“By far the most dangerous foe we have to fight is apathy – indifference from whatever cause, not from a lack of knowledge, but from carelessness, from absorption in other pursuits, from a contempt bred of self-satisfaction” – Sir William Osler (1849-1919), Canadian physician and founding Professor of Medicine at Johns Hopkins Hospital.

2012 was an eventful year in Irish medicine. Budget over-runs in the health service, political scandals involving the health minister and the selection of primary care centre sites in his constituency, the high-profile resignations of HSE chief Cathal Magee and Minister of State Roisin Shortall, and salary disputes involving hospital consultants and nursing graduates, all made it into the news pages. Against all of this, more health workers than ever before are leaving Ireland – not just junior doctors, but nurses, physiotherapists and other allied health professionals too. The talk among students now is not so much if you plan to leave, but rather when and where you plan on going. A future in Ireland is – for many – not on the table anymore. This depressing reality cannot and should not be ignored, and Lava Chalikonda’s article (page 93) is an interesting piece on the topic. I strongly encourage all students to read it and think about the issue, because it will affect you in just a few short years’ time.

“Science is a way of thinking much more than a body of knowledge,” as Carl Sagan said, and this issue of the journal showcases many examples of stellar scientific thinking. Articles from Natasha Mehandru on stem cell therapy for multiple sclerosis (page 54), and Michael Kuhlmann on the new area of three-dimensional patient-specific models to guide therapy (page 68) are examples of this. Our journal also showcases the excellent work that is being carried out in Irish hospitals by our students. Aoife Cahalin’s paper on PAR-4 as a novel marker in breast cancer is an excellent piece of work (page 37). This year, our cover article by Ramia Jameel (page 79) discusses the exciting new research developments in cystic fibrosis (CF). Elsewhere, there is an excellent piece of original research from Moyser Mulla on the hormonal factors that influence CF (page 22). Ireland has the highest incidence of the disease in the world, and much work is carried out on CF in Irish hospitals and here in the RCSI. Ramia takes a close look at the new gene-modulating treatments for CF, which target the cause of the illness rather than the symptoms. The best known of these, ivacaftor (Kalydeco), was approved by the Minister for Health, James Reilly TD, in February 2013. However, ivacaftor comes with an expensive price tag that is well above the threshold cost per QALY (quality-adjusted life year). The decision to approve it, while immediately politically popular, may prove controversial in the long term as cuts have to be made elsewhere.

While the journal puts a spotlight on advances in practising medicine, it must not be forgotten that the ethical discussions around how we practise are important too. “Education is an admirable thing”, Oscar Wilde once said, “but it is well to remember from time to time that nothing that is worth knowing can be taught”; indeed, we cannot learn ethics from a book, we must think about how we practise medicine instead. Elizabeth Ahern-Flynn provides a fascinating account on female genital mutilation (page 84), and Yoshihiro Katsuura explores stimulant abuse in education (page 74). As ever, we have our ethics prize, and we are delighted to present the winning essay from Diarmuid O’Brien (page 7). We strongly encourage students to reflect on ethics in both clinical practice and research. Some of the most significant advances in healthcare have not just been scientific; they have also been social and political, for example the passage of the Affordable Care Act (“Obamacare”) in the US. These fields are all guided, fundamentally, by an ethical concern for people. In this hope, we invite everyone to submit for the next ethics challenge (page 6). Finally, I hope that everyone gets something of benefit from this journal: whether you have an article published, or you were involved in our peer review process, or – most importantly – you read a piece and found that it opened questions in your mind. As Carl Sagan said above, science is not a body of knowledge, it is a way of thinking. The journal seeks to stimulate and encourage that way of thinking, because all of us will play a role – for better or for worse – in the future of healthcare. We must support causes that we are passionate about, research areas that we are interested in, and share ideas that are important.

“The very first step towards success in any occupation is to become interested in it.” – Sir William Osler

Food for thought

Eoin Kelleher
Editor-in-Chief, RCSImj 2012-2013