

## **PREFACE**

**of the book**

***La Recherche Clinique, from the idea to the publication***

**1995 Edition**

It is with enthusiasm that I introduce this first volume of clinical epidemiology which, with the university degree from the University Claude Bernard, is an element of public life of the RECIF -Réseau d'Epidémiologie Clinique International Francophone- created by the Marcel Merieux Foundation in 1987.

This new activity complements the one we have been pursuing for 10 years at Les Pensières, a WHO Collaborating Center, to train field epidemiologists -the "epiterians"- in liaison with the Atlanta CDC: the IDEA (Institute of Applied Epidemiology) is organized for this purpose with the School of Rennes and the General Directorate of Public Health; this is how we have trained several hundred epidemiologists. These 'epiterians' are posted in French health structures, in particular the National Public Health Network.

At the origin of the clinical epidemiology program, John Evans' report in 1980 reported on the distance between public health concerns and the daily clinical practice of doctors, and Kerr White advocated a necessary rapprochement between the school of health public and medical school. In addition, in numerous articles, Thomas Chalmers estimated that 10 years would be needed to integrate the results of research into current clinical practice.

The needs for rapprochement were felt. Clinical and biological medical research should lead to medical practice based on validated diagnostic and therapeutic approaches. More multidisciplinary knowledge, particularly in economics and sociology, should enable clinical practice to be carried out with a concern for public health as well. Having a common, more objective, more statistical language then became even more necessary, in order to compare and evaluate observations. Finally, a clinical epidemiology methodology bringing together all of this knowledge was proposed by the pioneers of McMaster University in Canada.

English-speaking countries set up clinical epidemiology courses within medical schools themselves, included in the programs of each medical specialty. With the help of the Rockefeller Foundation, four university centers

provided this teaching, in McMaster (Canada), in Philadelphia (Pennsylvania), in Chapel Hill (North Carolina), and in Newcastle (Australia).

Embodied in the INCLEN network (INternational CLinical Epidemiology Network), and thanks to significant logistical and financial support from English-speaking countries, these programs were disseminated in medical schools in 17 countries of the English-speaking world. It is in this context that the Marcel Mérieux Foundation had the chance to intervene and propose the development of the teaching of Clinical Epidemiology for French-speaking medical faculties.

This specific program is currently being developed at Claude Bernard University. I would like to thank our colleagues from Lyon, whose influence this book reflects, hoping that it will extend to the Mediterranean epidemiology center. I made a commitment in Tunis to create it within the framework of the 'Louis Pasteur Year' without forgetting that 100 years ago, Marcel Mérieux was at his side to organize with Elie Metchnikoff and Alexandre Yersin the technical microbial courses under the directed by Emile Roux.

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