

April: new Academy Fellows elected

We extend a warm welcome to our 40 new Fellows elected on 10 April. A message from the President, together with the list, was circulated by email to all Fellows and there are further details in this newsletter. We look forward to meeting the new Fellows at Admission Day on 24 June and hope they will soon be involved, as so many of you are, in the day to day business of the Academy. The value of your expertise, and your willingness to work with the Academy office on so many of our projects, is something we never take for granted and hugely appreciate.

An area of Academy work that receives much attention from external institutions and agencies is our work in support of young academics. I was delighted to hear our mentoring programme praised recently for its original and creative approach; our database of clinical academic trainees is also unmatched elsewhere in the UK. This is another reminder of the commitment from our Fellows, who tirelessly support our programmes. You will read more about these projects overleaf.



Mary Manning

I was hoping to use this newsletter to report on the favourable outcome of several fundraising schemes. We have been very busy but some negotiations are still in play and so I shall just leave you with this tantalising message that there will be more news next month!

New headquarters for Academy



Our negotiations with the Novartis Foundation are ongoing and, though there are some technicalities to be resolved, should be complete within the next few weeks. Meanwhile, the Academy's own plans for the refurbishment of the building at 41 Portland Place are well advanced and our Relocation Project Group provided Council with a detailed report on 10 April. This included a summary of our vision for the future use of the building as a headquarters for the Academy, a centre for biomedical science in 'medical' London, and a focal point for Fellows from across the UK and overseas. We provided Council with detailed floor plans, a timetable for refurbishment and a budget. The cost of refurbishment will be in the region of £5M.

We have been wondering how best to share these plans with the wider Fellowship and to receive your views on the concept. There will be an exhibit on Admission Day which will be manned by our Architect and Project Manager and we hope Fellows will use the opportunity to find out more about the project and feed ideas into our plans.

Fundraising for the refurbishment is already underway and Fellows will receive more information shortly. The prospect of a permanent home for the Academy is exciting indeed and marks an important milestone in our brief history.

2008 Fellows elected

40 of the United Kingdom's leading doctors and medical researchers have been recognised for excellence in medical science with their election to the Academy Fellowship. The new Fellows will be formally elected to the Academy at a ceremony on Tuesday 24 June. A full programme and booking details will be sent in a separate mailing.

Professor Andreas Adam

Kings College London

Professor Philip Baker

University of Manchester

Professor David Beach

Barts and the London,
Queen Mary's

Professor Tim Bishop

University of Leeds

Professor Sir Michael Brady

University of Oxford

Professor Edward Bullmore

University of Cambridge

Professor Mark Caulfield

Barts and the London,
Queen Mary's

Professor Terry Cook

Imperial College London

Professor Nicholas Day

Mahidol University, Bangkok,
Thailand

Professor Christopher Day

Newcastle University

Professor Anne Dell

Imperial College London

Professor Peter Donnelly

University of Oxford

Professor Christopher Dye

World Health Organisation

Professor Barry Everitt

University of Cambridge

Professor Lesley Fallowfield

Cancer Research UK

Professor Ray Fitzpatrick

University of Oxford

Professor Michael Frenneaux

University of Birmingham

Professor Jonathan Friedland

Imperial College London

Dr Steven Gamblin

National Institute for
Medical Research

Professor John Gribben

Barts and the London School
of Medicine

Professor Paul Griffiths

University of Sheffield

Professor Andrew Halestrap

University of Bristol

Professor John Hardy

University College London

Dr Michael Hastings

University of Cambridge

Professor William Hunter

University of Dundee

Professor Masud Husain

University College London

Professor Nicholas La Thangue

University of Oxford

Professor Simon Lovestone

Kings College London

Dr Richard Marais

Cancer Research UK

Professor Barry Potter

University of Bath

Professor Pamela Rabbitts

Leeds University

Professor Peter Rothwell

University of Oxford

Professor Robert Snow

University of Oxford

Professor Margaret Snowling

University of York

Professor John Speakman

University of Aberdeen

Professor Andrew Steptoe

University College London

Dr Victor Tybulewicz

National Institute for
Medical Research

Professor Gabriel Waksman

University College London

Professor Ashley Woodcock

University of Manchester

Professor Kent Woods

Medicines & Healthcare Products
Regulatory Agency



Global mental health

Mental health in developing countries has long been a neglected and under-resourced area of research and an explicit focus on mental illness was excluded from the Millennium Development Goals. Yet mental and neurological disorders are responsible for 13% of the global burden of disease and unipolar depressive disorder is projected to become the second leading cause of health burden by 2030. In low- and middle-income countries (LMIC), shortages in the workforce, poor infrastructure and low investment in resources prevent many from receiving adequate treatment for mental health problems; many LMIC allocate less than 1% of the health budget to addressing mental illness, compared to 5% in over 60% of European countries.¹ Moreover, risk factors for mental illness, including low levels of education, poverty and conflict, have an even greater impact on individuals in LMIC and the burden is further increased through secondary consequences of poor mental health, such as increased risk of injury and a range of medical conditions, impaired ability to seek and sustain employment, loss of income through treatment costs and, in cases of maternal mental illness, negative effects on child growth and development.²

Yet, despite the burden of mental illness in LMIC, resources and capacity for research into mental illness remain low. Researchers from LMIC contribute few articles to the internationally indexed medical literature and the proportion of clinical trials of new mental health treatments carried out in LMIC remains minimal.³ Additionally on average, there are just 5 psychiatrists per million people in LMIC, compared to 40 psychiatrists per million people in the UK. Nevertheless, the evidence base for the burden

and epidemiology of mental illness in LMIC is growing and a number of recent studies have demonstrated the clinical and cost-effectiveness of tailored interventions, such as group interpersonal psychotherapy for depression in rural Uganda,⁴ community-based interventions in India,⁵ and stepped care to treat depression in Chile,⁶ where multi-component interventions are led by non-medical health workers.

The Academy is eager to highlight this exciting research, to identify areas where greater action may be required and to raise awareness of the burden of mental health in LMIC and will therefore be holding a one-day symposium. The event will take place on 4 September 2008 in London. The symposium, including presentations by leading national and international experts in the field, will provide an opportunity to bring together key academics, stakeholders and policymakers for an active and open discussion. There will also be a panel discussion to enable UK funders of global mental health research to give their perspectives. This promises to be an interesting and informative event. To obtain a programme or to register, please contact Dr Georgie MacArthur at the Academy (georgie.macarthur@acmedsci.ac.uk 020 7969 5273). Please note that places are limited.

¹Jacob KS *et al.* (2007). *Mental health systems in countries: where are we now?* *Lancet* **370**, 1061-1077.

²Patel V (2007). *Mental health in low- and middle-income countries.* *British Medical Bulletin* **81** and **82**, 81-96.

³Patel *et al.* (2007). *Treatment and prevention of mental disorders in low-income and middle-income countries.* *Lancet* **370**, 991-1005.

⁴Bolton P *et al.* (2003). *Group interpersonal psychotherapy for depression in rural Uganda, a randomised controlled trial.* *JAMA* **289**(23), 3117-3124.

⁵Chatterjee S *et al.* (2003). *Evaluation of a community-based rehabilitation model for chronic schizophrenia in rural India.* *British Journal of Psychiatry* **182**, 57-62.

⁶Araya *et al.* (2003). *Treating depression in primary care in low-income women in Santiago, Chile: a randomised controlled trial.* *Lancet* **361**, 995-1000.

Allocation of resources across academic specialties

A project to consider UK clinical academic capacity and the allocation of resources across academic specialties is being undertaken by the Clinical Academic Careers Committee, under the Chairmanship of Professor Patrick Sissons FMedSci.

Increasing concern over the decline in the number of UK clinical academics and the significant loss of research capacity in some specialties has resulted in the establishment of new 'integrated academic training pathways'. This initiative is a positive step towards sustaining a first class clinical academic workforce. However, funders face the difficult task of effectively distributing fellowships and resources.

Professor Sir John Tooke FMedSci, Chairman of the Department of Health/Higher Education Funding Council of England (DH/HEFCE) Senior Lectureships awarding committee and Professor Sally Davies FMedSci, Director General of the Department of Health have asked the Academy to provide guidance on how funders might support and build capacity across the clinical academic specialties, and the criteria they might use for optimal allocation of both fellowship, and programmatic funding.

The Academy's work will:

- Outline broad principles for assessing and allocating fellowship funding across academic specialties.

The role of teaching in academic careers

Under the Chairmanship of Professor Keith Gull CBE FRS FMedSci, the Non-clinical Academic Careers Committee is conducting a review of teaching within biomedical science departments to assess the balance of teaching and research.

The teaching/research (T/R) balance often varies between institutions and individuals within the same institution. How this T/R balance is managed and how each part is valued and the influence they carry have become important aspects affecting the career paths of biomedical academics.



Patrick Sissons FMedSci

- Define the determinants of vulnerability and success for specific academic specialties.
- Identify opportunities and barriers to achieving a robust and varied clinical academic workforce.
- Advise the relevant constituencies on areas of further exploration

A position paper offering mechanisms for concurrently promoting and developing the clinical academic workforce and research capacity is in preparation. The paper will form a basis for further discussion and catalyse further exploration of the strategies necessary to meet current and future research and healthcare need.

The landscape is changing with many conflicting interests at work. The Academy's committee will conduct its assessment against the background of the Research Assessment Exercises and the future metrics of assessment, the status of and requirement for the new teaching qualifications and the development of teaching-only posts.

Evidence is currently being collected from a variety of individuals and institutions within the sector. The aim is to capture an overview of this complex area, identify good practice and offer advice for young biomedical scientists. The main output of the project will be an Academy report with recommendations aimed at all the constituencies involved. For more information contact emma.bennett@acmedsci.ac.uk