

RCPath Northern Ireland Symposium

Wednesday 22nd October 2025

Held in-person only at:
The Postgraduate Medical Centre, Belfast City Hospital, 51 Lisburn Road, Belfast BT9 7AB







General Information

Thank you for registering to attend the in-person RCPath Northern Ireland Symposium, which will be held at the Postgraduate Medical Centre, Belfast City Hospital, 51 Lisburn Road, Belfast BT9 7AB on Wednesday 22nd October 2025 at 9.30am.

We look forward to welcoming you at the symposium!

Certificates of attendance

Certificates of attendance will be emailed to all attendees, within a fortnight of the conference. This conference is eligible for 3 CPD credits.

Speaker presentations

Where permission has been given, speaker presentations will be available after the conference.

Feedback

A link to an online feedback form will be emailed to you after the conference, please do complete. All comments are confidential and will be taken into consideration in the development future conferences.







RCPath Northern Ireland Symposium Wednesday 22nd October 2025

Postgraduate Lecture Theatre, Belfast City Hospital

09:30	Meeting opens Dr Gareth McKeeman, Chair, RCPath Northern Ireland Regional Council Professor Sir Michael McBride, Chief Medical Officer
09:40	'Reflections on molecular discoveries in erythrocytosis' Professor Mary Frances McMullin, Queen's University Belfast
10:05	Update on Cervical Screening Dr Claire Hennell, Belfast Trust
10:30	Artificial Intelligence – Reflections and Reality Dr Gareth Lewis, Northern Trust
10:55	College President update Dr Bernie Croal, President of the Royal College of Pathologists
11:20	Coffee Break
11:40	What it means to be a Forensic Pathologist Dr Tamara McNamee, Centre for Forensic and Legal Medicine, University of Dundee
12:10	HCV elimination (title to be confirmed) Dr Alison Watt, Belfast Trust
12:35	Hidden in plain sight: how to recognise and support patients with lysosomal storage disorders in everyday practice Dr Eamon McCarron, <i>Belfast Trust</i>
13:00	Meeting closes Dr Gareth McKeeman, <i>Chair, RCPath Northern Ireland Regional Council</i>
13:30 - 14:00	Lunch (to be held in the Lobby area of the Postgraduate Centre)
14:30- 16:00	Trainee Forum with the President (to be held at the Larkin Room, Postgraduate Centre)







Presenters

Dr Gareth McKeeman

Dr Gareth McKeeman graduated with a BSc (Hon) in Biomedical Science in 1999 before going on to a complete a PhD in 2003 (both at Queen's University Belfast). He then worked as a Research Fellow (School of Medicine, QUB) for 4 years before moving to the NHS in 2007 to start the Clinical Scientist Training Programme. During this he completed an MSc (Clinical Biochemistry with Molecular Biology, University of Surrey), and then FRCPath (Clinical Biochemistry) during Senior and Principal Clinical Scientist posts.

He took up his current post as Consultant Clinical Scientist (Dept. Clinical Biochemistry, Belfast Health & Social Care Trust) in 2015, where he has oversight over the Clinical Biochemistry General Automation Labs across 3 hospital sites and is Chair of the Trust POCT committee. He is also currently Chair of the Northern Ireland Regional Council.

Professor Sir Michael McBride

Prof Sir Michael McBride was appointed to the post of Chief Medical Officer for the Department of Health, in September 2006.

Prior to joining the department, he had been Medical Director at the Royal Group of Hospitals from August 2002.

Prof Sir Michael McBride graduated with Distinction from Queen's University Belfast in 1986 and completed his undergraduate and postgraduate training in Northern Ireland. In 1991 he attained a Research Fellowship at St Mary's Medical School and Imperial College London, where he carried out research into new drug treatments for HIV.

Prof Sir Michael McBride has been a Consultant in the Health Service since 1994 when he was appointed Consultant Physician in HIV medicine at the Royal Group of Hospitals and has more than 10 years health service management experience.

Professor Mary Frances McMullin

Professor Emerita Queen's University Mary Frances McMullin graduated in medicine from Queen's University Belfast in 1980 and trained in Haematology in Northern Ireland and The Royal Postgraduate Medical School, Hammersmith Hospital, London. Her clinical and research interests include myeloproliferative neoplasms, investigation of the rare congenital erythrocytosis, and acute myeloid leukaemia. National roles have included, President and Secretary of the Haematology of Ireland, President of the Ulster Medical society, the British Society for Haematology Guidelines Committee Lead which included development of guidelines for the management of myeloproliferative neoplasms and membership of the European Hematology Association SWG MPN and EToL committees.

Dr Claire Hennell

Dr Claire Hennell graduated from the University of Leicester in 2006 and subsequently trained in pathology in Northern Ireland. She was appointed as a Consultant Pathologist in 2014, working in the







Northern Trust. Following a move to the Royal Victoria Hospital in 2022 she has developed specialist interests in dermatopathology and cervical cytology. Last year she took up the role of Clinical Lead within the regional Cervical Cytology laboratory and has worked to establish and implement this service.

Dr Gareth Lewis

Gareth is a consultant in acute medicine and nephrology in the Northern Trust. He is the Trust's Physician Associate/Assistant lead and is the Clinical Lead for Quality Improvement. Gareth has had a brief foray into the world of laboratory medicine having completed a PhD in the genetics of diabetic nephropathy with Professor Peter Maxwell whilst a medical student. He is a digital pragmatist and is interested in how AI may change, for better and worse, our approach to clinical and laboratory medicine and decision making.

Dr Bernie Croal

President, The Royal College of Pathologists

Dr Bernie Croal is the current President of the Royal College of Pathologists. He is a Consultant Chemical Pathologist working in Aberdeen, specialising in intravenous nutritional support. He has spent a long career in various leadership roles within NHS Scotland, including clinical director and regional lead for pathology, NHS Scotland demand optimisation lead and chair of the Scotlish Clinical Biochemistry Network. He is also a past President of the Association for Laboratory Medicine (known as LabMed) and is a fellow of the Royal Colleges of Physicians and Surgeons of Glasgow, Physicians of Edinburgh and Ireland, Academy of Healthcare Science and the Institute of Biomedical Science.

Dr Tamara McNamee

Dr Tamara McNamee is a Consultant Forensic Histopathologist based at the University of Dundee undertaking autopsies into sudden and unexpected deaths in the Tayside region on behalf of COPFS. She undertook specialist histopathology training in Northern Ireland before completing specialist Forensic histopathology training in Dundee and Aberdeen.

In addition to the autopsy workload, she enjoys teaching and she engages with education and training of Procurators Fiscal, Police Scotland as well as undergrade and post graduate teaching of medical, dental and law students.

Dr Alison Watt

Dr Alison Watt is a Consultant Clinical Scientist in Virology, working at the Regional Virus Laboratory, Belfast. She graduated in Biochemistry from Queen's University Belfast, where she also completed a PhD and postdoctoral research on infection and immunity in chronic lung disease, including cystic fibrosis and bronchiectasis.

Following her academic research, Dr Watt trained as Clinical Scientist in Microbiology and progressed to her current role as a Consultant in 2017.

Alison currently chairs the national virology-working group for UK Standards for Microbiology Investigations and serves as a Senior examiner in Virology for RCPath.

Regionally, she is currently co-chairing alongside Dr Louise McCorry the Testing and Diagnosis Workstream of the NI DoH Hepatitis C Elimination Programme.







Dr Eamon McCarron

Dr Eamon McCarron is a Consultant in Inherited Metabolic Disorders with the Sheffield Adult Metabolic Service, a nationally commissioned centre for Inherited Metabolic Disorders (IMDs). He cares for patients with a broad range of IMDs, with particular interests in complex molecule, organelle, and energy metabolism disorders. He graduated with Honours in Medicine and Surgery from the University of Liverpool and Linköping University, Sweden, and undertook an MPhil at the Centre for Drug Safety Science, Liverpool. He completed joint clinical academic training through the Academic Foundation Programme and an Academic Clinical Fellowship at Queen's University, Belfast. He undertook Internal Medicine training, gaining Membership of the Royal College of Physicians (London), and Cardiology training, accrediting in Cardiovascular Computed Tomography and Transthoracic Echocardiography. His specialty training in Chemical Pathology (Metabolic Medicine) was completed in Belfast, including experience in the regional Lysosomal Storage Disorder (LSD) service provided by Genetics, followed by a fellowship at the Metabolic Unit, Salford Royal, with a focus on LSDs. He continues to hold an Honorary Research Contract there and contributes actively to research. Dr McCarron is a Fellow of the Royal College of Pathologists (London), an active member of the Society for the Study of Inborn Errors of Metabolism (SSIEM) and serves on the committee of the British Inherited Metabolic Disease Group (BIMDG).

Abstracts

Reflections on molecular discoveries in erythrocytosis

Professor Mary Frances McMullin, Queen's University Belfast

- 1. An erythrocytosis may be driven by excess erythropoietin production.
- 2. Molecular lesions in the oxygen sensing pathway lead to increased erythropoietin production.
- 3. An abnormal form of erythropoietin may cause an erythrocytosis.

An erythrocytosis is present when the red cell mass is greater than 125% of predicted for body mass and sex. Measurement of erythropoietin levels show that in some cases this can be raised showing that the erythrocytosis is caused by the increased erythropoietin drive. Further molecular investigation of the oxygen sensing pathway and other molecular pathways revealed mutations which result in increased erythropoietin production and development of an erythrocytosis. Discovery of such aberrant pathways is followed by of therapies which can mitigate the development of the erythrocytosis.

Update on Cervical Screening

Dr Claire Hennell. Belfast Trust

- 1. Understand the rationale of primary HPV testing.
- 2. Configuration of regional service provision.
- 3. Future challenges and developments.

In June 2024 the Northern Ireland Cervical Screening Programme Regional Laboratory was awarded to the Belfast Trust following an expression of interest process. This follows the recent introduction of primary HPV testing which has dramatically altered cervical screening practices and brings Northern Ireland in line with similar programs in both the United Kingdom and Republic of Ireland.

This talk will outline the screening programme model and follow our journey in Northern Ireland since establishing this regional service.







Artificial Intelligence - Reflections and Reality

Dr Gareth Lewis, Northern Trust

- 1. All is not an external mind to ourselves it is no more than a reflection of <u>some</u> human experiences and data.
- 2. There is great promise for some applications of AI in healthcare, but dangers abound.
- 3. Critical thinking as both scientists and philosophers need to put Al in its proper place.

College President update

Dr Bernie Croal, President of the Royal College of Pathologists

- 1. Learn about recent developments across the RCPath
- 2. Learn about the Pathology Plan
- 3. Learn about How RCPath activity is relevant to Services across Northern Ireland.

Pathology is just as important to healthcare as it ever was. Recent developments in healthcare across the UK however are much more dependent on pathology services to facilitate their implementation and success. Many plans, reviews and reports have been published in the last year, but they rarely mention pathology explicitly. The College has begun work on its own "Pathology Plan" – a plan for pathology by pathology. The aims of this pan are to identify why pathology is important, what the current issues or blocks re, and what the potential solutions are.

A general update on other developments across the RCPath and pathology in general will also be given.

What it means to be a Forensic Pathologist

Dr Tamara McNamee, Centre for Forensic and Legal Medicine, University of Dundee

- 1. Overview of the roles and responsibilities of the forensic pathologist.
- 2. Medicolegal death investigation.
- 3. Career pathway to Forensic Pathology.

This presentation is an overview of the RCPath curriculum pathway into Forensic histopathology as a speciality, what the job entails, medicolegal responsibilities of death investigation and dispelling the myths of the profession.

Elimination of Hepatitis C as a public health threat in Northern Ireland

Dr Alison Watt, Belfast Trust

- 1. Hepatitis C is now a curable disease Oral antiviral regimens can achieve sustained virological response in nearly all treated individuals, significantly reducing the risk of liver disease, cancer and mortality.
- 2. Testing innovations such as dried blood spots and capillary sampling are critical These methods increase access to diagnostics for high-risk and underserved populations, especially in settings like prisons, addiction services, and community pharmacies.







3. A holistic, integrated approach across work streams is essential for elimination – Collaboration between testing, treatment, surveillance, and public health engagement is vital to overcome barriers and sustainably reduce HCV transmission and mortality in Northern Ireland.

Hepatitis C virus (HCV) infection remains a significant global health challenge, despite recent advances in diagnostics and treatment. In Northern Ireland, the burden of HCV is disproportionately concentrated among vulnerable groups – particularly people in prison, individuals experiencing homelessness, and people who inject drugs. Strategic action is required to meet the World Health Organization (WHO) elimination targets of a 90% reduction in incidence and 65% reduction in mortality by 2030.

This talk outlines the clinical progression of HCV from acute to chronic infection, its global and regional burden, transmission pathways, and the transformative impact of direct-acting antiviral therapies. The session highlights Northern Ireland's testing and diagnostic initiatives, Innovations like dried blood spot testing and capillary sampling are explored for expanding access, particularly among hard-to-reach populations. The integration of public health surveillance, diagnostic innovations, and improved access to care are pivotal for achieving elimination.

Hidden in plain sight: how to recognise and support patients with lysosomal storage disorders in everyday practice

Dr Eamon McCarron, Belfast Trust

- 1. Recognise the key clinical features that may indicate an underlying lysosomal storage disorder in adult patients.
- 2. Understand when and how to initiate appropriate investigations or referrals for suspected lysosomal storage disorders.
- 3. Appreciate the importance of timely diagnosis and multidisciplinary support in improving outcomes and quality of life for affected patients.

Lysosomal storage disorders (LSDs) are rare but increasingly recognised in adult practice, often presenting with subtle or non-specific features. This talk will highlight illustrative clinical cases that demonstrate the challenges of recognising LSDs in everyday practice. Recent research from the Metabolic Unit at Salford Royal will be discussed, providing new insights into adult presentations and management strategies. Finally, the session will explore the vital role of patient support organisations, including the MPS Society, in improving patient outcomes and supporting families living with these conditions.







NOTES	











