

Editorial

Second Foundation – A New Medical School for Northern Ireland?

There is but one medicine and one medical problem – the sick patient

FOUNDATION

Back in 1808, Belfast was a rapidly growing town of some 25000 inhabitants. With access to a good port, industries such as ship-building, rope-works and linen mills were thriving. Higher level education however was another matter. Many of the growing commercial class were dissenting Presbyterians and as such, they were unpopular in Trinity College Dublin and Oxbridge. The Scottish Universities welcomed them as co-religionists but the need was felt for a local secular college “without religious test”.¹

The non-denominational Belfast Academical Institution (Inst) was incorporated by Act of Parliament in 1810 to be part boys’ school (ages 8-12, the primary department) and an amalgam of further education college and University (the college department). The college taught 3 year courses in the Arts, Agriculture and Manufacturing deemed equivalent to a Scottish MA degree. A medical faculty was planned but anti-establishment behaviour by some of the college staff lost government support for the project in 1817.^{1,2}

In 1818 however, James Lawson Drummond, attending physician at the Belfast Fever Hospital in Frederick Street offered to start anatomy lectures at “Inst” which began in 1819. By 1821, students “walked the wards” of the 100-bed Fever Hospital for a fee, but all this amounted to no more than an “introduction to medicine” course.²

By 1826, there was renewed government support for further education in Ireland allowing Inst and the Fever hospital to collaborate on “a preparatory [non-degree-giving] school of medicine and surgery, useful and important to the *medical youth* of Ulster”. A comprehensive curriculum was planned with bedside teaching. Anatomy, Chemistry and *Materia Medica* were the chief lecture topics.

Over the next 9 years however, disputes between “Hospital and College” arose over funding and permitting Professors appointed by the College to exercise authority over Physicians appointed by the Hospital. Inst’s ability to raise funds to support the Hospital and build a suitable campus was constrained. It was 1835 before teaching began – a unique partnership at that time of an autonomous college and voluntary hospital offering a 4-year course. Most of the major licensing bodies approved the course.

In 1845, the government planned a new 3 college university

system for Ireland with “Queen’s College Belfast” opening in a new and much larger campus to the south of the town centre. The Inst students were transferred across to the new facilities in 1849, although dissection classes were still held in Inst until 1863.

The initial 55 medical students of 1849 had become 327 by 1879 and more clinical material became available as the Fever Hospital expanded (eventually becoming the Royal Victoria Hospital), a new Union Hospital was developed from the old workhouse (Belfast City Hospital) and the Mater Infirmorium was opened.³

FOUNDATION AND EMPIRE

The decades after World War II saw a “golden age” at Queens with world-class developments in Cardiology and Renal medicine. The “Troubles” too, led to innovations in Neurosurgery, Orthopaedics Vascular Surgery and blast lung management.

Perhaps the name most associated with this period is Sir John Henry Biggart who held the post of Dean of the Medical School for an unprecedented 27 years and in 1972 was appointed Pro-Chancellor of the University.⁴ Under his aegis, new extensions to the Medical School were built on both the RVH (Institute of Clinical Science and Medical Library, 1954) and BCH (Medical Biology Centre, 1968) sites. The number of professorial chairs was also greatly expanded to cope with increasing areas of specialisation in the profession.

In the context of this editorial, it may be worth quoting sections from 2 guest UMJ editorials on medical education written by Sir John Henry in 1962 and 1963:

Things are not what they used to be. The medical education today is different and therefore in the opinion of many [past] graduates inferior. The system that produced “us” was obviously good. By virtue of it we have attained platforms from which we may thunder at those who dare to vary it. Yet we are the first to realise that the practice of medicine has changed...

... We would retort that it is a necessity of medical advance that methods of education and content of courses should change. Not only so, but the graduate must be so equipped that he can relatively easily understand and apply the advances expected during his professional life.⁵

In our own school we have all endeavoured to lead the student to the belief that, in spite of all its apparent fragmentation...



there is but one medicine and one medical problem-the sick patient.⁶

THE WINDS OF CHANGE

Is Northern Ireland well served with doctors today? No-one would question the skill and dedication shown by modern QUB graduates in an increasingly difficult professional environment but are we producing sufficient *medical youth* in Northern Ireland?

General Practice seems particularly hard hit– practices in Bangor, Enniskillen and Portadown have been left with only locum coverage for 1000's of patients. Roslea in Fermanagh has closed.^{7,8,9} Secondary care is struggling to keep some units open and the cost of locum doctors in the Province has doubled over 5 years reaching £46.1 million in 2015/2016.^{10,11}

For both primary and secondary care, the problem is at its most acute outside Belfast.

It can be difficult to persuade medical graduates to move far from their home university. In Scandinavia, this has been formulated in the 60/20/20 rule – 60% of medical graduates are likely to spend 20 years of their career working within 20 miles of their medical school. Health boards in rural Wales such as Powys and Betsi Cadwaladr suffer 14-15% medical vacancies compared with 3% in Cardiff. Of note, the equivalent figure in our Western HSC Trust is 18% (15% filled by locums and 3% chronically vacant)¹² The Welsh Assembly has opened a postgraduate medical school in Swansea alongside the undergraduate school in Cardiff to address this imbalance. Should Northern Ireland consider such a solution?

SECOND FOUNDATION

Earlier this year, I met with Professor Hugh McKenna, Ulster University's Dean of Medical School Development in Magee College, Derry to discuss plans to open a new postgraduate entry medical school in the North West. A four-year course is proposed with initial recruitment of 80 students into year 1 building up to 100 per year. The Ulster University would be building on its extensive experience in the field with existing courses in Stratified Medicine, Physician Associate, Nursing, Pharmacy and Biomedical Sciences.

Clinical attachments would be spread widely throughout the Province and the curriculum would have strong roots in primary care and chronic disease prevention.

An accreditation process is being followed that could see the first students entering the new medical school in 2019 and qualifying in 2023. There are many steps to the process and the bid is currently being scrutinised by the GMC.

With Queens oversubscribed by a factor of 2.5 and a marked shortage of doctors in the Northwest, one can see the logic of this approach.

It took 25 years from the foundation of Inst to the first accredited students attending the Belfast medical school in 1835, hopefully, we won't have to wait quite so long this time around.

John Purvis, Hon Editor.

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ULSTER MEDICAL SOCIETY

PROGRAMME OF LECTURES: AUTUMN 2017

Presidential Theme

‘AIM HIGHER’

Date	Thursday 5 October 2017
Meeting	Presidential Address
Speaker	President Ms Angela M. Carragher Meeting
Venue	North Lecture Theatre, Medical Biology Centre, Lisburn Road, Belfast.
Time	20.00hrs

Date	Thursday 19 October 2017
Event	Ulster Medical Society Joint Meeting with Queens University Belfast and Northern Ireland Medical & Dental Training Agency <i>‘Learning from clinical cases; Quality Improvement, & Research Symposium’</i>
Time	09.00hrs -16.00hrs
Venue	Belfast City Hospital Postgraduate Lecture Theatre, Lisburn Road, Belfast.

Date	Thursday 19 October 2017
Meeting	Evening Meeting
Speaker	Mrs Margaret Murphy, Chairperson World Health Organisation (WHO) Patients for Patient’s Safety
Venue	North Lecture Theatre, Medical Biology Centre, Lisburn Road, Belfast.
Time	20.00hrs

