The Netherlands Henk Bultman	n=146	Health policy goal to gain recognition status beyond “alternative/complementary”; name change in January from NVOMG to NVAMG; Offer invitation to host FIMM in 2017 (at or near Utrecht)
<i>Poland - Regrets</i>	?	<i>Regrets</i>
Russian Federation Sergey Nikonov	n=400-428	Manual Therapist Specialty only by Neuro-Orthop-Pediatric physicians; in medical schools 15 hours manual therapy; estimate > 39,000 manual medicine physicians in country
<i>Slovak Republic – Not present (Family issue?)</i>	?	<i>No official report</i>
<i>Spain – Apologies from Javier Martinez</i>	?	<i>No official report</i>
Switzerland Marc-Henri Gauchat with Bernard Terrier	n=1255	New society website in French & German; New e-book with updated scientific basis with English version due soon; 2015 MM conference had 1100 physicians attending
Turkey Cihan Aksoy with Demirhan Dıraçoğlu and Tijen Acarkan	n=51 active (150 in premembership finishing certificate)	Credit extended to first teacher, Todor Todoroff , & 5 years of educational involvement by Wolfgang von Heymann (FIMM); Dr Aksoy presented gift to all delegates of T-shirts sporting FIMM Logo & Congress theme title, “More Science – Less Pain”
United States of America Michael Kuchera for Doris Newman	n=1200	Noted opportunity through new Single Accreditation System in Graduate Medical Education to increase MD education in MM with osteopathically-focused residencies & MD entry into neuromusculoskeletal medicine specialty residency programs; AAO adding MM coursework for interested MDs

AGENDA ITEM #3: Minutes of 2015 General Assembly

Minutes as electronically distributed were approved along with brief focused discussion of select elements from the National Society reports – **Unanimous approval.**

AGENDA ITEM #4: President Report (see **PRESIDENT REPORT SUPPLEMENT** via hyperlink)

FIMM President **Simon Vulfsons** presented a reaffirmation of the relevancy and vision of FIMM; his powerpoint appears as a **supplement** to these minutes for those wishing to view the entire presentation. In summary, he reported that he considers education and accreditation the main direction of FIMM after the ratification of the new statutes.

Items that he discussed with respect to education and accreditation included working in 2017 to define: (1) what FIMM recognition/endorsement means; (2) how best to foster international educational collaborations; and (3) how to appeal to a younger generation of physicians to learn about and value manual medicine (and the national societies representing MM).

He also announced FIMM's intention to provide for a measured "changing of the guard" in our executive leadership to include a transitional process in which Executive Board members **Nikonov** and **Gauchat** would resign from the Executive Board (during this year) with **von Heymann** and **Terrier** resigning the following year. This would allow new representatives (such as **Henk Bultman** [The Netherlands] or **Iliia Todorov** [Bulgaria] or other nominees) to be brought into leadership positions.

- After the President's presentation, a comment was made by **Vlasta Tosnerova** (Czech Republic) with agreement by **Nadine Fouques-Weiss** (France) that FIMM must retain the distinction of advocating for Manual Medicine physicians practicing manual medicine vs non-physicians delivering manual therapies. This major difference exists by virtue of a physician's education, responsibility and license to also make a complete diagnosis and in maintain treatment responsibility for underlying disease (etc).

The President's Report was **accepted unanimously**.

AGENDA ITEM #5: Secretary-General Report (See also **SECRETARY-GENERAL REPORT SUPPLEMENT**)

Secretary-General **Michael L. Kuchera** presented a brief presentation entitled, "Can We Talk About It?" It furthered his 2015 annual report encouraging representatives to "dare to dream and take dreams to action." The theme this year discussed the increase in FIMM communication efforts through *The FIMMCOMMunity* and the *FIMM Presents: The World of Manual Medicine* series and the potential for FIMM restructuring in a way to better meet our mission and vision that is part of this year's agenda.

- After the presentation, there was a brief discussion on if and how best to try to raise the "Google search" prioritization of FIMM

The report of the Secretary-General was **accepted unanimously**.

AGENDA ITEMS #6-7: Treasurer & Auditors' Reports (see also **TREASURER REPORT SUPPLEMENT**)

Item #6: Treasurer **Aharon Finestone** presented a synopsis of the financial reports of 2015 and 2016 as well as an overview of the proposed 2017 budget.

- **2015:** The "Vision/Mission" leadership program held in Frankfurt with the Executive and Health Policy Boards cost much more than expected (≈ 10000 euro more than budgeted)
- **2016:** The Treasurer corrected the "not yet" paid list of National Societies (those listed have given affidavit). Issues included those forgetting or unsure how the approved surcharges applied to "Large" vs "Small" societies.
 - **Action Item without motion: Delegates requested that the treasurer send information about any surcharge intent in advance (and not just notifying the national societies at the General Assembly through the National Delegates.)**
 - It was reported that the German national society had approved 8000 Euro to cover costs associated with the Prague midyear operational leadership meeting.
- **2017:** The proposed budget postulates acquisition of National Societies sponsoring attendance for those needed at the FIMM midyear operational leadership meeting. Other cost savings that the Treasurer feels are required were laid out including reimbursements in future not to include FIMM reimbursement for taxis (or other local transportation costs).
 - There was a discussion of long-term FIMM fiscal viability (not running out of monies) and Delegates were reminded of the change in dues within the last decade

that divided the Total FIMM Budget into: (1) Base Operation Budget + (2) Special Projects Budget (with special projects requiring an approved surcharge).

- From the reports, the FIMM membership count would base the budget and any surcharges on 9524 members from the 21 current National Societies.
- Other revenue sources could also include raising monies for FIMM by conducting small courses (projected to raise ≈4000 Euro). A trial in conjunction with this General Assembly was planned this year resulting in an anticipated 60 participants attending a 3-day course at 150 euro each.
- This budget will make a similar plan for next year by seeking sponsorship and/or conducting educational meetings.

Item #7 Auditors' Reports: After examination, **Todor Todoroff** and **Craig Appleyard** noted that the records were in order and the **motion to approve the financial reports passed unanimously. Budget for 2017 approved.**

AGENDA ITEM #8: Confirmation of the Auditors

Delegates confirmed the ongoing service of **Todor Todoroff (Bulgaria)** and **Craig Appleyard (Canada)** as Auditors.

AGENDA ITEM #9: Education Board Report (See also the **EDUCATION DIRECTOR REPORT SUPPLEMENT**)

Educational Board Director **Marc-Henri Gauchat** provided an overview of courses and the outcome of the UEMS (European medical specialties) process. It would seem that we now have the educational standard (for Europe) but inadequate funds to move it forward in a meaningful fashion. He also noted the difficulty and less-than-productive process of working via email (especially with the large, existing group) to create the ideas and details needed to conduct the business of the Educational Board.

- **Plan Perspective:** He feels that future Education Board activity should involve (1) preparing the proposed FIMM Certification project (for National Societies and individuals) and (2) helping small societies educate their members or train teachers.
- **Problems:** He cited lack of finances to fund substantive projects (production/conduct of a MOOC) or large Education Board meetings (etc) needed to advance the educational mission of FIMM.
- **Solution Proposed:** It was suggested that a reorganization of the FIMM Educational Board is needed to create a smaller but very active group of 3-4 dedicated individuals (working with FIMM and UEMS standards) rather than a large group requiring representatives from multiple schools of MM. With such a smaller group, they could efficiently use Skype. Even this smaller group would still need financial support approved by this General Assembly as a reasonably-sized and achievable FIMM educational project. It also will secondarily require both national interest and support to establish small working groups for specific projects.
- **NOTE:** There will be a mailing to the National Societies regarding our recommendations for the new constitution of the Educational Board.

The report of the Education Board Director was **accepted unanimously** with thanks were extended for all of his work to date.

AGENDA ITEM #10: Health Policy Report (See **HEALTH POLICY DIRECTOR REPORT SUPPLEMENT**)

Health Policy Board Director **Bernard Terrier** first provided an update on the status of Manual Medicine as a new added qualification approved through the Multidisciplinary Joint Committee (MJC) of the UEMS with the efforts of ESSOMM (as related to the FIMM mandate).

Dr. Terrier summarized the mandate, history and procedures leading up to the major action items affecting FIMM's Statutes that are to be considered at this General Assembly (see [HPB Director Supplement](#) hyperlink). Statute analysis as well as recommendations for statutory revision and implementation follow a mandate from the Executive Board in 2014, a HPB summit in Copenhagen (Sept 2015), a January 2016 questionnaire to all National Societies (results of questionnaire survey are detailed in the supplement), and the April 2016 joint HPB/Executive Board meeting in Prague (sponsored by the DGMM). The recommendations he presented at this GA represented the best options proposed to implement the agreed upon Vision and Mission of FIMM. They take into consideration two years of thoughtful effort shaped by contributions by all components of FIMM (including surveys, retreats, preliminary votes, and opportunities for open comments).

He concluded his report by noting that unless a new project for HPB is assigned by the General Assembly, there is no further need for any HPB supplemental budget in 2017.

The Health Policy Board Director's Report of past action and direction was **unanimously accepted**.

President Vulfsons recounted why FIMM decided to undertake this project (including possibly changing the seat of FIMM from Belgium). This included the Federation's perception of an archaic process coupled with the difficulty and cost of multilingual translations, as well as loss of an active Belgian national society to interface in that country. Also throughout the document certain wording changes are required (for example all references to "Association" will be changed to "Federation.")

STATUTES: Dr. Terrier then concentrated the majority of his time to walk the Delegates of this General Assembly step-by-step through proposals suggested by the conjoint recommendations of membership and leadership to modify and vote on the FIMM Statutes. In order to move forward with single majority, the document was split into more than 20 items (Exact wording for each item/article considered appears in [STATUARY REVISION SUPPLEMENT](#)). It was agreed that the intention was for the General Assembly to vote on each part of the proposed changes and then the entirety at the end of the effort. Based upon the number of voting delegates it was determined that any final change in statutes would pass with 10 votes. All eligible voters are instructed to stay in the room until the Assembly is finished with this part of the agenda.)

- **Item #1 (Article 10: Official FIMM Language) – Add English as third official language**
 - Jan 2016 survey: Yes = 92%
 - Wording motion (shall be → are): **Vote 12 for shall; 3 for are = Pass**
 - Motion using second wording (are): Unanimous approval
- **Item #2 Seat of FIMM in Belgium – (The FIMM Board will find site)**
 - Jan 2016 survey: Yes = 100%
 - France prefers possibly that the seat is in the same site as the bank (Deemed not needed)
 - France wants to keep the French translation of the name of the Federation without the non-meaning word. NOTE that French version will not translate musculoskeletal medicine
 - As worded: **Unanimous approval.**
- **Item# 3-4: Aims of FIMM to match the Mission statement and Core values**
 - Jan 2016 survey: Yes = 85%
 - **Unanimous approval**

- **Items #5-6-7-8: Membership of more than 1 member per nation with transitional veto and terminology for observational member.**
 - Jan 2016 survey: Yes = 62%
 - This was noted to shift the emphasis from “representing nations” to better representing MM societies with common central missions and their patients)
 - French delegates note this is potentially dangerous if credentials not checked (so this is why they will vote “no”). **Rosenblatt** (France) also expressed concern about potential to support non-physicians unless carefully control. A rebuttal response was that published ahead and that all of FIMM votes on the overall entry).
 - It was pointed out that observatory status is two-way. (It was pointed out that **Richard Smith** from BIMM was attending in an Observatory capacity.)
 - Turkey: Concern involving the potential establishment of multiple groups ... emphasizes the need for quality definition of membership.
 - An analogy was pointed out regarding the Olympics where the flag can be antiquated concerning national borders in representing a group of individuals.
 - **ITEM 5: Types of members: Vote -- 14 for, 1 (Italy) against**
 - **ITEM 6: More than one ordinary member (per country) possible & transitional right to veto until 2021: Vote: 12 for; 3 against**
 - Note for interpretation of ITEM 18 Article 8 =” Qualified physician or surgeon” ... after 2023 this status will require physician/surgeon to reach the 300 hour standard in order for the National Society to count the individual as a member
 - **ITEM 7: Regarding Observatory Members: Vote -- 12 for; 3 against**
 - **ITEM 8: Honorary members: Vote – Passed unanimously**
 - **ITEM 9: Federation wording Vote – Passed unanimously**
 - **ITEM 10: Federation wording Vote – Passed unanimously**
 - **ITEM 11: Federation wording Vote – Passed unanimously**
 - **ITEM 12: no change = no vote**
 - **ITEM 13: Regional Focus Possibilities if needed & better composition of the Executive Board**
 - Jan 2016 survey: Yes = 77%
 - **ITEM 13 (Article 6): Regional structure flexibility to enhance FIMM performance – Passed unanimously**
- **Item 14 (Article 7 from 2006) – Executive Board Makeup**
 - An introduction of the concept of a president-elect in place of an elected Science Liaison position was discussed along with timing (2 years prior to the 4-year election cycle) was inserted.
 - Wording of “will be” → “may be” was confirmed. ...
 - **Item 14 (Article 7 as modified): Vote -- 14 for; 1 abstain** (France)
- **Item 15: Federation wording – Passed unanimously**
- **Item 16 -- no change, no vote**
- **Items 17-22: Avoiding disproportionate power of small members having 1 vote and better balance for big/very big members (“Fractions”).** Several discussions surrounded this item:
 - Possible regulations affecting dues (currently for large and small societies)
 - Should a number be established such as 100 members per vote? That example would result in 50 votes for Germany. What should a minimum number be to garner a vote?

- The currently proposed number of 50-99 members in a society or block of societies needed for a single vote was discussed with the concern that this might potentially alienate small groups.
- **Motion:** The recommendation of 50-99 members in the lowest fraction granted a vote be reworded to denote 25-99 as the lowest fraction. **VOTE: 12 for; 3 against.**
- Another major discussion centered about the status of society members who have not achieved the FIMM-recommended full hours but who have been practicing as MM physicians.
 - It was noted that “quality” is important. The *MM Core Curriculum* was recommended in the 1990’s; only recently FIMM published its *Educational Guidelines for MM Safety & Efficacy*.
 - Discussion pointed out that we now have a 7-year transition period to meet this criteria while all of the time encouraging quality.)
 - A coffee break was called for further discussion opportunity.
 - INTERPRETATION: “Qualified MM physicians” should be defined by the MM organization with the *FIMM Guidelines* in mind. (However, any senior MM practitioner who is “grandfathered” into this classification would be a qualified MM physician and for this subset, FIMM would count as a qualified member those that the National Society defines as a qualified MM practitioner.)
- **ITEM 17-21 (Article 8¹): Approve voting Fractions with a minimum of 25 qualified members** (Note on **Item 18:** qualified defined by national society with newly accepted qualified physicians meeting educational bar after 2023) + **ITEM 19 (Article 8¹): Votes per Fraction** (Note: Can’t change fractions during a GA) + **ITEM 20 (Article 8): Fractions continued: Article 8¹ items on Fractions passed unanimously**
- **ITEM 21 (Article 8²⁻³):** no change, no vote
- **Item 22 (article 8⁴): Federation wording – Passed unanimously**
- **Item 23 (Articles 8⁵⁻⁸): Recommendations are not binding** (Note that the wording “Amendments ... need the approval of XXX to become valid” means a percentage that will be specified by requirements related to where the new FIMM seat is located): **Vote -- 14 for; 1 abstain**
- **Items 24-25 (Articles 9 & 11): Federation wording – Each individually passed unanimously**
 - Note date changes “adopted by the General Assembly of FIMM on re new statutes and moniteur belge”) – **Passed unanimously**

The Health Policy and Executive Boards thanked Delegates for their support and ratification of the Statute recommendations.

MOTION: VOTE (IN ENTIRETY) ON ALL STATUTE CHANGES NOTED IN ALL COMPONENTS INDIVIDUALLY APPROVED ABOVE: Passed -- 13 for and 2 Abstain (France/Czech)

AGENDA ITEM #12: Fees

Previously approved

AGENDA ITEM #13: Membership (Admissions/Suspensions)

A manual medicine national society from South Korea (KSCMM) presented their case for admission to FIMM. The application contingent consisted of **Byung-Cheul Shin** (presenter) as well as other representatives **Tae-Yong Park, Hoe-Cheon Yang,** and **Jung-Han Lee**. Also present was **Sung Soo Chung**, Associate Director, Institute of International Health (IIH) at Michigan State University and Honorary

Board Member of the Korean Society of Manual Medicine. The KSCMM was established in 1991 and is primarily made up of physicians who have a Traditional Korean Medicine base education. The meaning of Traditional Korean Medicine was discussed; it is defined by Korea as a physician equivalent. Instead of western pharmacology, they incorporate a combination of herbal medicines, manual medicine and acupuncture in their therapeutic approach to disease and dysfunction. The “Chuna” appellation for their MM integrates Chinese Tuinae, American chiropractic and American osteopathic principles.

- The national society has 1056 members (out of 3200 total trained) and of these over 1000 members have more than 300 hours of recorded MM education.
 - The basic MM educational base of the group currently consists of 126 hours postgrad MM. They also have advanced/optional coursework and CME totaling an additional 258 ours. To be consistent with the FIMM recommendations they plan to modify their current education process and counting methods.
- Their conventional manual medicine training comes primarily from Michigan State University College of Osteopathic Medicine (MSUCOM) using translations of the Greenman *Manual Medicine* text as well as translations of *Foundations for Osteopathic Medicine* (and other osteopathic texts). Their primary teacher for 6 years has been **Lisa DeStefano, DO** from MSUCOM using her edited version of the Greenman text.
- After answering delegate questions, there was a **MOTION to admit the KSCMM as a FIMM National Society. Vote was 13 for admission with 2 delegates abstaining.**

AGENDA ITEM #14: 2017 General Assembly

Offers to consider include an invitation by the National Society from The Netherlands for 2017 and the possibility of convening in France (Paris?) in 2018.

- **MOTION:** It was moved to accept the generous offer of The Netherlands to hold the **2017 FIMM General Assembly on September 15, 2017 in Utrecht, The Netherlands.** (Additionally the Executive Committee would meet September 14 and courses could be scheduled for September 16-17.) **Passed Unanimously.**

AGENDA ITEM #15: Other Business

Committee and boards are encouraged to respond to any call and move forward.

- A midyear leadership meeting is hoped for if funding can be coordinated.
- Upon recommendation of France, the financial committee will add **Rosenblatt** as a member. (No vote needed.)
- Additional gift T-Shirts promoting “More Science – Less Pain” are available.
- At 6:30 the group will meet for an on-foot professionally-guided tour of Varna including the Roman baths. Dinner at Captain Cook is at 8PM in the harbor area.

AGENDA ITEM #16: Closing the General Assembly

The president officially closed the General Assembly at 5:05PM.

Respectfully Submitted,

Professor Michael L. Kuchera, DO
Secretary-General, FIMM