

July/August 2008

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Diary in Pictures

Diary in Pictures



Graduation Dinner
Mr Con O'Brien, Dr Michael Murphy, Prof David Kerins,

Dr Clare O'Leary (recipient of Medical School Medal 2008), Prof Michael Berndt



Prof Liam Kirwan – Book Launch
Dr. John Thomson, Dr Michael Morka



Prof Liam Kirwan – Book Launch Prof Liam Kirwan, Mr Ted Buckley



Prof Liam Kirwan – Book Launch William Kirwan, Prof Liam Kirwan, Mrs Marie Kirwan



Retirement as Chairperson of Medical Alumni Committee of Dr Paule Cotter Dr Barry Ferriss, Dr Eamonn Shanahan, Prof David Kerins, Dr Paule Cotter, Dr Katy Keohane, Dr Will Fennell, Mr Michael Hanna



Welcome

Welcome to the Summer Medical Alumni Newsletter for 2008. Firstly let me acknowledge the outstanding contributions of Paule Cotter as Chairman of the Medical Alumni Committee for the last 6 years and Barry Ferriss as committee member for 18 years (see photo). We are grateful to the current contributors and welcome contributions from graduates for future editions on their memories of UCC or other experiences they might like to share.

You will find enclosed the agenda for the annual scientific meeting to be organised by the Medical Alumni Committee and to be held in UCC on October 9 and 10, 2008, Class reunions will be held around the meeting and for those who wish to organise class reunions we are glad to help in any way in medical alumnus office, at this or other times in the year. Our president, Michael Murphy, is very keen to facilitate class reunions on campus so all can see signs of change and progress. Already plans are afoot to organise two meetings in 2009: St. John's Newfoundland where the class of 1974 will organise their reunion with local chairpersons, Pat and Benvon Parfrey (August 22-23, 2009) and the Annual Scientific Meeting in UCC (September 17-18,

This year we are delighted to include a photograph of the honorary graduands for 08 including Michael Hyland, class

of 1957 (Degree of Doctor of Medicine), Patrick Fottrell (Degree of Doctor of Science), former president of UCG whom many will remember as demonstrator in biochemistry in the early sixties, and Samantha Power (Degree of Doctor of Laws), whose mother, Vera Delany, was a contemporary in physiology and biochemistry in 62-64 before proceeding to MD and Ph.D at UCH in London. The other recipients were Niall Mellon and Pat Rice.

Another recent highpoint was the launch of Liam Kirwan's book on "Political Correctness and the Surgeon" in the staff common room on May 5th to a full house. Ted Buckley introduced the book with his expected incisiveness and aplomb. The book is a remarkable opus, satirising political correctness. Maybe he is setting the seeds for a centre for dissent in UCC? If you cannot wait (and you should not!), the book can be

obtained on Amazon, at Liam Russel, Oliver Plunkett St, Cork or at the Annual Scientific Meeting.

The Medical Alumni Committee wish to offer congratulations and best wishes to the medical graduates of 1948 from UCC, including: Cornelius Donovan, Maurice Flynn, Bridget Foley, Veronica Guy-Pearson, Joseph Hanley, Margaret Gowan, Bernard Murphy, Norah Nyhan-Carew, Denis O'Sullivan, John Sheehan, Dorothy Sheehy, John Twomey, Richard Walsh, Sean Crotty, Denis Wilson.

The other development of note is the arrival from Australia of Professor Michael Berndt as Head of the College of Medicine and Health, within UCC. You will have an opportunity to meet him at the Scientific Meeting where he will outline his vision for the future in UCC. See interview included in this Newsletter.

Dr. Will Fennell Chairperson, UCC Medical Alumni Association

Interview with Prof Michael Berndt

You are now Head of the College of Health and Medicine, including Pharmacy, Nursing, Clinical Therapies, Dentistry and Medicine, how did we attract you, an internationally renowned medical scientist, to come to Cork at this time?

There is never a single reason for doing anything in life. My background has been primarily in research but in more recent years I have shifted in part to academia. In Australia, at Monash University, I was head of a

Department of Immunology and I was also Deputy Dean Research for the Faculty of Medicine, Nursing and Health Sciences. The Faculty has a similar structure to here except that at Monash we didn't have a dental school and pharmacy was in a different faculty. Although my background has primarily been in research, I enjoyed this administrative role, and for several years I have been looking for a more senior leadership role within a university. I have been in Ireland on and off over the past couple of years

as a Walton Fellow at the Royal College of Surgeons in Dublin and liked Ireland and the people. The attraction of Cork is its size – it is very manageable. I like UCC as it is a single campus, it is close to the teaching hospitals, and it is compact. So when I came and interviewed and was offered the position, it was relatively easy to accept. I like the staff, I like the people, and I think there is enormous potential here in Cork for further development both in research and in teaching and learning.



You already held similar responsibilities at Monash University in Australia, and while I have not been to Australia all who have worked there comment on the better organisation and excellent quality of training and services there. Do you find similar challenges and problems here?

Well, I think the attitude is always that the grass is greener on the other side of the fence! One thing that I have been very impressed with here is the quality of teaching and learning within the college. The programmes in medicine, dentistry, nursing, pharmacy and clinical therapies are cutting edge and world best practice. In terms of teaching and learning, I think that UCC is doing as well if not better than what I was seeing in my own university back in Australia. I think that the approaches for teaching the students are superb in terms of simulations, patient interactions, etc. I am less familiar with the clinical training within hospitals, but my sense of it is that it is very similar and that the pressures on the system and challenges are the same that we have in Australia. There is a constant challenge in terms of appropriate clinical placement regardless of the area, whether it is pharmacy, clinical therapies or medicine. There are the same challenges of liaison and coordination between a university and a separate health system as in Australia. but nothing that appears to be insurmountable.

You are a very distinguished scientist with multiple awards over many years. Do you think it is an advantage or a disadvantage not to be a frontline clinician?

I have thought about this question over the years and from my own viewpoint I haven't seen a disadvantage. There is a clear advantage for the clinician investigator who sees the clinical problem and has the capacity to develop that insight. However, in over 30 years in my own field, which is thrombosis and inflammation, I probably know more about platelet biology with respect to haematology than most haematologists. Within that area of speciality, I don't think it has been an impediment to the type of research I have done. I should point out that most of the time in my career, I have been in research labs based in

hospital settings. I spent 10 years in the 1980s at Westmead Hospital in Sydney and worked closely with the physicians, cardiologists and haematologists in clinical research. I trained a number of haematologists and cardiologists during their PhD programmes and received in turn the benefit of their clinical insights.

You were previously in Ireland as a Walton Fellow and you have visited Ireland a number of times. What do you see as the major differences between our two systems, which have evolved from the Anglo Saxon model, even though we are 12,000 miles apart?

As I said before I really don't see huge differences between the University systems in terms of education and research. I think one major issue, which I don't think Ireland has come to grips with, is the potential for research track only careers. In Australia and also in the US, there is the potential to develop a research only career. This is something I had the benefit of in competitively advancing through the system to professorial level on a research only track funded by fellowships and government. Here in Ireland, this doesn't seem to exist, and therefore a whole generation of researchers have not had the capacity to concentrate primarily on research. There is a large gap here between the potential to make the most out of tier 4 trained people in terms of postdoctoral training and available career structures, and thus a situation where opportunities for doing research are limited to academia and hospital appointments, and outside of that there is very little.

What do you see as the major challenge for the UCC School of Medicine over the next 5 years and where do you see the best opportunities?

My vision for the College is that it achieves the next level of excellence in terms of teaching and learning and research, but particularly research. There is fantastic research currently within the College and I would like to see further development in these areas of research strength. One of the areas under current development is the potential formation of a new School of Life Sciences, which would be a school embedded both in the College of Medicine and Health and in the

College of Science, Engineering and Food Sciences. It would comprise the Departments of Anatomy, Physiology, Pharmacology, Biochemistry and Microbiology. This School would maximize research opportunities and increase PhD student numbers. In most universities, this combination of disciplines is usually the engine room of the university and the jewel in the crown; it's the pool from where most PhD students are derived. The challenge I think over the next couple of years is to be able to maintain our ambition for excellence in what would appear to be a fairly limiting financial situation that will affect not only the Irish economy, but the universities and hospitals as well. It is matter of being smarter in the way that we develop at a time when resources are limited.

Your research experience has been on three continents, in Universities collaborating with national institutes and industry. Do you feel that in UCC we are yet at the stage that further developments in research can become the driver for further expansion and quality?

The twin pillars of any university are teaching and learning, and research, but the reputation and branding of a university is always based on its research. They never say that Harvard is a great university because it is good at teaching, they say that Harvard is a great university because it is fantastic at research. I think that research is the driver for excellence. The quality of research gets reflected back into the teaching and learning experience and I think that there are real opportunities. The basic sciences, clinical sciences, and also public health, are very strong in Cork and key to interactions in translational research and industry. In essence, we have the pipeline to go from discovery right up to early phase II trials in our interactions with industry and pharma. We have the potential and critical mass to do things better than industry can in terms of research and development and I think that there is a real opportunity for these types of collaborative interactions.

In October we will have our Annual Scientific Conference, and I know that our Alumni will very much look forward to meeting you and hearing you present your vision at the meeting. Thank you Professor Berndt.

Cardiovascular Services Development in the South of Ireland and UCC.

The story of the development of modern cardiac services in the South probably starts with the appointment of Maurice Hickey to Rialto Hospital in Dublin as Thoracic Surgeon. Maurice returned to Ireland in 1948 from the London Chest Hospital and operated in Rialto, Mallow and Castlereagh on a rotating basis Tuesday, Wednesday and Thursday and back to Dublin at the weekend. With the appointment of Des Kneafsey to Galway and Keith Shaw to Dublin, this gave Maurice the opportunity to go south full time.

During the 1950's he operated in Mallow in the Mallow Chest Hospital and in 1956 he relocated to the new St. Stephen's Hospital in Glanmire. In the same year Raymond Shanahan returned to Cork as Registrar in St. Finbarr's Hospital, having spent a year as the Ainsworth Scholar in Massachusetts General Hospital in Boston, working under Paul Dudley White. At that time Dr. Sean O'Toole was providing a consulting Cardiology service from Galway. Maurice encouraged Raymond to come to St. Stephen's Hospital, where he introduced cardiac catheterisation and later pacing. The earliest heart operations performed were closing of patent ductus arteriosus, closed mitral valvotomy and pulmonary valvotomy (under surface cooling) with excellent results. With the arrival of Des Gaffney as anaesthetist in 1960 they combined considerable animal laboratory work with their clinical work as they moved the frontiers forward. Together they had visited centres in the US, Scandinavia and the UK with the help of WHO funded fellowships.

Subsequent developments with profound hypothermia allowed surgery for coarctation of the aorta and septal defects. However haemolysis with profound bleeding hampered results and developments.

In 1968 Prof. Michael Brady was appointed to St. Finbarr's hospital and introduced peripheral vascular surgery from aortic aneurysm repair to peripheral vascular reconstruction. Around the same time Mr. Ted Buckley was appointed as the first Neurosurgeon in the South and this allowed a surgical approach to

vascular problems within the cranium. Michael Brady soon saw the need for a team approach and dispatched Joe O'Donnell to Massachusetts for vascular training, returning in 1978 and consolidated further the development of vascular surgery and underlined the importance of team work in sub-speciality areas. In 1978 Dr. Noel Cahill was appointed to the South Infirmary/Victoria Hospital as Cardiologist and Physician and introduced echocardiography to Cork. He had been at the forefront of the development of echocardiography in the United States as Director of the Echocardiographic Laboratory at the University of Chicago. Noel brought his patients to Baggott Street Hospital, Dublin for diagnostic coronary angiography on a weekly basis. In 1978 the Cork Regional Hospital was opened but without provision for cardiac surgery and investigations and pacing was carried out in a shared vascular radiology room. With the unexpected and premature death of Raymond Shanahan in August 1980, service development was hindered. Noel Cahill provided single handedly a city wide service for 2 years until the undersigned took up post at the Regional Hospital in July 1982. Coronary angiography was introduced to Cork in October 1982 in the shared vascular room in Radiology and 300 cases were performed in the first year. Until 1986 all patients referred for surgery had to be referred to Dublin where Maurice Neligan, Keith Shaw and Eoin O'Malley provided a willing and excellent service. Many phone call consultations were made after 10pm at night directly to their homes to facilitate the surgeon's timetable.

In 1983 Tom Aherne was appointed as Cardiothoracic Surgeon to the Cork Regional Hospital and after 2 years at University of California in San Francisco returned to take up his post in late 1985. This immediately reinvigorated the service development in Cork with angiograms exceeding 600 per year and he performed in excess of 200 open heart procedures, many pacemaker implants and provided the thoracic surgical service for all of Munster on an annual basis, single handed until 1996. The results were outstanding from the start, facilitated by his colleagues in anaesthesia, Des Gaffney, John Keogh, Mike Harris, Peter Kenefick and Declan O'Brien. Dr. John Erwin performed the first coronary artery angioplasty in 1986 while in Cork for a locum year. In 1987 Dr. John Kenny took up post in the Bon Secours Hospital bringing the benefit of his outstanding non-invasive skills to the Cork region. Further developments had to wait until 1995 with the appointment of Brendan Meany in Limerick Regional Hospital facilitated by generous support from JP McManus and until 1996 with the appointment of Aonghus O'Donnell as the second Cardiothoracic Surgeon and late in the same year Peter Kearney as the interventional Cardiologist at the Cork University Hospital (renamed 1994). In 1996 the Minister for Health, Brian Cowan launched a task force to advise on the development of cardiac services and launched its recommendations in 1999 "Building Healthier Hearts". This facilitated the introduction of cardiac rehabilitation in all the region's hospitals and prompted the appointment of a third cardiologist to

the Cork University Hospital. Brendan Gunalingham from Australia and later Janet Kirwan filled the position with distinction on a temporary basis until the arrival of Dr. Eugene McFadden in 2005.

In 1992 Prof Michael Murphy was appointed as Professor of Clinical Pharmacology and Therapeutics and Consultant Physician to Mercy University Hospital and Cork University Hospital. His special expertise in the investigation and management of hypertension and cardiovascular pharmacology had a major impact on the standard of care in these areas in all the UCC hospitals in a short time.

In 1999 Dr. Gerry Fahy was appointed to the South Infirmary/Victoria Hospital and Cork University Hospital in a joint appointment. This appointment had a specified special interest in cardiac electrophysiology and immediately Gerry proceeded to the introduction of electrophysiological studies opening the way for ablation of atrial and ventricular arrhythmias and bypass pathways, and introduced automatic implantable cardiac defibrillators and resynchronisation therapy with biventricular pacing modalities. This has opened new vistas for patients with complex arrhythmias, conduction problems and left ventricular dysfunction which has added enormously to the quality of life of many patients.

Dr. Carl Vaughan was appointed as Consultant Cardiologist to the Mercy University Hospital and the Cork University Hospital in 2004. Carl's special interest in secondary prevention and genetic conditions in cardiovascular disease have also helped to progress patient care in these areas as well as providing diagnostic and interventional cardiology service for patients in the Mercy Hospital. Service in the Mercy Hospital has been further consolidated with the arrival of Prof. David Kerins as Professor of Therapeutics in 2006. David has an outstanding background in imaging in cardiology including echocardiography and magnetic resonance imaging. In 2008, Dr M Jewitt joined Prof Michael Maher in the Radiology Department in Cork University Hospital to further

strengthen the Cardiovascular imaging strengths across UCC with Dr Liam Spence (Nuclear Imaging) and Dr Peter McEneaney.

In 2006 Prof. Noel Caplice returned from the Mayo Clinic as Professor of Cardiovascular Science and Consultant Cardiologist at the Cork University Hospital. This appointment was very much facilitated by fund raising locally and foundation money from Science Foundation Ireland and support by University College Cork.

This will provide an excellent basic science facility for the development of new specialised treatments including stem cell therapy. This will also facilitate the introduction of structured research training for trainees in cardiology and vascular biology encouraging clinical investigation in these areas.

Other developments in the Southern region were the appointment of Dr. Terry Hennessy to Limerick Regional Hospital and Ennis General Hospital in 1998 and the appointment of Dr. Conor O'Shea to the Bon Secours Hospital as interventional Cardiologist in 2003. Also in 2006, Dr. Niall Colwell took up post in South Tipperary General Hospital in Clonmel and Dr. S. Abbas in Nenagh General and Limerick Regional Hospital. Dr Briain McNeil was appointed to Waterford Regional Hospital in 2008. A consultant at Kerry General Hospital is long overdue but will hopefully become a reality in 2009. Dr Peter Kelly has returned from the Cleveland Clinic and joined the UCC cardiac group based at South Infirmary Victoria University Hospital and Cork University Hospital from July 2008.

While I have focused on the Medical Personnel in the development of cardiac services in the South of Ireland, it is clearly essential to acknowledge the help from all the other medical services including nursing to radiology, cardiac technicians and administration, and the team work involved to bring the services to their present level. A few in particular deserve special mention, Prof. Denis O'Sullivan, Eileen Brosnan, Eleanor Mills, Catherine Keane, Martin Hargrove, Mary O'Byrne, Tony McNamara and Christy

Walsh whose contributions over many decades and difficult circumstances are much appreciated and were instrumental in keeping development on track.

In 2004 as part of Irelands EU

presidency initiative the Minister for Health and Children, Micháel Martin, brought the European leaders in Cardiology to Cork to discuss and advise on the means of standardizing data collection across the enlarged EU for cardiac events and interventions to better inform government decision makeup. Later in the same year the Minister brought the Health Ministers from all the EU countries to Cork to copper-fasten the recommendations of the EU cardiology community and signed a memorandum of understanding with US Secretary of State for Health Thompson to facilitate EU-American collaboration in fighting Cardiovascular disease. Both of these meetings were made possible by the government's initiative in launching "Building Healthier Hearts" and Dr. Peter Kearney's membership of the Board of the European Society of Cardiology. All in the Irish Cardiac community appreciate Peter's commitment to making the Irish voice heard in Europe. The Minister and Peter have together ensured that Ireland contributes beyond its size to the European effort, and must auger well for the future.

The above story shows a remarkable phase of development over a 50 year period from the opening of St. Stephen's Hospital in Glanmire in 1956. However while much work has been done, the opportunities now are better than ever for managing and preventing cardiovascular disease in the population. So while much work has been done, there is much more to do and there are even more exciting times ahead with the planned Cardiorenal development at the CUH to facilitate the centralisation of invasive facilities for the whole city and region scheduled to open in 2010.

(Reproduced with permission of the Irish Heart Foundation)

Dr Will Fennell

Jennings Gallery - Michael Hanna

In one of the earliest issues of the Medical Alumni News, I contributed an article about Brookfield – it was brand new then back in 2006 – which was a call to those of you who have a love of the visual arts to share in an effort to further beautify a beautiful building and I suggested some ideas that might bring that along.

While donors did not tumble out of the ether with offers to become involved in quite the way I had hoped, nevertheless we have made progress. With the help of €15,000 from Buckley Foundation we have converted the central landing in Brookfield House into the Jennings Gallery, named in honour of the Jennings family, builders and owners of Brookfield House in 1897 and providers in one way or another of most of the land on which UCC now stands. It is fitting I think that we have a corner of our campus that bears their name. Our logo (see picture) was designed by Alan O'Shea of "designmatters" of Ballygarvan, Co Cork and is taken from the plasterwork decoration on the ceiling of the front entrance hall of the house. The fleur symbol suggests both the history associated with the house and the creative growth of the artists who exhibit in the Gallery.

The Gallery was opened by our Chancellor, Dr Garret FitzGerald, in late January, coinciding quite incidentally with the first visit to the College of Medicine and Health of Professor Michael Berndt of Monash University, our new Head of College. Michael was on a week long visit to meet faculty and found himself in the middle of a bizarre evening of mirth and celebration with over 50 pictures of all sizes and varying moods and subject matter painted by the residents of the Kilkenny Collective for Art Talent, a derivative and successor to the Camphill Community for those

with various kinds and degrees of disability. During his speech, Garret gave us some delightful anecdotes of Ruairi Quinn at the cabinet table arresting other ministers in full flight by quietly passing around cartoon doodles of their performances. Then the KCAT artists responded with a winsome directness and simplicity that was deeply moving. We sold 16 pictures on the opening night and that climbed to 22 in succeeding weeks, including a large 12 foot by 4 foot canvas by Thomas Barron that now brightens up the atrium and complements the Matt Lamb facing the front door.

Some weeks later, Mary Leland, feature writer in the Examiner, wrote a fine article about the gallery and about the Brookfield building as a whole which did great justice to a building that is still remarked on by those who visit for the first time and is greatly loved by those lucky enough to work in it (Examiner Property Supplement 8/3/08).

It was a great privilege recently to be able to host a collection of 17 paintings by secondary school students, all finalists in a competition run by the Student Health Service at UCC on the occasion of the Irish Student Health Association Conference at Jury's Hotel Cork on Friday 7th March. The overall winner was awarded the Robin Godfrey Memorial Prize, presented by Mary Godfrey. The competition was the brainchild of Dr Michael Byrne, the



medical director of the Student Health Centre who invited students in selected schools around Cork to contribute pictures under the themes of Health, Student Life, Learning, and Life in Cork.



Side Streets of Cork by Ruth Kelleher (Mayfield Community School)

The pictures will find a lasting home in the newly refurbished Student Health Centre on College Road. It is a wonderful demonstration, if demonstration is needed, that visual creativity, the power of the imagination to instruct the hand in the making of images that reflect our personal views of the world is all around us. Michael welcomed the students and their teachers and parents in a fluent Irish and the President, Dr Michael Murphy, presented each with a reproduction of their winning painting. Two of the prize-winning paintings are shown.



So much to do, so little time by Sean Layton (Colaiste Colum)

There is one other show that has become a regular feature of the Brookfield calendar and has been moved to the Jennings Gallery to great effect. This is the annual display of the work of the first year Occupational Therapy class. This can be in paint, textiles, ceramics, or sculpture in various media. The module is about self development and challenges the students to explore their own creativity. We use the gallery walls and the exhibition cases (converted yellow brick fuel bunkers!). We bought reusable picture frames of different sizes from Habitat and use these to display the students' works on paper. We run into problems with the Health and Safety Office as the gallery is also a potential escape route in case of fire. So the way around this is to make better use of our "bunkers" - new plate glass doors and moveable glass shelves so we can get more individual pieces in there. If they are behind glass, then problem solved.

Our earnings from the sales of the show, and a print hire scheme

launched just before Christmas, covered our Opening Night and contributed a little to an art fund. We are now drawing up management principles and SoPs to provide a basis for more shows in the future. The Gallery will be managed within the framework of the UCC Visual Arts Policy and has the following aims:

- 1. To provide a focus for the visual arts at the western end of the UCC campus.
- To mount a diverse range of exhibitions, from individuals or groups, by invitation from the organising committee, which bear on the work and mission of the College of Medicine and Health in providing education and research into human health.
- To contribute to creative personal growth by encouraging visual creativity and appreciation among staff and students of UCC.
- 4. To encourage students to see visual creativity as something that crosses all social and health divides.

30% of the proceeds of sales will go to the UCC Medical Visual Arts Fund which will run the gallery and from time to time, as funds permit, purchase works for the College of Medicine and Health. There will be a local management committee with student representation and with a nominee from the Glucksman Gallery. Our next venture is an exhibition of works by medical alumni which we plan to launch at the beginning of the next academic year. In time we may be able to extend the gallery to the upper landing where we currently display a large canvas commissioned from Professor John Fraher called "Primum non nocere". How fitting that students entering the upper landing of the Medical School wing should see these words every time they attend a

seminar or visit the Medical School Office. Peter McGrath and his Facilities team were wonderful throughout. Nothing was any trouble and everything was thought through and carried out with the utmost care. A few weeks ago Peter became suddenly acutely ill and died in a matter of days. All of us who work here were deeply shocked and saddened and are still coming to terms with a Brookfield without Peter. However, Peter McGrath appreciated the many and different abilities of his staff and trusted them with responsibility so that when he died with such suddenness, everything kept being done as before - this in itself was a tribute to his leadership and to the warm regard in which he was held. He is greatly missed in Brookfield.

I would like to conclude this short article by expressing my thanks to the Buckley Foundation for making the Jennings Gallery a reality and to say that if any reader of Medical Alumni News would like to make a donation to "the UCC Medical Visual Arts Fund", they can make a cheque payable to that fund and send it to me at the College of Medicine and Health Office, Brookfield Health Science Complex, UCC where it will be used to put new doors, lighting and moveable shelving into the yellow brick storage bunkers.



Plasterwork on the ceiling of the entrance hall of Brookfield House

Michael Hanna

UCC SCHOOL OF MEDICINE INTRODUCES GRADUATE ENTRY TO MEDICINE

While possession of a prior degree has been a pre-requisite for entry to medical school in North America for decades, direct entry from secondary (high) school has been, until very recently, the norm in the UK and Ireland. Several factors have conspired to change attitudes to entry to medicine in these islands, including the recognition that many do not come to realize their true vocation until they are well into their degree course and that others, who do not make it through the points race, are eminently suitable to practice medicine. The latter, coupled with recent analyses predicting an imminent short-fall in the numbers of medical practitioners, led the government to announce, in 2006, the introduction of a graduate entry stream for medicine (GEM) in Ireland. This led to the initiation of two GEM programmes in 2007 at the new medical school at the University of Limerick (a GEM-only school) and at RCSI. In January 2008, the funding of further GEM places within the NUI medical schools was announced with UCC and UCD to offer places in September 2008 and NUIG to follow at a later date.

ENTRY

The basic requirement for entry to any of these GEM courses is a 2:1 honours degree in the candidate's first Bachelors degree. It is important to emphasise that while it is expected that many whose primary degree was in the biomedical area are likely to be attracted to the GEM programme, a degree in a science, bioscience or biomedical area is not a prerequisite for consideration for entry; indeed, we welcome applications from eligible graduates in other areas and academic excellence in the humanities and social sciences is encouraged and recognized. Scores in a standardized aptitude test (the GAMSAT), developed in Australia for evaluating prospective medical school entrants, is then used to rank applicants. GAMSAT evaluates the nature and extent of abilities and skills gained through prior experience and learning, including the mastery and use of concepts in basic science, as well as the acquisition of more general skills in problem solving, critical thinking and writing. There will not be an interview. If a candidate can meet the requirements for the GAMSAT, the absence of a biomedical background should not deter them. However, it is acknowledged that success in GAMSAT is unlikely without knowledge and ability in the biological and physical sciences, however this is acquired.

BRINGING GEM TO UCC

While not possessing, up until now, a distinct GEM programme, the medical school at UCC has decades of experience in educating graduate

entrants to its traditional, predominantly direct-entry, course. Such entrants have come to us through our, very limited, mature entry stream or from North America, through the Atlantic Bridge programme. Our faculty and staff have, therefore, accumulated considerable experience in the learning styles and academic and pastoral needs of the graduate entrant. Furthermore, UCC was an active participant, with UCD, TCD and NUIG, in the IUMC bid, in response to the original 2006 call for new GEM programmes, for a nationallycoordinated and integrated GEM programme. Though unsuccessful at that time, valuable experience was gained in designing a GEM programme according to current, international best practice but in line with Irish needs. Nevertheless, the short time line from the very recent announcement (January 2008) of funding for graduate entry at UCC and a September 2008 start date has presented a considerable challenge to all involved and has required considerable commitment of time and energy from the entire GEM working group.

THE GEM PROGRAMME AT UCC

In contrast to the direct entry programme, which takes five years, the Graduate Entry programme will be 4 years. In the Graduate Entry programme, the biomedical sciences will be compressed into a 40-week first year and the first term of the second year (also extended to 40 weeks). Thereafter, as the students enter the more overtly clinical years,

there will be significant overlap between the direct-entry and GEM programmes, to the mutual benefit of both streams.

The learning methods will be in keeping with the maturity and more advanced learning styles of the graduate entrant. Traditional lectures will, therefore, be kept to a minimum with an emphasis on small group and case-based learning. Clinical instruction will be provided ab initio and students will deal with issues such as professionalism, medical ethics and interactions between health, disease and society from day 1. What will not be different between GEM and direct entry streams will be the clinical experience; it will be just as extensive and intensive as in our direct entry programme. The final qualification will be the same for both programmes: the MB, BCh, BAO Degree. In terms of support, GEM students will have some of their own teachers; will have a separate programme director and separate administrative support.

The GEM course is now set to start on September 1st 2008 when UCC will admit 50 students to its new GEM programme; I know that everyone at UCC will welcome this new cohort of eager and enthusiastic medical students.

Prof Eamonn Quigley

MEDICAL ALUMNI october 9 – 10, 2008 BROOKFIELD HEALTH SCIENCES COMPLEX

Introduction

The Annual Scientific Conference is a multidisciplinary graduate meeting for all graduates, staff and medical friends of UCC which is organised by the Medical Alumni Committee.

Programme

Thursday October 9

- 8.30 Registration and Coffee
- 9.15 Welcome
 Prof David Kerins, Head, School of Medicine, UCC
 Prof Michael Berndt, Head, College of Medicine
 and Health, UCC

Session 1 – Clinical Challenges

- Chair Prof Barry Ferriss / Dr Paule Cotter
- 9.30 Irritable bowel or Irritable brain

 Dr Seamus O'Mahony, Bon Secours Hospital, UCC,

 Cork
- 9.45 Strategies to Redeem the Refractory Epilepsy Patient

 Dr Norman Delanty, Beaumont Hospital, Dublin
- 10.00 Osteoporosis: Looking beyond bone

 Dr James Griffith, Prince of Wales Hospital,

 Chinese University of Hong Kong, Hong Kong
- 10.15 Balloon Aortic Valvuloplasty: Is it a procedure of the past?

 Dr Peter Kelly, SIVUH, Cork
- 10.30 Coffee Break

Session 2 - The Challenges of change in the Modern Age

- Chair Dr Len Harty / Dr Catherine Keohane
- 11.00 Risk and Drug Development Dr Kevin Horgan, Philadelphia
- 11.20 The role of the laboratory in the control of antimicrobial resistance

 Dr Olive Murphy, Bon Secours, Cork
- 11.40 Meeting the Challenges of Quality in the Modern Age Dr Tracy Cooper, HIQA, Cork
- 12.00 Problems with twins

 Dr Edward Kiely, Hospital for Sick Children,

 Great Ormond Street, London
- 12.45 Lunch break

Session 3 - The Challenges of change in the Modern Age

- Chair Prof Fergus Shanahan / Dr Joe Dillon
- 14.00 Cervical vaccinations

 Dr Matt Hewitt, CUMH, Cork

- 14.20 New directions in Medical Education at UCC Dr Rob Gaffney, UCC, Cork
- 14.40 History of Medicine Shaw & Immunology Dr Eleanor Molloy, National Maternity Hospital, Dublin
- 15.00 Conquering down under A polar experience Dr Clare O'Leary, South Tipperary General Hospital, Clonmel
- 15.20 Coffee Break
- 15.45 Annual General Meeting Medical Alumni Committee Agenda items invited from Graduates, in advance
- 16.15 Opening Brookfield Art Gallery Exhibition of Medical Graduates
- 17.00 Close
- 19.00 Wine Reception followed by Gala Dinner Aula Maxima, UCC (by ticket only)

Friday October 10

Session 4 - Breast Session - Round table in Breast

Diseases: Investigation & Management

- Chairs Dr Martin O' Sullivan / Dr Brian Jordan
- 9.30 Breast Imaging Update

 Dr Josephine Barry, CUH, Cork
- 9.50 Surgical Approaches to Breast Disease Ms. Deirdre O'Hanlon, SIVUH, Cork
- 10.10 Pathology taking breast diagnosis further Dr Margaret Sheehan, University College Hospital, Galway
- 10.30 Panel Discussion
- 10.45 Coffee Break

Session 5 - Dermatapathology

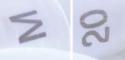
- Chairs Dr Gillian Gibson / Dr Michael Bennett
- 11.15 Itching for an answer

 Dr Michelle Murphy, SIVUH, Cork
- 11.30 Current treatment options for the aging skin *Mr. Sean T. O'Sullivan, CUH, Cork*
- 11.45 A view from General Practice

 Dr John Loughnane, GP, Newcastle West, Limerick
- 12.00 Panel Discussion

Continuing Medical Education (CME) points will be available from the Royal College of Physicians of Ireland.

Registration Form included with this Newsletter.



OLLSCOIL na hÉIREANN THE NATIONAL UNIVERSITY OF IRELAND

TEXT OF THE INTRODUCTORY ADDRESS DELIVERED BY:

PROFESSOR DAVIS COAKLEY, Professor of Medical Gerontology, in Trinity College, Dublin on 6 June, 2008, on the occasion of the conferring of the Degree of Doctor of Medicine, honoris causa, on MICHAEL HYLAND

It was William Osler, the great North American physician, who said to his students "medicine is not a trade, it is a mission." We only need to look back through medical history to find individuals who have dedicated their lives to seeking cures for disease or to discovering new approaches to the sociomedical issues of their time. With pioneering vision, Dr. Michael Hyland, has devoted his life to establishing a new approach to the health and wellbeing of older people.

Michael Hyland was born in Yorkshire in 1934. His father Edmond was a Corkman who grew up on College Road just a short distance from UCC, where he studied medicine, graduating in the early twenties. After graduation, his father sought a position in England, like most UCC graduates of the time, and he set up a practice in Yorkshire. Michael's mother Mary was also from Cork, growing up on a farm on Blarney Road. Michael's parents maintained strong links with their Irish roots spending their holidays every year with their three children in Ballycotton and Michael has fond memories of these carefree days. The family was on holidays as usual in Ballycotton when the Second World War began. Michael's parents decided to leave their children with their grandmother on the farm on Blarney Road. Michael was sent to school at the Christian Brothers College, or 'Christians' as it is more familiarly known. After the war, the children returned with their parents to Yorkshire.

The family moved back to Ireland in 1947 and settled on Orchard Road. In 1951, Michael followed his father's footsteps by choosing to study medicine at UCC. After graduation, he interned at the North Infirmary and stayed on subsequently as senior

house officer and registrar. He was unsure about his future career, so in 1961 he decided to do some locums as a general practitioner in Yorkshire.

It was during this period that he became aware of the ground-breaking approach to the medical care of older people being brought about by the new specialty of geriatric medicine. The specialty developed from the pioneering work of Dr. Marjorie Warren at the West Middlesex Hospital in London. Michael began his training in geriatric medicine in the Central Middlesex Hospital where he came under the influence of the charismatic Dr. (later Professor) Gordon Mills. After four years, Michael moved to the West Middlesex Hospital where he worked with Dr. Jimmy Andrews, another well known advocate of the specialty.

Professor Denis O'Sullivan was appointed to the chair of medicine in UCC in 1961. He recognised the importance of developing a specialised service for older patients and asked Dr J H Sheldon, whose book on the social medicine of old age was of fundamental importance, to advise on the care of the elderly in Munster. This eventually resulted in the first advertisement for a geriatrician in this country. Michael was appointed to the position and commenced duty in January 1969.

Three months after taking up the appointment, Michael married Rosaleen Crowley whom he had met at the Central Middlesex Hospital where she was nursing. Rosaleen had a similar background to Michael's. Her father Dr. Patrick Crowley had graduated in medicine from UCC in the 1920s and was Medical Officer of Health in Tunbridge Wells in Kent.

At St. Finbarr's Hospital, Michael gradually built up a multidisciplinary team and in 1972 he appointed his first registrar, Dr. (now Professor) Cillian Twomey. Shortly afterwards, Michael opened his first day hospital and he managed to persuade the Department of Health to build a new 80 bed rehabilitation unit in St. Finbarr's Hospital. When the new Regional Hospital opened in 1978, it included an acute admission ward for older patients. One might ask, how did Michael achieve so much so quickly? He has ability obviously, but he also has an open and genial personality which, combined with his sense of humour, managed to open doors which others would find firmly closed.

Michael was appointed lecturer and examiner at UCC soon after he returned to Cork. He was a remarkable teacher and he set time aside to teach each morning. His clinics were some of the best attended in the medical school. Michael became a role model for many of the students and junior doctors in Cork. Most of these went into fields other than geriatric medicine but they are quick to acknowledge Michael's influence on them.

Michael Hyland is a gifted clinician and his knowledge of medicine is extremely broad. He has always kept himself at the cutting edge of developments and patients under his care were guaranteed to get the best of diagnostics and the best therapy available.

Several young doctors who trained in Cork were attracted to the specialty of geriatric medicine because of Michael's enthusiasm and dedication. Most have gone on to hold consultant

posts in Ireland, North America, the United Kingdom and Australia. It is significant that four of the professors of geriatric medicine in this country were inspired by Michael to follow careers in the specialty and three of them worked with Michael as young doctors and were also his students. Michael, who is widely regarded as the pioneer of the specialty in Ireland, gave generously of his time to developing services for the elderly on a national level. Towards this end, he played a key role in several national societies and working groups. One of the latter produced a seminal report entitled 'The Years Ahead' in 1989. It is still regarded as the most comprehensive review of services for older people in Ireland.

The famous 17th century physician, William Harvey, complained in his day that few men above the age of forty seemed able to accept his discovery of the circulation of the blood because they had already closed their minds to new ideas. This certainly cannot be said of Michael who remains a

perpetual student, always open to new ideas, absorbing them into his clinical practice when relevant and sharing them with his students and staff. After retirement he continued bedside teaching until his 70th birthday and over the past ten years he has been chairman of the Clinical Research Ethics Committee of the Cork Teaching Hospitals. This is an onerous task and his appointment is a reflection of his energy and integrity.

Michael encouraged young doctors on his team to become involved in research and many projects initiated in this way were subsequently published in peer reviewed journals. In 1997, he played a key role in a large clinical trial being undertaken by researchers in three universities, the university of Leiden, the university of Glasgow and UCC. The trial demonstrated that elderly individuals at risk of vascular disease benefitted from treatment with statins and these findings were published in the Lancet in 2002.

Michael was one of the early members of the British Geriatrics Society, which was the first society for ageing in the world for consultants in this field and which has developed into a large international society. The society held its spring meeting in Cork in 1999 and Michael was awarded the President's Medal of the Society. This medal is awarded in recognition of outstanding service to geriatric medicine.

Michael retired in 1998 leaving a thriving department with five consultants on its staff. He is very highly regarded not only in Ireland but also internationally. Yet he never speaks of his own achievements or successes. He is a very private man who treasures the hours he spends with Rosaleen and their family.

It is most fitting that Michael should be honoured here in the Aula Maxima of his own university. Ireland owes him an immense debt of gratitude for his contribution to the health care of the nation.



Pat Rice LLD, Niall Mellon LLD, Dr Michael Hyland MD, Samantha Power LLD, Prof Patrick Fottrell DSc

2008/2009 Diary of Graduate Events



3 October 2008 1988 MB Class Reunion Hayfield Manor, Cork

4 October 2008 1978 MB Class Reunion Sheen Falls Hotel Kenmare.

9 October 2008 UCC Medical Annual Scientific Conference

Medical & Health Sciences Complex, Brookfield

10 October 2008 1968 MB Class Reunion Common Room, UCC

7 November 2008
Annual UCC Alumni & Friends New
England Dinner (IEF)
To be confirmed

18 November 2008
UCC Alumni & Friends Chicago Reception
The Monroe Room
University Club of Chicago

5 December 2008 2008 UCC Alumni Achievements Awards Aula Maxima, UCC

24 April 2009 1984 Graduates Silver Jubilee Reunion Aula Maxima, UCC

8 June 2009 1959 Graduates Golden Jubilee Reunion Aula Maxima, UCC

22 August 2009 1974 Medical Gradutes 35th Anniversary Reunion

St Johns, Newfoundland, Canada (for details contact: Pat Parfrey: pparfrey@mun.ca)

17 September 2009 UCC Medical Annual Scientific Conference, UCC

For further information on the above events and/ reunions, please contact the UCC Alumni Office on Tel: + 353 21 490 2016 or E-mail graduates@ucc.ie.

Additional events will be announced on an on-going basis, so remember to check the alumni website regularly at http://alumni.ucc.ie

Congratulations to the UCC Medicine Class of 2008

on your recent graduation. The UCC Alumni Office wishes you every success and fulfilment in your future career. You are now part of the vibrant graduate worldwide network of over 65,000 alumni which keeps you in touch with fellow graduates and with UCC. Remember to stay in touch with your alma mater and update your contact details with the Alumni Office if you move house or change jobs. The Alumni Office administers the Graduates' Association which provides members with a wide range of benefits and services including invitations to alumni events, mailing of the UCC Graduate Magazine and access to Campus facilities. Further details and membership forms can be accessed on the UCC alumni website at http://alumni.ucc.ie http://alumni.ucc.ie/ or by emailing E: graduates@ucc.ie

Plan a gift to University College Cork

A legacy or planned gift is one way that a graduate can support their alma mater. It can take various forms but most often is in the form of a bequest included in a will. A charitable bequest included in one's will provides a favourable way in which to save on inheritance taxes and also enables the donor, who might otherwise not be able to make an outright gift during his or her lifetime, to provide support for the future. The giving of legacies e.g., money, objects, securities, bonds or property, in a will, no matter what size, can offer an opportunity to commemorate an individual and enables the University to continue to provide excellence in teaching and research. For additional information about exploring the options of planning a gift or legacy to UCC, please contact Dr Jean van Sinderen-Law, Director of Development on Tel: +353 21 4902205 or Email: i.law@ucc.ie

Contact Details:

Ms. Rachel Hyland, Med Alumni Association, Brookfield Health Sciences Complex, College Road, Cork

Tel: +353 (0)21 4901587 Email: medalumni@ucc.ie

http://www.ucc.ie/en/DepartmentsCentresandUnits/SchoolofMedicine/MedicalAlumni/

Please send us your e-mail address to update our files.

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