ISSUE 12: WINTER 2014

Festive Greetings from Mike Greaves

s this winter issue of the College Bulletin is published, not only do we come to the end of the first semester of the Academic Year 2014/15 but also the end of the year 2014. For the first time our students are undertaking their exams before Christmas. I would like to take this opportunity to wish students the very best with their exams, and wish them an enjoyable holiday period. I would like to thank staff in advance for their continued hard work over the holiday period marking exam scripts.

Although we draw to a close the year, 2015 will see the continuation of the past few months of hard work and change. Consultation has commenced to begin the process of creating the University's new Strategic Plan. The Principal hosted four lunch time question and answer sessions with staff across the University in October and an additional number of early morning and evening sessions, to enable all University staff to contribute to

this process. A dedicated email address and website is soon to be launched to continue the flow of information between staff and the management team at the core of constructing the plan. Included on the agenda are the University rankings and retention statistics. Whilst the University is a top 200 World Institute, UK rankings remain an issue and colleagues should be prepared to see work commence to improve this. I know that colleagues are working hard to optimise student retention and we are seeing very significant advances in some areas. I would like to encourage engagement with the formation of the Strategic Plan and encourage staff to make use opportunities made of the available them to do so. Other strategic priorities such as Internationalisation and the capital plan will also continue to move forward. For the College, 2015 will see the completion of the Rowett Build, and very exciting times are ahead as we welcome staff to the Foresterhill campus.

Of course 2014 saw its challenges, new students accommodation difficulties at the start of term, and some elements of our student population perhaps smaller than we would like. However, College staff are to be praised for their efforts assisting with registering students with the new OneSource system this September, and providing a warm and welcoming atmosphere to assist new students with their transition University life. accommodation issues were dealt with extremely efficiently and any adverse impact was minimised.

This time last year we all breathed a sigh of relief after months of hard work ensuring we submitted in time to REF 2014. Now, little over a year after the submission, we are on the verge of receiving those long awaited results. I look forward to the publication of data and am sure 2015 and beyond will see the College continue to achieve major societal impact through our research and teaching. As part of

the College's commitment to providing a productive and successful research environment, I was delighted to attend a two day PI residential course in Banchory at the start of December. 24 delegates from across the College attended the event, and I hope they all took home new skills and ideas to help them in their research. Lunch and Learn sessions will be provided as a follow up, and a second event will run later in 2015 for senior PI's.

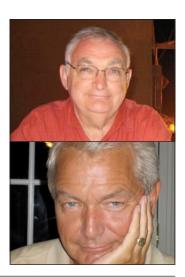
Administrative staff will also take part in a second College wide development event at the start of the new year, following on from the success of last year's conference. Staff will be undertaking speed mentoring and I look forward to hearing about the day.

I hope you enjoy this edition of the Bulletin, and I would like to thank staff and students for their hard work over the year and wish everyone in the College a very happy holiday and warm wishes as the New Year approaches.

A symposium to celebrate Aberdeen's pioneering bio-entrepreneurs – Save the date!

berdeen has a strong reputation in the commercialisation of scientific ideas going back many years with people such as Professor Bill Harris and Professor Norman Hardman in the vanguard of this movement. Sadly, 2014 saw these two pioneers pass away. Their legacy however remains, with commercialisation of the University's intellectual property portfolio a cornerstone of our entrepreneurial ecosystem; generating spin-outs, industrial funding and an opportunity for staff and students alike to showcase their business flair. To celebrate Bill and Norman's trail-blazing achievements, and to highlight the importance of the University of Aberdeen in their success, we are hosting a two day symposium on 19 – 20th February 2015, in the Institute of Medical Sciences. There will be a selection of international speakers describing their current research and how much of this ground-breaking science can trace its earliest origins to Aberdeen and the influence of Bill or Norman. This will be a fantastic opportunity to hear a broad range of scientific presentations and learn how academic excellence can be translated into both commercial success and be of benefit to patients.

To register your interest please email Hazel Paterson (h.a.paterson@abdn.ac.uk)



Play Date - Nursery children engage in ocean drug discovery

Dr. Wael Houssen, Institute of Medical Sciences



n the 10th April 2014, Dr Wael Houssen from the IMS spent the day with children (2-5 years old) at The Little Acorns Day Nursery, in Cornhill talking to them about the research he is conducting at the University in the area of drug discovery from marine organisms. Children were assembled in three groups according to their age and a suitable presentation was delivered to each group. Amazingly the children were very interactive and picked up the message that science is equally fun and important. They enjoyed watching movies from collecting expeditions. They also had great fun taking and pictures under water using underwater camera and slats, or trying on some diving gear. Dr Houssen believes that it is very important to target the children at this early age at which they are very eager to explore the surrounding world. These engagement activities will last with the children as they get older so it is critical for the future of the UK. The staff enjoyed the event very much and appreciated the research that is conducted in the labs within the University.

Melanoma study wins top award

elanoma sufferers who their receive first treatment from a GP are no worse off than patients referred directly to hospital, according award-winning research from the University of Aberdeen.

The academics behind the study say that adopting this practice could lead to quicker diagnoses and result in a better system for patients and the NHS.

The study won the Royal College of General Practitioners (RCGP) cancer research paper of the year award.

"Currently, in the UK, when a GP thinks a patient may have a melanoma skin cancer they are supposed to refer them straight to hospital," explains lead author, Dr Peter Murchie. "GPs discouraged from treating them first with minor surgery because melanoma is so difficult to diagnose.

"However, up to 20% of people diagnosed with melanoma in the UK end up receiving their first treatment from a GP. This happens because a GP may not realise the patient has skin cancer, as it is so difficult to diagnose. This is usually viewed by specialists as wrong, despite there being no good evidence that GPs are less able to deliver this treatment.

preliminary contrast, treatment by a GP is the norm for treating melanoma in Australia, where the condition is much more common.

GPs are discouraged from treating them first with minor surgery because melanoma is so difficult to diagnose

"We conducted this research to discover if people from North East Scotland who had their first operation for melanoma carried out by their GP were worse off as a result."

The study looked at information from around 1,200 people diagnosed with melanoma in North East Scotland between 1991 and 2007. It found that around 20% of them received their

first melanoma treatment from their GP.

Dr Murchie added: "We found no evidence that people who had their first treatment for melanoma from a GP were more likely to die than those who had their first treatment in hospital. There was also no evidence that receiving initial melanoma treatment from a GP caused people to have more subsequent ill-health.

"Therefore, if GPs are encouraged to initially treat people with melanoma it's possible they could be diagnosed more quickly, resulting in a better system for patients and the NHS."

The paper was co-authored by Dr Amanda Lee, Dr Neil Campbell and Dr Edwin Amalraj Raja.

Melatonin as a novel treatment for Sepsis

Professor Helen Galley and Professor Nigel Webster

rofessor Helen Galley and Professor Nigel Webster are about to start a randomised controlled trial of Melatonin in patients with sepsis (severe infection) on the Intensive Care Unit (funded by the Chief Scientist Office). The study is called DAMSEL2 (Dose Assessment of Melatonin in SEpsis trial.). Sepsis is the most common cause of death on the ICU and has an overall mortality rate of 30%, rising to over 70% in patients who go on to develop organ failure.

Melatonin is well known as something that controls the sleep-wake cycle and some people also use it for jet lag. However it is also a powerful antioxidant and accumulates in mitochondria. Mitochondrial dysfunction associated with oxidative stress and inflammation are the hallmarks of sepsis and our pre-clinical studies have shown that melatonin treatment reduces inflammation, mitochondrial damage and organ dysfunction under conditions of sepsis.

Protecting the tropical forests of Borneo from invasive Australian trees

Professor David Burslem, School of Biological Sciences

orking with a team from Universiti Brunei Darussalam, Professor David Burslem of the Institute of Biological Environmental Sciences (IBES), University of Aberdeen, is currently investigating the invasion of Acacias into kerangas (heath) forests of Brunei Darussalam. In collaboration with Dr Rahavu Sukri and Assoc Prof Dr Kushan Tennakoon of the Faculty of Science and Institute for Biodiversity and Environmental Research (IBER) at Universiti Brunei Darussalam, Professor Burslem has visited Brunei twice to work with the team. This collaborative research project is being supported by a research grant from UBD awarded to Dr Rahayu Sukri as the PI.

Kerangas forest occurs throughout Borneo on raised beaches and is known for its inability to support agriculture: the word kerangas is an Iban word that roughly translates as 'land which cannot grow rice'. These forests have not evolved to withstand burning and so recovery after fire takes decades. *Acacias* belong to a family of exotic trees native to Australia. Their adaptations to fire allow *Acacias* to dominate these disturbed environments, and there is a fear that this will prevent the recovery of the native kerangas forest.

Acacia is prized for its quick growth and production of useful timber for furniture, making it a great choice for forestry plantations and stabilising soil after anthropogenic or natural disturbances. As a result, Acacia has been planted in environments around the globe, from Mediterranean climates in South Africa to tropical Southeast Asia. However, due to its vigorous growth, Acacia can become an invasive pest, outcompeting native flora and putting pressure on native ecosystems. In Brunei, observations suggest that Acacia, assisted by fire, is spreading and will ultimately severely degrade forest biodiversity, as well as preventing regeneration of native kerangas plant species.

The current project investigates the impact of invasive *Acacia* in conjunction with fire on the kerangas forest of Brunei. The research group is looking at changes in edaphic conditions, species compositions and light environments in localities that were formally pristine kerangas forest. No studies as yet have investigated changes in these characteristics, and the team hope that the results will provide a solid foundation for a more comprehensive assessment of *Acacia* invasion in Brunei Darussalam, as well as the research and development of restorative measures.



International Development and Knowle

1st National Training Course i

rofessor David Reid, the Head of School of Medicine & Dentistry, and Professor Phyo Myint, Professor of Medicine of Old Age, from the College of Life Sciences & Medicine, University of Aberdeen were among the seven International Faculty Members who delivered keynote lectures in the 1st National Training Course in Geriatric Medicine organized by the Manmohan Memorial Teaching Hospital funded by the World Health Organization and supported by the Ministry of Health & Population, the Government of Nepal. The course was developed through collaboration between the Department of Gerontology, Manmohan Memorial Teaching Hospital (MMTH), Kathmandu, led by Professor Gautam (former Lead geriatrician from the NHS Grampian) in collaboration with the CLSM, University of Aberdeen and Robert Gordon University, Aberdeen.

The teaching course was attended by 42 delegates from 24 districts covering wide geographical areas of Nepal as well as from the National Army Hospital, Armed Police Hospital and the Police Hospital. The course aimed to provide introduction to the principles and practice of Geriatric Medicine and it also aimed to promote the concept of holistic care needs and multidisciplinary approach that are essential in care of an older person. The course was a successful and high profile event opened officially by the Minister of Health and Population, Honourable Mr. Khaqaraj Adhikari, MP. He said "The government is very happy to support this kind of training because although at the policy level we have made several provisions nationally for the proper healthcare of the elderly people in Nepal we have no trained manpower to deliver the service. I am thankful to organizers for bringing this collaboration. My special thanks are to the visiting International Faculty." At the informal faculty dinner, the Honourable Chitralekha Yadav MP, the Minister of Education, also expressed her commitment in assisting educational needs and development of trained manpower to look after ageing population of Nepal.

Like many other developing Nations in Asia, Nepal is experiencing the rapid demographic transition. Professor Myint said "We hope this event will serve as a good foundation in Nepal in setting up training and development of health care professionals to meet the health and social care needs of older people in Nepal. The Grampian region and Nepal share common challenges in looking after the older people living in remote and rural areas. This course allows us to share our experience and expertise in teaching and training of geriatric medicine with our colleagues in Nepal. We are confident that this course will equip the participants with essential knowledge and potential to develop innovative solutions which are relevant to the local ageing population by collaborative working with health care policy makers in Nepal." He added "We are extremely delighted to contribute to this important training event and very much encouraged by the support and enthusiasm we received. We very much hope to continually involve and assist future knowledge transfer activities as well as developing research and clinical services in collaboration with local and government organizations".

Professor David Reid said that the visit should help foster future links between the Manmohan Memorial Teaching Hospital and the University of Aberdeen both in regards Medical Student Education as well as Research. During their visit, Professors Reid and Myint (centre and right in the picture) also visited the Manmohan Memorial Teaching Hospital (currently 300-bedded facility). The hospital was named after the late Prime Minister of Nepal Mr Manmohan who was regarded as a champion



of older people of Nepal. He was the Prime Minister whose Government started the system of old age pension for the elder citizens of Nepal. One of the mission statements of MMTH is to provide health care services which are elderly friendly. The MMTH houses the first Gerontology Day Unit and a dedicated Outpatient service in Nepal, run by Dr Deepa Shah. She is a general physician with interest in Geriatric medicine who visited Aberdeen to receive geriatric specific training at the Aberdeen Royal Infirmary and Woodend Hospital.

Other Faculty members from Aberdeen included Ms. Thérèse Jackson, Consultant Occupational Therapist in Stroke, NHS Grampian, Mrs Anne Wallace, Subject Lead, Physiotherapy and Mrs Dawn Mitchell, Subject Lead, Occupational Therapy, School of Applied Health Sciences, the Robert Gordon University.

The course took place at the Hotel Soaltee Crowne Plaza, Kathmandu, Nepal, between 2-7 November 2014. All participants were awarded certificates by Dr Guna Raj, the Chief of the Curative Division of the Ministry of Health and Population at the closing ceremony. Two participants were invited to comment about the course at the closing ceremony. Dr Sailesh Jha, a Senior Medical Officer said that he was very grateful for this training and hoped that subsequent courses would include topics such as management of cardiovascular disease and diabetes in the elderly. Dr Rashila Amatya said that her practice would now change and that she would share this knowledge with her younger colleagues in her hospital.

Professor Gautam expressed his grateful thanks to all visiting faculty for their assistance in making this a highly successful course.



dge Transfer Activity of CLSM members:

in Geriatric Medicine in Nepal



The Minister of Health & Population lighting the Paanas, a traditional Nepali lamp used for auspicious occasions, to open the event



Former Deputy Prime Minister and Patron of MMTH, Honourable Mr. Bharatmohan Adhikari MP giving speech at the opening ceremony



Professor David Reid and Professor Phyo Myint with Dr Ramkumar Adhikari, Associate Professor from the Institute of Applied Health Sciences, MMTH.

Aberdeen researcher speaks on better global health through community participation

global health researcher from Aberdeen spoken international conference on her work in pioneering new ways of involving some of the world's poorest communities in radical action to improve their health.

Dr Lucia D'Ambruoso, a lecturer in global health at the University of talked Aberdeen. Participatory Action Research (PAR), and how community participation in research enabling people to ownership of health challenges through the collective production and exchange of new knowledge can bring positive changes in policy, awareness and practice.

Dr D'Ambruoso has co-authored a book, which explains the concept and how to put it into action. Participatory Action Research in Health Systems: A Methods Reader has been published by the Regional Network for Equity in Health in East and Southern Africa (EQUINET), Training and



Research Support Centre (TARSC), the Alliance for Health Policy and Systems Research (AHPSR), World Health Organisation (WHO) and the International Development Research Centre (IDRC) Canada. The book was launched at the Third Global Symposium on Health Systems Research in Cape Town, South Africa - a major international event bringing together researchers, policymakers, representatives of donor and multinational organisations and other stakeholders to share evidence, identify knowledge gaps and develop research agendas.

In Cape Town, Dr D'Ambruoso talked about this approach, with examples in maternity care in South Asia and

surveillance in South Africa. The event aimed to deepen the discussion for researchers, health workers, academics, people working in state, civil society and non-state organisations, community leaders, and workers in all regions who are using - or are keen to use - participatory methods to improve health awareness, systems and care. Explaining the concept of Participatory Action Research, Dr D'Ambruoso says: "PAR seeks to understand and improve the world by changing it. It transforms the role of people who usually 'participate' as the subjects of research. Instead of being passive recipients, those directly affected by problems

"In today's world there is a growing demand to channel collective energy towards justice and equity in health, and to better understand the social processes that influence health

become active researchers and

agents of change who collectively

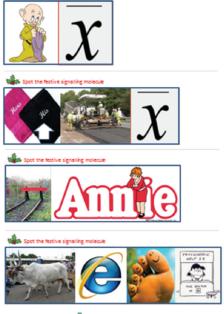
act, produce change and create

and new knowledge.

and health systems in all countries. Communities, frontline health workers and other grassroots actors play a key role in responding to this demand, in raising critical questions, building new knowledge, and provoking and carrying out action to transform health systems and improve health. We have many methods, tools and capacities - old and new - to increase social participation and power in generating new knowledge through participatory research. I'm looking forward to sharing my own work, hearing from others, and discussing how together we can use this approach to benefit those in greatest in need."

Dr D'Ambruoso also discussed opportunities for organisations to take advantage of postgraduate student attachments. Students on the University's MSc in Global Health and Management have the opportunity to undertake workbased placements of 'real world' benefit for the sector and for students in their studies on the journey to careers in global health.

Spot the Festive Signalling Molecule!



Dopamine (dopey mean) Histamine (his tar mean) Endorphin (end orphan) Oxytocin (ox e toes in)

Sports supplements: do they work?

f one were to believe the hype surrounding the sports nutrition industry then you could be forgiven for thinking the human body couldn't sustain any form of exercise, no matter what kind, intensity or duration, without having to consume a supplement from the wide

range of, sometimes obscure, sports nutrition products available. Indeed the sports nutrition industry in the UK is growing with its value predicted to rise from £301m last year to £471m in 2018. On the back of this I am often asked whether any of these supplements actually work. With product names such as Frenzy, Grenade Thermo Detonator, Lean Xtreme, Hyperdrive, HemoRage and Napalm what could go wrong??

One of the most common sights in gyms and sports centres is men in vests (I may be stereotyping somewhat here) drinking a protein shake during or after a weight training session. Now there is some

good evidence that a small amount (20g) of protein can help build muscle after exercise, with whey protein seeming to be the most effective. It is not, however, necessary to take any more than this 20g or to take this in the form of a protein shake and in fact this quantity of protein can easily be achieved via good old fashioned food (e.g. milk, steak, chicken etc) which also have other nutrients that are useful for recovery. Other common supplements include carbohydrate based drinks for endurance events. Again there is clear evidence that extra carbohydrates can enhance endurance performance but you would be forgiven for not being clear on which, of the many, drinks to actually chose. In fact these are probably only needed in events lasting over an hour and anything with simple sugars in it will do the job. In fact you

can actually get benefits without actually swallowing the drink as rinsing your mouth with glucose also enhances endurance performance via activation of higher brain regions. For me what is concerning is the number of people, such as students sitting in lectures, consuming such

drinks (often with high amounts of caffeine) when doing very little exercise which has been linked to obesity.

These are two of the most common and easily recognisable supplements but walking into a health food or sports nutrition store you will be confronted by many unrecognisable and unpronounceable products to choose from. With limited space to look at all of these in any detail I can briefly say that pretty much none of these will be of any use to anyone. Particularly common are "fat-burners" which, let's be honest, if they did work I am pretty sure health professionals would have cottoned on

to this and be using them in the treatment of obesity. Also frequently taken are antioxidants which must surely be good for us! However recent work has suggested that these (Vitamin C and E) can actually blunt some of the adaptive responses, such as improved insulin sensitivity, to exercise training when taken at doses similar to those sold in health stores, which are albeit manifold higher than the recommended daily allowance. On top of this is the rather alarming recent analysis of supplements which found that 10% contained traces of contaminants such as steroids. To sum up my advice is to stick to a well balance diet as you can get the majority of the nutrients you need from this without having to spend your hard earned cash on the bewildering array of sports nutrition products out there!

Let's be honest, if they did work I am pretty sure health professionals would have cottoned on to this and be using them in the treatment of obesity

Celebrating 40 Years of Health Economics at the University of Aberdeen:

A Tribute to Professor Gavin Mooney

n October 21st 2014 the Health Economics Research Unit (HERU) hosted an event to celebrate 40 years of Health Economics at the University of Aberdeen. This event also celebrated Professor Gavin Mooney's contribution to health economics in Aberdeen. Gavin, along with his partner Del (Delys) Weston, tragically lost their lives in December 2012.

The development of health economics at the University of Aberdeen was inspired by the late Professor Roy Weir with his vision to bring together Medicine and Economics. Roy's vision led to the first funded health economics project in Scotland. This three year project (1974-1977) was a joint venture between Roy, Elizabeth Russell and Gavin Mooney.

Professor Roy Weir sadly passed away in September 2014. It was Roy's vision that inspired health economics at the University of Aberdeen. For that we will always be grateful.

Following the first funded health economic project in Scotland, Gavin took up the Directorship of the newly formed HERU in 1977. Core funding for the unit was provided by the Chief Scientist Office (CSO) of the Scottish Home and Health Department (now the Scottish Government Health and Social Care Directorates). This continues to be a main source of funding for HERU almost 40 years later, together with core support from the University of Aberdeen.



Gavin directed HERU between 1977 and 1986 and 1991 to 1993. His contributions to health economics, and HERU, were extensive.

The conference brought together key speakers who have all contributed to health economics at HERU. The conference stimulated lively debate and discussion on key aspects of health economics with speakers on the day reflecting on the development of health economics over 40 years, with consideration to achievements and future challenges. We also showcased some of HERU's emerging and exciting novel work.

The day provided an opportunity for colleagues to come together, remember and celebrate health economics at the University of Aberdeen, and Gavin's contribution to its development. For more on the conference please visit:

http://www.abdn.ac.uk/heru/publications/presentations/heru-conferences/40yrconf/



IT Services Update for CLSM

December 2014

INTRODUCTION

This report provides College staff with information and news about IT Services and current IT projects.

OFFICE MOVES

Are you about to move office and want the transition to be as smooth as possible?

IT Services has now published details on how we can support you with this, whether it is just you moving, or a large office move involving a number of colleagues.

The more notice you can give us, the better we can support you. Please see here for details.

WEB SECURITY AUDIT

The Institutional Web Audit was established to address data and security concerns presented by legacy web content; often neglected or forgotten web content that is publicly available.

Progress to Date: The Web Team has already audited the majority of the 1788 legacy sites and a process is well underway to address all sites where there is either an identified security or reputational risk.

How can you help? If you have been contacted by the web team, please review your web content and advise web team as soon as possible how it should be dealt with.

Further Information is available from Mike Patterson (mike.patterson@abdn.ac.uk), Web Team Manager, IT Services

COMING SOON:

- A new system to facilitate digital asset storage and management
- A new identity management system to help manage access to our systems and assign permissions
- The new Media Services web site

INNOVATION HUB

We are currently working with colleagues in estates and elsewhere to implement an innovation hub for students. With funding from the UK Government (via Aberdeen City Council), as part of an initiative to enhance digital connectivity, this project aims to create a dedicated space for students to develop business ideas.

It aims to support greater links between the University of Aberdeen's high quality research programmes and the use of ICT in business development, business creation, and entrepreneurship.

MAILING LISTS

We are currently running a project to rationalise and better manage mailing lists.

The aim is to rationalise the mailing list service and consolidate as many of the 6000+ mailing lists as possible onto two systems: one for self-service lists, and a second for auto-generated lists.

The project will improve our service and enable some existing mailing list servers to be decommissioned.

FURTHER INFORMATION FROM:

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