

## Academy Celebrates First Three Years



*Dr Michael Dexter addresses the guests at the House of Lords in July*

As this issue goes to print in late November, we look back to July when, thanks to the good offices of Lord Walton of Detchant FMedSci and the generous support of Ardana Bioscience Ltd, a reception was held at the House of Lords, to thank our many supporters and to introduce the work of the Academy to new friends and colleagues. Guests, assembled from the world of medicine and science, from Parliament, industry, commerce, and trusts and charities were entertained by Officers and members of Council in the grand surroundings of the Thames-side Cholmondeley rooms and terrace. The guest speaker was Dr Michael Dexter *FRS FMedSci*, Director of the Wellcome Trust. Extracts of his address are presented below.

"In 1997 there was no Academy of Medical Sciences. Nor was there any one organisation that brought together the various aspects of the medical sciences. It was clear then, and had been for many years, that we needed a body that could do for the broad medical sciences what The Royal Society does so well for the natural sciences and The Royal Academy of Engineering for the engineering sciences.

That is why in 1998 the Wellcome Trust provided a quarter of a million pounds as a start-up grant to help establish the Academy as a body that spanned not only clinical academic medicine, but also veterinary science, dentistry, laboratory science and nursing care.

It is this broad church that makes it unique. And I do believe that the Academy always needs to bear this in mind as it elects its Fellows. I would even argue that the Academy needs representatives from non-academic areas, such as economists, industrial scientists, legal experts and ethicists to provide the breadth of expertise and experience so essential to modern medical sciences. Although its history is brief, the Academy of Medical Sciences has quickly established itself as an important and influential organisation.

The application of biomedical research depends upon high quality, patient-orientated research by clinicians, who are not only skilled practitioners but also skilled researchers: the Clinician Scientist. Yet the Calman training requirements and

their rigid implementation, together with a poor career structure in academic medicine, have resulted in a decline in the number of qualified clinicians staying in research at a high enough, postdoctoral level to make a difference.

The Academy's Savill Report really hammered this home. One of its main recommendations was for the immediate introduction of new Clinician Scientist posts through which to nurture a cadre of research-led clinical academics.

The report was published in March 2000 and we now have a National Clinician Scientist Scheme, along with a national standard for such fellowships, which is supported by all the major funding bodies. The DoH have recently advertised 8 new Clinician Scientist Fellowships, and PPP Healthcare Medical Trust in partnership with the Academy will be funding 6 more. The Wellcome Trust has its own Clinician Scientist scheme and is fully supportive of this initiative.

Through the Savill Report, the Academy influenced and won over a wide range of bodies and we now have a new scheme launched within a year of the report's publication - a great achievement!

What better evidence do we need of the impact of the Academy and what it can achieve for medical science? And this in only three years and with only four full-time members of staff.

The Wellcome Trust had no doubts what the Academy could achieve. Last year the Trust saw the importance of providing further funding for the consolidation and development of the Academy, bringing our total support to over £600,000. Many of the 600 Fellows of the Academy have also made generous donations as have other organisations, including PPP Healthcare Medical Trust, the Rayne Foundation, the Jean Shanks Foundation, the Kohn Foundation and the University Hospitals Association.

In the Academy, we have a champion for medical sciences, but it needs your continued financial support and commitment in order to consolidate its current position and, at the same time, accelerate growth. With that support, and the Academy's help, I'm sure we'll see the more rapid translation of scientific discoveries into direct, practical benefit to human health."



*Lord Walton and Professor Peter Lachmann at the July reception*

# Academy briefing on medical issues



During the summer, the House of Lords Select Committee on Science and Technology invited the Academy to provide a briefing on medical issues. This invitation was not only timely but also triggered a valuable exercise for the Fellowship. The briefing was to assist the Committee in compiling a long list of topics that might form the basis of Committee Inquiries during the year ahead. The

subjects were to be topical and of public interest; there also had to be some expectation that the Committee's involvement would have positive results.

Prompted by the Vice-President, we sent out a request via email to the Fellows in August asking them to let us have their views. The result was a list of some 95 suggestions, some overlapping, which provided a clear picture of current concerns and anxieties amongst the profession at large. It was a rich source of information and presented Council with a real challenge to whittle the number down to a manageable five presentations.

On 6 November, the Academy party, led by the President, set out their case before the full Committee. Lord Oxburgh was in the Chair. Sir Leszek Borysiewicz opened the session with the subject 'New and emerging infections'; Professor Adrian Hill spoke on 'Vaccination - benefits, risks, and new potential'; Professor Nicholas Day outlined the problems inherent in 'Personal information, confidentiality and medical research'. This was followed by Professor Nicholas Wright's presentation

on the 'Availability of human tissue for treatment and research' and the session concluded with a presentation from Professor Simon Wessely addressing 'Stress - myths and realities'.

The most challenging question from the Committee came from Lord Flowers who asked the Academy to select just one of the five items for the Select Committee to address. The President, with consummate skill, managed to bind three together under the heading of 'threats to academic medical research'; the threats are real, are happening now, and will have long term, and possibly irrevocable, consequences.

What will happen next? The Academy is determined not to lose the momentum engendered by this meeting and will now seek to have some of the issues raised in Parliament. We shall continue to brief the Committee informally and hope that they will choose one of the topics (or a variation thereof) for an in-depth inquiry. For its own part, the Academy plans to establish working groups to investigate some of the key areas that have surfaced during this exercise. Summaries of the individual presentations are available in the Academy Office; please contact Mrs Jane Alves if you would like details. Email: [apollo@acmedsci.ac.uk](mailto:apollo@acmedsci.ac.uk)

This direct interaction with the Fellowship injected a real sense of purpose and mission into our activities and we are particularly grateful to the many Fellows who responded.

**Mary Manning** *Executive Director*

## The Select Committee on Science and Technology



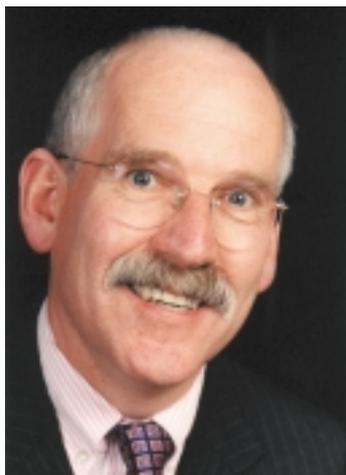
Behind the ermine of the Opening of Parliament, the House of Lords does a great deal of hard work. Some of the most useful is carried out in Select Committees which are standing committees of the House. They have wide-ranging powers of inquiry, set their own agenda and normally conduct detailed inquiries leading to a report.

The committees are supported by an experienced secretariat reinforced by one or more specialist external advisers for each study. Normally there are public calls for written evidence followed by some oral hearings. External visits are made. Oral evidence is taken in public and, along with written evidence, is published with the final report.

Most studies of the Select Committee on Science and Technology are not carried out by the main committee but by specialised ad hoc sub-committees of a dozen or so members. This provides a means by which peers who are not members of the Select Committee may participate in studies in which they have a special interest or expertise. There are normally two studies in progress at any one time.

We are in the process of mapping out our programme of work for the next couple of years. How do we decide what to work on? Above all, the Committee tries to be useful. Ideally it tries to identify topics where an objective collection and analysis of evidence would be helpful and timely and which have an important scientific or technical content: that includes medicine. Reports are formally addressed to Government who must publish a reply that, along with the report, is then the subject of a debate in the House. They can provide the stimulus

# The Treasurer's Tale



Three years on and what have I done? Firstly had enormous fun. It has been a real privilege to be in at the beginning and help shape a new organisation of the size and potential of the Academy. I have found great satisfaction from watching the Fellowship grow year on year and

from the impact made by the Academy's reports. Our influence, which is ultimately dependent on these two factors, continues to increase. Of course, much of the preparatory work had been undertaken before the official foundation of the Academy in November 1998. By that time, premises alongside the British Academy had been renovated and the Wellcome Trust had in addition agreed to provide initial funding. Earlier this year the Trust assessed our progress and allocated further funding. Their generous support will scale down over the next two years and come to an end in March 2004. Securing our financial future is now a priority for the new Council in general and the Treasurer in particular. Our annual expenditure is now almost £300k and rising.

Fund raising must be one way forward and we have now established a strong group to advise on appropriate contacts and initiatives. The events of 11th September have not made their task easier and we must all help however we can through personal links and in other innovative ways. I personally believe that, in addition, we must seek alternative methods of generating income. One possibility is to trade on our expertise - doing something for something. A number

of external organisations may well wish to use our knowledge and skills and be willing to provide the necessary funding. The recent scheme agreed with the PPP Healthcare Medical Trust indicates one such approach; the Academy undertakes the appointment and mentoring arrangements for the Clinician Scientist and Senior Surgical Scientist Fellowships scheme, based on the Academy's report (the Savill Report), and in turn receives a grant from the Trust which covers administrative costs. The Department of Health have agreed a similar scheme for its fellowships. Thinking more laterally, I believe that the Institute of Medicine in the USA is a useful model for our own Academy. Although a much larger enterprise than we are likely to become, the Institute undertakes authoritative reviews of topics of public interest and receives funding from government agencies. To date their independence has been assured by the high quality and objectivity of their reports - which, of course, the Government can accept or reject as it sees fit.

Given the niche that we occupy between the Department of Health and the Department for Education & Skills, I believe that there is much that we could do to help ensure that the public and indeed the country benefit from excellence in the medical sciences. For the moment we remain remarkably well poised for action - the precise nature of which will be determined by my successor Sir Colin Dollery. While I am sorry to be demitting office I am delighted that Colin has agreed to become Treasurer and I hope that he enjoys his time with the Academy as much as I have.

In bidding au revoir, I want to thank you for all the friendship and enjoyment over the last three years - with a special word of thanks to Mary Manning and all the staff, past and present, for their support and forbearance.

**Professor Graeme Catto** *FRSE FMedSci*

and even the basis for new legislation, or encourage changes in practice by non-governmental bodies. Recent studies have included the disposal of nuclear waste, the aircraft-cabin environment (paving the way for recent interest in DVT and stimulating airlines into alerting passengers to potential problems), antibiotics, the legalisation of the therapeutic use of cannabis, and Genetic Data Bases.

The Committee is always willing to entertain suggestions for new studies and a number have been put to us: brownfield sites, the teaching of mathematics in schools, the use of technology to mitigate anthropogenic contributions to climate change, procedures and protocols for understanding the causes of major accidents and others. A decision on the first part of our programme will be made shortly after Parliament reassembles but we are still open to receive proposals for subsequent studies.

I might comment as a relative newcomer how pleasantly apolitical I have found meetings of our Select Committee. Everyone is there simply to find a constructive way through what are often scientific and legislative quagmires!

**Lord Oxburgh**, *KBE FRS FMedSci Chairman, Select Committee on Science & Technology*

We warmly congratulate founder Fellows who have brought lustre to the Academy as the 2001 recipients of: the Nobel Prize in Physiology or Medicine, the Lasker Award for Basic Medical Research, and the Rhoda and Bernard Sarnat International Prize.



*Dr Tim Hunt FRS FMedSci*

## TWO FELLOWS WIN THE NOBEL PRIZE

Two of the three winners of the 2001 Nobel Prize in physiology or medicine are Fellows of the Academy. **Sir Paul Nurse** and **Dr Tim Hunt**, both of the Imperial Cancer Research Fund, were awarded the prize along with Dr Leland Hartwell of the Fred Hutchinson Cancer Research Centre in Seattle for their seminal discoveries of “key regulators of the cell cycle”.

Sir Paul Nurse identified and characterized CDK (cyclin dependent kinase), one of the key regulators of the cell cycle and produced evidence of a common control system among all eukaryotic organisms. Dr Hunt, working with sea urchins, discovered the first of the family of proteins called cyclins that regulate the CDK function. Dr Hartwell’s work on yeast identified a specific class of genes that control the cell cycle.

These discoveries will benefit many different areas of biomedical research. They are about to be applied to cancer diagnosis and may offer new treatments for controlling cancer cells.



*Sir Paul Nurse FRS FMedSci*

## AWARD FOR DESIGNER-MOUSE PIONEER

**Professor Martin Evans**, Director of the School of Biosciences and Professor of Mammalian Genetics at Cardiff University, and a founder Fellow of the Academy has been awarded the 2001 Lasker Award for Basic Medical Research. The award was made for Professor Evans’ pioneering work on stem cells which included the discovery of mouse embryonic stem cells and techniques to isolate and grow them. He shares the award with Professors Mario Capecchi of the University of Utah and Oliver Smithies of the University of North Carolina whose combined efforts have allowed the development of a vast range of genetically engineered “designer mice” that are of immense value in furthering medical scientific research. Professor Evans received his award in New York in September.



*Professor Martin Evans FRS FMedSci*

## INTERNATIONAL PRIZE IN MENTAL HEALTH

**Sir Michael Rutter**, of the Institute of Psychiatry, University of London, who is also a founder Fellow and former member of the Academy’s Council, and Professor Solomon Snyder of Johns Hopkins University are the 2001 winners of the US Institute of Medicine’s Rhoda and Bernard Sarnat International Prize in Mental Health - awarded for outstanding achievement in improving mental health. They each received a medal and \$10,000 at the Institute’s annual meeting on 16th October 2001.

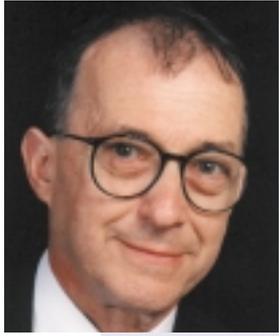
Sir Michael’s pioneering work on the integration of psychosocial factors, genetics, and development has elucidated the interaction of nature and nurture in psychological development. It has advanced the understanding of psychosocial risk and protective factors in childhood mental disorders and provided greater understanding of autism, antisocial behaviour, and the later effects of severe childhood deprivation. His novel clinical perspectives and interdisciplinary method have fostered new approaches to developmental and child psychiatry.



*Sir Michael Rutter CBE FRS FMedSci*

**Footnote:** Tim Hunt and Michael Rutter were the star attractions at the recent Academy’s Annual Meeting when they presented fascinating insights into their work to an audience of Fellows and guests.

# A sombre time - responding to natural and malicious disasters



When the millennium bug so spectacularly failed to materialise on 1 January 2000 we were perhaps all too eager to celebrate, not realising that other bugs were in the offing. The last year has seen not only a massive epidemic of foot and mouth disease but also, as a translation from horror story to real life, the use of anthrax as a biological terror agent. Coming in the wake of the truly appalling atrocities that were committed in New York and Washington on 11 September, the end of 2001 has to be a sombre time.

On behalf of the Academy, I wrote to our colleagues at the US National Academy of Science and The Institute of Medicine to express our horror and our sympathy and the hope that medical sciences - not only bacteriology and virology, but also psychopathology, have something to offer the world in this unpleasant predicament.

The foot and mouth epidemic seems to have run its course and is now entering the post-mortem phase with three inquiries to explain what happened, to assess how it could have been prevented and dealt with better, and how to prevent further epidemics in the future. One of these inquiries is being conducted on behalf of the Royal Society and is chaired by Sir Brian Follett. Their

job is to look into infectious disease in livestock. The Academy will submit evidence to this group. It seems likely that in the first instance we will try to persuade them to cast their net a little wider than the three animal virus diseases they selected to concentrate on at their first meeting. If the intention is to study livestock diseases that have implications for human as well as animal health there are wider groups of infection that need to be considered. We will doubtless also address the question on whether vaccination rather than eradication policy makes more sense for controlling foot and mouth disease. The decision to eradicate was made many many years ago, on essentially economic grounds, it being held to be cheaper to have a slaughter policy for the rare occasions when an epidemic emerges rather than a continuous vaccination policy. This really does need to be looked at again. Vaccination has got much better and the total costs of a foot and mouth epidemic, with the knock on effects for industries not directly concerned with farming, have been greatly increased. The whole question of how government gets scientific advice will undoubtedly also again come under scrutiny. The recommendations of the Philips Inquiry that suitable expert bodies should be asked to suggest names for this purpose has yet to be acted upon.

**Peter Lachmann** *PMedSci*

## Editorial

I hope that those who have been sceptical about the ability of the Academy to justify its existence will be impressed by the encouraging evidence in this issue that it is meeting the objectives which inspired its founding only three years ago - namely, to present and represent the best interests of scientific research, teaching and development in medicine.

Lord Oxburgh's informative piece on the House of Lords Select Committee on Science and Technology demonstrates the significance of Mary Manning's report on its invitation to the Academy to "provide a briefing on medical issues". Advocates of good causes know what a world of difference there is between pleading for an audience and being invited to advise those in such a strong position to influence the development of policy.

The standing of any organisation depends crucially upon the quality and reputation of its members, and Fellows therefore have every reason to rejoice with colleagues who receive recognition of their work especially when it involves a visit to Stockholm and other attractive locations.

**Sir Alexander Macara** *FMedSci* *Editor*



*The Editor and Sir Roddy MacSween at the Academy's House of Lords Reception*

# Radiation, Health and Chernobyl



Sir Dillwyn Williams and Dr Gerry Thomas exchange views

Recent observations on the interaction of radiation and the genome were discussed at an Academy meeting on October 10th, with topics ranging from genomic instability to the consequences of the Chernobyl accident. The meeting, jointly chaired by Dillwyn Williams and Alec Jeffries, opened with

a discussion by Roger Cox from the NRPB on radiation germline defects and carcinogenesis using evidence from experimental studies demonstrating natural polymorphic variation with substantial differences between different strains of mice.

Radiation induced genomic instability was then reviewed by Eric Wright, from Dundee. Work on cell cultures shows that the induced instability affects the whole genome and persists for many cell generations. The pattern of change has the characteristics of spontaneous rather than direct radiation induced defects. This phenomenon cannot be explained by conventional mutational mechanisms; surprisingly irradiation of some of the cells in a culture leads to instability in the progeny of unirradiated as well as irradiated cells. These observations are of unproven significance to human health, but genomic instability observed *in vitro* shows similar features to the inherited chromosomal instability syndromes, which are associated with an increased risk of malignancy.

Addressing the consequences of the Chernobyl accident, Dillwyn Williams presented data showing that the large increase in thyroid carcinoma incidence in children exposed to high levels of fallout correlated with the level of exposure, and fell dramatically in children born after the accident. These observations, together with the huge amount of radioiodines released and the lack of any major increase in tumours other than of the thyroid points to radioiodines in fallout as the cause. Susceptibility was strongly linked to age at exposure being highest in the

very young. The reasons for this include high milk intake, greater thyroid uptake and a greater chance of acquiring further mutations because of the growth kinetics of the gland. The approximately 2000 thyroid carcinomas that have so far occurred due to Chernobyl are the largest number of human tumours of one type due to a known cause on a known date that have ever occurred and this study can help to unravel the links between molecular biology, morphology and clinical behaviour, indeed the whole natural history of radiation induced thyroid carcinoma.

Yuri Dubrova then presented evidence that exposure to Chernobyl fallout also led to an increase in germline mutation rates in families. The frequency in children born after Chernobyl was nearly double that from children born before Chernobyl. The mutation rate in children born to unexposed fathers from the area around Chernobyl was similar to that from the UK and from Kazakhstan. In addition to these findings in humans, considerably increased rates of mutation were found in wheat exposed to post Chernobyl contamination.

The final presentation was by Gerry Thomas from Cambridge, who described the creation of an international tumour bank to make nucleic acids from Chernobyl-related thyroid carcinomas available to researchers across the world. This unique venture involved the governments of Belarus, the Russian Federation and Ukraine, with financial support from the EC, US (NCI), Japan (Sasakawa Foundation) and WHO. Tumour diagnosis is agreed by an international panel of pathologists. A unique feature of the project is that all those working with material from the bank are asked to return results at the end of their study so that they can be correlated with those of other groups on a case-by-case basis to look for examples of potential oncogene interactions.

The spirited discussion at this meeting will hopefully lead to future collaborations both on genomic instability and the mechanisms of radiation induced human carcinogenesis.

**Professor Sir Dillwyn Williams** *FMedSci*

## Stem Cell Meetings - London to be followed by Paris

The highly successful meeting 'The New Biology of Stem Cells' organised by Dr Fiona Watt *FMedSci* and held in London in November (report in the next issue) is to be followed up with an international conference in Paris. 'Stem Cells and Cell Therapy' organised jointly with the Académie des Sciences will take place on 25-27 March 2002. Further information is available from Fabienne Bonfils, Académie des Sciences, 23 Quai de Conti, 75006 Paris; tel: 01 44 41 43 82; email: f.bonfils@academie-sciences.fr



# Meetings Programme

The programme below has been developed in response to Fellows' suggestions. If you would like to propose a meeting topic please get in touch. Fellows and interested colleagues are warmly invited to attend the following scientific meetings. The Fellowship will be mailed programmes prior to each event. Please see the Academy website ([www.acmedsci.ac.uk](http://www.acmedsci.ac.uk)) for up to date details and registration information; additional meetings will be added to the calendar. Alternatively, contact Susan Wicks on [susan.wicks@acmedsci.ac.uk](mailto:susan.wicks@acmedsci.ac.uk)

## CONFIDENTIALITY AND CONSENT: WHERE ARE THE LIMITS?

12 February 2002 - London,  
organised by Professor Peter Lachmann FMedSci

Attention continues to increase on the problems associated with confidentiality and consent in medicine. There have been substantial shifts in people's views to which the regulatory environment is now responding. However, there is no general consensus underpinning the changes taking place.

The Academy's meeting will explore, from philosophical and theological viewpoints, as well as those from medicine and medical science, questions that have arisen from the Alder Hay and Bristol reports, new GMC guidance and the EU Data Protection Directive. Speakers include Baroness O'Neil, Sir Cyril Chantler, Lord Turnbull, Professor Michel Cuénod and Mr Nick Partridge.

## NEUROLOGICAL REHABILITATION: CAN WE BRING SCIENCE CLOSER TO PRACTICE?

15 April 2002 - London,  
organised by Professor Raymond Tallis FMedSci

Rehabilitation of patients with neurological impairments has improved in recent decades, mainly due to higher level interventions aimed at helping patients to adapt. Now, thanks to a revolution in our understanding of the relationship between structure and function in the nervous system, the possibility of developing techniques to reverse impairments is likely.

Speakers at the meeting, including Academy Fellows Professor Ray Tallis, Professor Richard Frackowiak, Dr Geoffrey Raisman and Dr Evan Snyder, will discuss the emergence of technologies such as stem cell implants and drugs and their role in encouraging regeneration and repair. The meeting will conclude with a guest lecture from Professor Michael Merzenich, one of the world's leading researchers in the 'soft-wired' nervous system, on prospects for driving recovery in the neurorehabilitation of the future.

## EXPERIMENTAL INFECTIONS OF HUMAN VOLUNTEERS

Date to be confirmed - May 2002, Oxford

Challenge studies of human volunteers with pathogenic microbes are complicated but yield huge potential benefits, especially since for many infections humans are the only valid experimental model. At the very least, this type of research may facilitate the lengthy and expensive process of vaccine development. The crucial balance of benefit and risk will be considered in the context of fundamental research, public perception, ethics and the law in this meeting organised by Professor Richard Moxon FMedSci.

## THE JEAN SHANKS LECTURE 2002

7 May 2002 - London

Dr George Poste FRS FMedSci, Chief Executive Officer of Health Technology Networks, USA, will deliver the annual Jean Shanks lecture on the topic of bioterrorism. More information to follow.

## SOLUTIONS TO HEALTH THROUGH GENE KNOWLEDGE (REGIONAL MEETING)

28 May 2002 - Edinburgh,  
organised by Professor Colin Bird FRSE FMedSci

This meeting will include presentations from leading researchers in the fields of pharmacogenetics and colorectal cancer. Speakers include Professor David Porteous FMedSci, Professor Harry Campbell and Professor Roland Wolf. Professor Sally Macintyre FMedSci will chair the debate, 'Will genetic profiling prove acceptable to the public and show tangible benefits for all?'

## REGIONAL MEETING

4 October 2002, - Leicester,  
organised by Professor Ian Lauder FMedSci

More details to follow.

## FELLOWS' DINNER

21 November 2002 - London

More details to follow.

## ENVIRONMENTAL OESTROGENS AND ANTI-ANDROGENS

Details to be confirmed - October 2002  
organised by Professor Ieuan Hughes FMedSci

There is evidence for increases in certain disorders in the male reproductive tract, and apparent decreases in sperm counts, which may be related to increased exposure to environmental oestrogens. This meeting will encourage discussion of the scientific issues from a multidisciplinary perspective, covering epidemiology, toxicology and cellular mechanisms as well as clinical effects.

## EVOLUTION AND DISEASE

Details to be confirmed - December 2002

The central idea of evolutionary or Darwinian medicine is that there are mismatches between our dietary and behavioural or lifestyle habits and our genetics, the latter having undergone prior selection for adaptability under very different environmental/social circumstances. This meeting, co-organised by Professor Mel Greaves FMedSci with Dr Randolph Nesse and Dr John Lee, will focus on how the evolutionary view might provide a framework within which to understand how gene/environment interactions bring about disease. Participants will include evolutionary biologists, geneticists, anthropologists and pathologists.

# Academy business in Wales



On October 22 the Academy visited Wales for the first time when a Regional Meeting was held at the University of Wales College of Medicine in Cardiff. After a business meeting for Fellows at which the President congratulated Professor Martin Evans, Director of the School of Biosciences at University of

Wales, Cardiff on being awarded the 2001 Lasker Prize for Basic Medical Research, delegates were welcomed by the Vice-Chancellor of the College of Medicine, Professor Stephen Tomlinson, and by the President. A lively scientific session then followed with instructive and stimulating talks on the theme of modelling and mending brain function from Professors Graham Collingridge, Gillian Bates and Steve Dunnett that provoked much interest and discussion. The meeting

concluded with an entertaining debate on peer review. Was this the best way to assess science and scientists' contributions? Professor Sir Leszek Borysiewicz was in favour but with reservations; Professor Simon Wessely had even more reservations and came down against it. Many in the audience also had strong views on one side or the other but few practical alternatives were suggested. The meeting had been planned with the intention of making it easily accessible to researchers of all ages and degrees of seniority. In his introduction the President remarked that though the audience was not quite the largest yet seen at a Regional Meeting - about 80 attended - it was certainly the youngest. Overall the meeting was judged a great success: the scientific session and debate were excellent and it did much to raise the profile of the Academy in Wales.

**Professor George Elder CBE FMedSci**

## Academy President Honoured

We congratulate Professor Peter Lachmann PMedSci on his election as a Fellow of Imperial College of Science Technology and Medicine. One of only three Fellows elected in 2001 Professor Lachmann received the award at the College's Commemoration Day ceremony on 31 October.

## New faces at Council

We say farewell and thank you to the retiring members of Council: Professor Peter Biggs, Dame Fiona Caldicott, Professor Christopher Edwards, Professor Patricia Jacobs, Sir Michael Rutter and Professor Jim Smith, and extend a warm welcome to the new recruits: Professor Michael Owen, Sir Keith Peters, Professor Julia Polak, Sir John Skehel, Professor Robert Souhami and Professor Anthony Weetman.

## New Member of Staff

The Academy welcomes a new member of staff to the London office. Laurence Ehlers joined on 3 September as part-time Administrative Assistant to provide support for Fellowship, development and external relations activities. Laurence, originally from Belgium, spent her years in higher education in London, and before joining the Academy worked in the painting departments of Sotheby's and Phillips auctioneers.



*The Academy of Medical Sciences was established in 1998 to act as an authoritative body to promote medical science across traditional boundaries. The Academy campaigns for better structures in support of the medical sciences, promotes excellence in research, provides scientific advice, encourages better communication of medical science and provides quality services to its Fellowship. The Academy draws its authority from its elected Fellowship of 630 top medical scientists in the UK who may use the suffix FMedSci. The Academy Officers are Professor P J Lachmann FRS (President), Lord Turnberg (Vice-President), Sir Collin Dallery (Treasurer) and Professor Mark Walport (Registrar).*

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