Centre for Cancer Research and Cell Biology

| Project Title | Examining the influence treatment pattern in Oese | | doscopic Therapy on diagnosis a eal Adenocarcinoma | nd |
|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| Supervisor(s) | Helen Coleman | | | |
| | 2. Richard Turkington | | | |
| School / Centre | | | | |
| Principal | Email: | | Tel: | |
| Supervisor's | h.coleman@qub.ac.uk | | 02890 972756 | |
| Contact Details | | 1 , | | |
| Degree Pathway for | Medical Science | √ | 1 | |
| which project is | Biochemistry | ✓ | - | |
| suitable (√) | Microbiology General awards | | Cubicat anacific avvanda | |
| Is project of | General awards | | Subject-specific awards | |
| suitable standard / | | | British Assoc Dermatologists | |
| subject for studentship | Wolfson Foundation | | Digestive Disorders Foundation | |
| application? (√) | Jean Shanks Foundation | | Pathological Society | |
| | | | Other | |
| Background information: | poor at 15% and the incided decades. For tumours whist standard of care involves a adjuvant chemotherapy. Of morbidity (50%) and mortal patients report a significant related quality of life following dysplasia (HGD) and early historically been surgical rendoscopic therapy into rebroadened the therapeutic and early OAC. Barrett's of (LGD), confirmed by two industry dysplasia is treated with a linnermost (mucosal) lining resection combined with a preserving treatment. By beyond the mucosal lining (stage T1b) are at risk of lot these patients are therefor following initial endoscopic ablative therapy has led to | ence had control of the control of t | chageal adenocarcinoma (OAC) rerest increased six-fold over the past for invaded beyond the submucosard resection which preceded by neological cancer surgery carries a high -3% 30-day in hospital mortality) a long-lasting deterioration in health surgery. Standard care for high grade amours confined to the submucosard on. However the introduction of care over the last decade has ansavailable for Barrett's oesophage agus with evidence low grade dyspindent pathologists, or high grade as For tumours confined to the expectation of care over the last decade has ansavailable for Barrett's oesophage agus with evidence low grade dyspindent pathologists, or high grade as therapy is curative and organist, patients with disease extending ato the underlying supportive tissue gional lymph node metastasis and red radical oesophageal resection ment. The option of endoscopic of equirement of double reading of confirm low grade dysplasia and means a support of the confirm low grade dysplasia and means a support of the confirm low grade dysplasia and means and means a support of the confirm low grade dysplasia and means and means a support of the confirm low grade dysplasia and means and means a support of the confirm low grade dysplasia and means a support of the confirm low grade dysplasia and means a support of the confirm low grade dysplasia and means and the confirmation of | four the nd l- de has gus plasia |

have led to a relaxation of the criteria for the diagnosis of high grade dysplasia as previously this would have led to surgical resection. We seek to examine the impact the introduction of endoscopic therapy has had on the trends in diagnosis of both low and high grade dysplasia. We will also examine the outcomes of endoscopic ablation and resection in comparison with international standards.

The successful student would become fully integrated with the Cancer Epidemiology and Health Services Research Group in the Centre for Public Health, which would include attendance of weekly meetings to learn of other ongoing research in the group, and to evaluate epidemiological study designs at journal clubs.

Students will be exposed to clinical collaborators in the Barrett's oesophagus research team including epidemiologists, gastroenterologists and pathologists who regularly meet, and so the student should have a strong interest in these medical specialties, or paediatrics. Full guidance and support will be provided for interpreting the statistical analysis and results.

Aims / objectives

Aim 1: A Descriptive Epidemiological Study of Endoscopic Therapy in NI

Since the introduction of endoscopic therapy in Northern Ireland ten years ago over 300 ablation and resection procedures have been carried out. This number of procedures and the duration of follow up provides a unique opportunity to study the survival outcomes for these procedures and to compare these with standards in the published literature. We seek to integrate the Endoscopic Therapy register with the Northern Ireland Barrett's register in order to identify cases of Barrett's oesophagus which have progressed to dysplasia and required resection or ablation.

Aim 2: A Concordance study of Endoscopy Records and Oesophageal Pathology Reports

In order to develop a comprehensive database of endoscopic therapy for future work a concordance study will be performed to match endoscopy records with the pathology reports from oesophageal biopsy specimens.

Aim 3: Determination of trends in referral of Dysplasia following the introduction of endoscopic therapy

Current guidelines state that all HGD cases and cases where LGD is found on two separate occasions should be referred for endoscopic therapy. We seek to examine the referral patterns in NI following the introduction of the current guidelines for endoscopic therapy.

| | Techniques employed: | Literature review Critical appraisal of papers Scientific writing Knowledge in public health, gastroenterology and cancer epidemiology Data collection Statistical analysis |
|--|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|--|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | Microbiology | | | |
|------------------------------------|---------------------------------|----------|------------------------------------------------------------------------------|-----------|
| Project Title | | | K pathway in mediating resistan | ce to |
| | radiation/hormone therapy | / in pro | state cancer. | |
| Supervisor(s) | 1.Richard Kennedy | | | |
| | 2. Nuala McCabe | | | |
| School / Centre | CCRCB | | | |
| Principal | Email: r.kennedy@qub.ac.ul | k | Tel: | |
| Supervisor's | | | | |
| Contact Details | | 1 | | |
| Degree Pathway | Medical Science | Х | | |
| for which project | Biochemistry | | | |
| is suitable (√) | Microbiology | | | |
| In marked of | General awards | | Subject-specific awards | |
| Is project of | | | Duitiala Assas Damasatala sista | |
| suitable standard / subject for | Wolfson Foundation | | British Assoc Dermatologists | |
| studentship | VVOIISON Foundation | | Digestive Disorders Foundation | |
| application? (√) | Jean Shanks Foundation | | Digestive Disorders i odridation | |
| application (*) | ocan onanks i oanaation | | Pathological Society | |
| | | | · ae.g.ca. eco.ety | |
| | | | Other | |
| Background | Prostate cancer (PCa) is the | most | commonly diagnosed cancer in mer | n in |
| information: | the UK. The current standar | d of ca | re for stage III/IV prostate cancer pa | atients |
| | is radiation and androgen de | epravat | ion therapy; however resistance to | these |
| | therapies represents a majo | | | |
| | | | sms involved in the development o | |
| | | | to enzalutamide, a potent inhibitor | |
| | | , appro | ved for the treatment of castrate re | sistant |
| | prostate cancer in 2012. | | annound to a manage to the common with the total | lada a sa |
| | | | group in prostate cancer which is d | |
| | | | 30% of primary prostate cancers a The MAPK pathway is implicated in | |
| | | | e cancer progression including | а |
| | | | sistance. We aim to investigate the | role |
| | | | pment of radiation and enzalutamic | |
| | | | e generated radiation and enzaluta | |
| | | | investigate differences in MAPK | |
| | | | mesenchymal transition (EMT) betv | veen |
| | parental and resistant cell lir | | , , | |
| | | | differences in sensitivity between | |
| | | | e resistant cell lines to MAPK inhibi | |
| | | | (R428, Cabozantinib). Finally we w | |
| | | | resensitises radiation/enzalutamide | 9 |
| Aima / ahisatiwas | resistant cell lines to treatme | | as and assultant of ENAT's | |
| Aims / objectives | | | ig and markers of EMT in istant cell lines v parental cells. | |
| | | | istant cell lines v parental cells. of radiation/enzalutamide resistant o | المء |
| | | | and EMT signalling. | JGII |
| | | | MAPK/EMT inhibitors in combination | n with |
| | | | atment. Do these agents resensitise | |
| | resistant cell lines to | | | - |
| Techniques | | | cell culture; drug sensitivity assay | S, |
| employed: | | | eration assays; migration assays; | |
| | invasion assays. | • | <i>y .</i> | |
| <u> </u> | <i>y</i> - | | | |

| Project Title | Optimising immune chec | kpoin | t therapy in ovarian cancer | |
|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------------|------|
| Supervisor(s) | 1. Richard Kennedy | | | |
| | 2. Eileen Parkes | | | |
| School / Centre | CCRCB | | | |
| Principal | Email: r.kennedy@qub.ac. | uk | Tel: 028 9097 2443 | |
| Supervisor's Contact Details | | | | |
| Degree Pathway | Medical Science | | | |
| for which project | Biochemistry | Х | 1 | |
| is suitable (√) | Microbiology | | 1 | |
| , , | General awards | | Subject-specific awards | |
| Is project of | | | British Assas Dormatalogists | |
| suitable standard / subject for | Wolfson Foundation | | British Assoc Dermatologists | |
| studentship | | | Digestive Disorders Foundation | |
| application? (√) | Jean Shanks Foundation | | Pathological Society | |
| | | | Other | |
| Background | Immune checkpoint-tars | geted | therapy (IO) has resulted in limi | ted |
| information: | clinical responses in tria | ls in o | varian cancer. A key research | |
| | ' | | oonse to these agents in the clin | ic. |
| | · · · · · | • | innate immune pathway has be | |
| | | | • | |
| | identified as synergistic with anti-PD-1 therapy, and also a means of overcoming resistance to IO. We have reported activation of | | | |
| | | | · | |
| | | • | way as a result of cytosolic DNA | ١. |
| | · · | | sic and extrinsic DNA damage, | |
| | and that upregulation of | f PD-L | 1 in response to DNA damage is | |
| | dependent on STING. | | | |
| | Therefore, activating the | e STIN | G pathway as a combination | |
| | treatment with IO could | result | t in improved clinical responses. | We |
| | will screen 786 FDA-app | roved | compounds, which can quickly | |
| | move into the clinic, for | activa | ition of PD-L1 expression in ovai | rian |
| | | | vill then be validated for STING | |
| | | _ | nmune checkpoints using primar | ٢v |
| | | | ccurate model of tumour behavi | - |
| | | | er-associated ascitic fluid in | Oui |
| | | | | • |
| | <u> </u> | • | inds will be studied in combinat | |
| | | | Brca2-/- syngeneic mouse model | . in |
| | ' ' | • | vill assessed using the normal | |
| | 1 | | Moreover, using ascitic fluid | |
| | containing tumour and i | mmur | ne cells from patients with ovari | an |
| | cancer, we will model co | ombin | ation therapy using identified | |
| | compounds and IO to as | sess t | umour response, and activation | of |
| | 1 · · · · · · · · · · · · · · · · · · · | | reatment combination selected | |

| | using these methods will be that with the least toxicity and |
|-------------------|----------------------------------------------------------------|
| | greatest improvement in tumour response to IO. |
| Aims / objectives | (1) Identify drugs which activate the cGAS-STING innate immune |
| | pathway and subsequent PD-L1 gene expression |
| | (2) Validate identified hits in established and novel primary |
| | HGSOC cell lines by confirmation of cGAS-STING-PDL1 immune |
| | pathway activation. |
| Techniques | Cell Culture |
| employed: | qPCR |
| | Western blot In cell western |
| | High throughput screen |
| | Flow cytometry |
| | |
| | |
| | |
| | |

| Project Title | Identification of Targetak Oesophageal Adenocarc | | diators of Drug Resistance in (OAC) |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Supervisor(s) | Richard Turkington Richard Kennedy | | |
| School / Centre | , | | |
| Principal Supervisor's Contact Details | Email: r.turkington@qub.ac.uk | | Tel: 02890 972756 |
| Degree Pathway for | Medical Science | ✓ | |
| which project is | Biochemistry | ✓ | |
| suitable (√) | Microbiology | | |
| Is project of suitable standard / subject for studentship application? (√) | General awards Wolfson Foundation Jean Shanks Foundation | | Subject-specific awards British Assoc Dermatologists Digestive Disorders Foundation Pathological Society Other |
| Background information: | Five-year survival rates for oesophageal adenocarcinoma (OAC) remain poor at 15% and treatment strategies for Her2-negative tumours have not changed over the past two decades. The development of drug resistance limits the effectiveness of current chemotherapeutic agents used to treat OAC and the discovery of underlying mechanisms of resistance and novel agents to target these pathways is a priority. We aim to identify pathways of cisplatin resistance through the development and analysis of suitable in vitro models and pre-chemotherapy biopsies. Unravelling the mechanisms of primary resistance will allow ineffective chemotherapy to be avoided in early stage OAC and will also inform the development of rational combinations of therapeutics. | | |
| Aims / objectives | chemotherapy in early stage approach. We have performed trage paraffin embedded pre-tree Almac Diagnostics Xcel TM cisplatin-based neo-adjures ection between 2003 normalisation and filtering enrichment analysis was a clusters of significantly processes. Functional en Set Enrichment Analysis | and ge OAG anscripe atmen array vant of the rapplied enrichme (GSEA | genes associated with resistance to a we have employed a systems biology of the profiling of 273 formalin fixed at endoscopic OAC biopsies using the analysis was performed using analysis was performed using Gene as of the differentially expressed gene ways differentially regulated in relation to |

pathological response may be strong determinants of drug resistance in early stage OAC and so will be particularly relevant.

Genes related to the pathways of resistance are currently being assessed by focused siRNA (siRNA, Sigma) screen. We have selected an *in vitro* model representative of chemo-resistance in OAC by aligning transcriptional data according to published methods and those developed by Dr Jaine Blayney (Department of Bioinformatics,Queen's University Belfast). Candidate genes have been selected based on their fold change, biological importance in OAC and potential to be targeted. A focused screen of 84 genes will be performed in triplicate in Q1 2018 to study the effects on cell viability/cytotoxicity of gene silencing, either alone or in combination with cisplatin/5-FU, to discover targets which are not toxic in their own right but interact synergistically with chemotherapy. We anticipate that this screen will generate a number of promising leads and insights into drug resistance in OAC. The prospective student will select one of the candidates from this primary screen for further validation and development.

Aim 2: Discovery and mechanistic analysis of a novel drug target in OAC

A potential novel drug target will be validated in a panel of oesophago-gastric cell lines with differing mutational contexts. Mechanistic analysis will be performed to discover their mode of action. We will determine the synergism of siRNA mediated knockdown of the selected target with cisplatin/5-FU in a panel of cell lines using MTT assays, combination index values and annexin V/propidium iodide flow cytometry. Western blotting will be performed for markers of apoptosis, such as PARP and cleaved caspase 3, and caspase activity assays will be carried out. Further examination of the effects of the target inhibition will be examined by Western blotting of relevant proteins, 14 day clonogenic assays and DNA repair assays eg comet assays. Should small molecule inhibitors be available for the selected targets these will also be evaluated for their apoptotic and mechanistic effects.

Aim 3: Development of pre-clinical models representative of Cisplatin resistance in OAC.

Research into OAC is currently being hampered by a lack of in vitro cell lines which accurately model patient tumours and recapitulate clinical drug responsiveness. We are currently establishing novel primary cell lines using fresh OAC tissue collected during oesophageal staging and surgery at the Belfast City Hospital. This work will be carried out in collaboration with the OCCAMS consortium and will also include the storage of fresh frozen tissue for future research. Specimens will be transferred directly from the operating theatre to the research laboratory in complete DMEM media on ice, washed three times with 10ml of phosphate buffered saline, dissected into approximately 3mm³ pieces with a scalpel and digested with trypsin-EDTA. Undigested segments will be removed by sedimentation and the clear supernatant spun at 600g for 5 minutes. Cell pellets will be cultured in complete DMEM under standard cell culture conditions. Immortalisation will be performed by lentivirus transfection and oncogene activation. Our group has already successfully established primary cell lines in breast and ovarian cancer and has developed

| | optimised standard operating procedures for cell line generation. A cell line representative of cisplatin-resistance will then be used as a model to test the targeting of genes identified in Aim2. In this way we will develop models more representative of oesophageal tumours. |
|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Techniques employed: | Cell Culture qPCR Western blot siRNA knockdown Flow cytometry |

Centre for Experimental Medicine

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|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| Project Title | INVESTIGATING THE INF | | CE OF OXIDATIVE STRESS ON | N |
| | ENDOTTIELIAET ROOLN | 1101(| SELE I GIVE HON | |
| Supervisor(s) | Dr David Grieve | | | |
| . , | Dr Karla O'Neill | | | |
| School / Centre | CEM | | | |
| | | | T | |
| Principal | Email: d.grieve@qub.ac.ul | <u> </u> | Tel: 028 9097 6468 | |
| Supervisor's Contact Details | | | | |
| Degree Pathway | Medical Science | ✓ | | |
| for which project | Biochemistry | • | - | |
| is suitable (√) | Microbiology | | - | |
| is suitable (*) | General awards | | Subject-specific awards | |
| Is project of | General awards | | Subject-specific awards | |
| suitable standard | | | British Assoc Dermatologists | |
| / subject for | Wolfson Foundation | ✓ | Discoting Discoud. 5. 1.6 | |
| studentship | | | Digestive Disorders Foundation | |
| application? (√) | Jean Shanks Foundation | ✓ | Pathological Society | |
| | | | Others | |
| | | | Other | I . |
| Background information: | Impaired angiogenesis is known to influence the progression of ischaemic cardiovascular disease. Recent attention has focused on the therapeutic potential of endothelial progenitor cells (EPCs), which are mobilised by ischaemia and are important in vascular homeostasis. Our group has characterised a distinct EPC subtype, termed outgrowth endothelial colony-forming cells (ECFCs), with well-defined endothelial progenitor properties which promote new blood vessel formation in both health and disease. Oxidative stress, and specifically NADPH oxidases, are known to play a key role in cardiovascular disease and emerging evidence suggests that they may also regulate EPC function. Interestingly, we have shown that ECFCs are influenced by oxidative stress, display differential gene expression compared to mature endothelial cells, and are modulated by hypoxia which is a characteristic feature of the ischaemic microenvironment. | | | |
| Aims / objectives | This project therefore aims to investigate the specific influence of oxidative stress and NADPH oxidases on in vitro ECFC function. It is hoped that the results will identify key pathways which may become dysregulated in disease and could represent potential targets to enhance the reparative capacity of these cells and their clear potential for the treatment of ischaemic cardiovascular disease. | | | |
| Techniques employed: | oxidases on ECFC function treated with pro-oxidant co specific inhibitors of candid Expression of key signallin | n, stud mpour date pa g gene nd in v | es of oxidative stress and NADPH ies will be undertaken in cultured ands in the presence or absence of athways or after genetic manipulates will be quantified by real-time Fitro ECFC migration and proliferates functional effects. | cells f tion. RT- |

Intercalated BSc in: Medical Science

| Project Title | Metformin and Vascula | ar Hea | Ith in Diabetes | |
|--------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------|-------|
| Supervisor(s) | Dr Reinhold Medina Dr Christina O'Neill (Po | stdoct | oral Fellow) | |
| School / Centre | SMDBS, CEM | | , | |
| Principal Supervisor's Contact Details | Email: r.medina@qub.ac.uk | | Tel: 028 9097 6477 | |
| Degree Pathway for which project is suitable (🗸) | Medical Science Biochemistry Microbiology | Х | | |
| Is project of suitable standard / subject for | General awards Wolfson Foundation | | Subject-specific awards British Assoc Dermatologists | |
| studentship application? (✓) | Jean Shanks Foundation | | Digestive Disorders Foundation Pathological Society | |
| Background information: | Metformin remains the first line monotherapy for patients with type 2 diabetes. This is supported by extensive recent clinical studies including systematic reviews and meta-analysis (Maruther et al., Ann Intern Med 2016; Palmer et al., JAMA 2016). In fact, a recent cohort study in 469,988 diabetic patients, indicated that metformin use was associated with a significant decrease risk of all-cause mortality (41%), heart failure (30%), and cardiovascular disease (24%) (Hippisley-Cox et al., BMJ 2016). While clinical evidence for the safety and efficacy of metformin are well-defined, the basic mechanisms of action remain not fully understood. It was suggested that the vascular protective effects of metformin were secondary to the anti-hyperglycaemic effect; however, emerging evidence suggests that metformin might have a direct effect on endothelium. This research project will characterise biological effects of metformin on human endothelial cells cultured under diabetic-like conditions. In addition, it will explore potential molecular mechanisms for these effects. This research project will define a molecular role for metformin in endothelial cell function under diabetes-relevant conditions. | | | |
| Aims / objectives | To test if metformin r diabetes. | everse | ects on endothelial cell function. s endothelial dysfunction induc | ed by |
| Techniques employed: | progenitor cells. > Endothelial Functional | Assaya ular per y inclu otting, a | and Flow Cytometry. | |

Intercalated BSc in: Medical Science

| Project Title | Modelling organelle ex | cpans | ion during cellular ageing | |
|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------|-----------|
| O | 4 D. D. C. L. LIM. P. | | | |
| Supervisor(s) | Dr Reinhold Medina Dr Jasenka Guduric-Fuchs (Postdoctoral Fellow) | | | |
| School / Centre | | ucns (i | Postdoctoral Fellow) | |
| School / Centre | SMDBS, CEM | | | |
| Principal | Email: | | Tel: 028 9097 6477 | |
| Supervisor's | r.medina@qub.ac.uk | | | |
| Contact Details | | | | |
| Degree Pathway | Medical Science | Χ | | |
| for which project | Biochemistry | | <u> </u> | |
| is suitable (√) | Microbiology | | | |
| | General awards | | Subject-specific awards | |
| Is project of suitable standard | | | British Assoc Dermatologists | |
| / subject for studentship | Wolfson Foundation | | Digestive Disorders Foundation | |
| application? (✓) | Jean Shanks Foundation | | Pathological Society | |
| | | | Other | |
| Background | Normal diploid cells canno | t divide | e forever, as they replicate and ag | e. thev |
| information: | | | divide any longer (Hayflick limit) a | |
| | | | remain viable and metabolically | |
| | | | ir senescence. Senescence is a | |
| | | | and protects the cell from the po | |
| | | | | otoritiai |
| | risk of malignant transformation due to oncogenic stimuli. | | | |
| | This research project will investigate cellular ageing in human endothelial | | | |
| | progenitors and focus on changes in organelles such as nuclei | | | |
| | mitochondria, and lysosomes. We will examine amount and size of these | | | |
| | | | | |
| | 3 different cellular components. Our lab has optimised protocols to study these organelles using microscopy and flow cytometry. Data will be | | | |
| | | | changes in organelle content that | |
| | during cellular ageing. | | enangee in erganene eement ina | |
| | | | | |
| Aims / objectives | 1) To determine how organized | anelles | s change with cellular ageing. | |
| | | | iology model to attempt to dete | ermine |
| | cellular age by assess | | | |
| | , | | | |
| Techniques | | ilture o | f endothelial cell lines including | |
| employed: | progenitor cells. | | | |
| | Fluorescent microscop | y inclu | iding confocal. | |
| | Flow Cytometry. | | | |
| | Computational work. | | | |
| | | | | |
| | | | | |
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| Project Title | | | f leukotriene antagonist zafirluka: | st on | |
|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------|------------|--|
| | Mycobacterium xenopii an | d Mycc | bacterium malmoense | | |
| | | | | | |
| Supervisor(s) | 1. Cecilia O'Kane | | | | |
| | 2. Danny McAuley | | | | |
| School / Centre | SMDBS Centre for Experimental Medicine | | | | |
| | | | | | |
| Principal | Email: | | Tel: | | |
| Supervisor's | c.okane@qub.ac.uk | | 02890976384 | | |
| Contact Details | | | | | |
| Degree Pathway | Medical Science | Х | _ | | |
| for which project | Biochemistry | | | | |
| is suitable (√) | Microbiology | Х | | ı | |
| | General awards | | Subject-specific awards | | |
| Is project of | | | Pritial Aggs Dormatalasiata | | |
| suitable standard | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | British Assoc Dermatologists | | |
| / subject for | Wolfson Foundation | | Digestive Disorders Foundation | | |
| studentship | Joan Chanka Foundation | | | | |
| application? (√) | Jean Shanks Foundation | | Pathological Society | | |
| | | | Others | | |
| Deed was a | T | . (| Other | | |
| Background | | | se in the prevalence of non- | (1 | |
| information: | | | in respiratory sputum isolates over | | |
| | | | s cause frequently intractable infe | | |
| | | | tural lung disease, particularly CC | | |
| | | | oup of infections, Mycobacterium | | |
| | malmoense and Mycobacterium xenopii, are associated with high level | | | | |
| | morbidity and mortality. Treatment to date focuses on 3-4 antibiotics, | | | | |
| | which are difficult to tolerate, and associated with poor rates of cure. In | | | | |
| | our lab we have recently found that a drug currently used for treatment of asthma (drug X) has significant anti-microbial activity against other | | | | |
| | NTM species. This is incredibly exciting as these infections are highly | | | | |
| | | | rug X is a safe, well-tolerated dru | | |
| | | | e. If it has efficacy against M xend | | |
| | | | entially lead to shorter, more effect | | |
| | and more easily tolerated | | | Juvo | |
| Aims / objectives | This study will test | 211111110 | robial incrapy for patients. | | |
| Aiiio i objectives | | X at cli | nically achievable concentrations | to kill | |
| | M xenopii in the la | | | , 10 11111 | |
| | | | nically achievable concentrations. | , to kill | |
| | M malmoense in the | | | , | |
| Techniques | Bacterial culture | | | | |
| employed: | Bacterial viability assays (F | Bacter- | ·Glo) | | |
| 1 | | | ophotometry and colony counting | | |
| | | | 's progress, some basic cell cultu | | |
| | and infection assays | | , 5 | | |
| | , | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |

| Project Title | A20 and DREAM in pulm | onary | fibrosis | | |
|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|--|
| Supervisor(s) | Dr Bettina C <i>Schock</i> (QUB, expertise: Inflammation, A20, DREAM) Amal <i>ElBanna</i> (QUB, Technical support, day-to-day laboratory supervision, expertise: cell culture, mRNA and protein analyses) Prof John <i>Varga</i> (Feinberg School of Medicine, Director, Northwestern Scleroderma Programme, expertise: scleroderma) | | | | |
| School / Centre | Centre for Experimental Medicine | | | | |
| Principal Supervisor's Contact Details | Email: b.schock@qub.ac.u | ık | Tel: 07828065833 | | |
| Degree Pathway | Medical Science | | | | |
| for which project | Biochemistry | t i | 1 | | |
| is suitable (√) | Microbiology | | 1 | | |
| is cultural (*) | General awards | 1 | Subject-specific awards | | |
| lo project of | General awarus | ٧ | Subject-specific awards | | |
| Is project of suitable standard / subject for | Wolfson Foundation | 1 | British Assoc Dermatologists | | |
| studentship application? (√) | Jean Shanks Foundation | | Digestive Disorders Foundation | | |
| | | | Pathological Society | | |
| | | | Other | | |
| Background information: | characterized by autoimmuthat affects predominately associated with a high more Ssc, fibroblasts are responsaccumulation and skin biopprofiling. To mechanisticall conversion, cultured fibrobliasts is their persisted driven by persistent actival stimulation (2). A20 is a popathways and in scleroder leading to chronic pro-fibrod Pharmacological induction the degree of A20 induction the degree of A20 induction repressor DREAM (4). In a downregulation of A20, an while siRNA-mediated know fibrotic responses elicited in fibroblasts and reduced findings from our pilot work (controls n=38, Ssc n=76) in skin biopsies from patier while the A20 repressor DI Here we wish to investigate | unity, v. the ski rtality a sible for sies h ly inves lasts a nt pro-fition of h tent re ma this stic and of A20 n depe normal d abro- ockdow by TGF fibrotic c using are hig nts with REAM e the e on of A | onic a multi-organ (systemic) disections and progressive for any the lungs. To date, the disection of the lungs of lungs | ibrosis ease is (1). In on Ssc , LR4 ry i ned tion, e of ed A20 er, ssion educed | |

| Furthermore, we wish to examine the effect of A20 inducing drugs (e.g. gibberellic acid, myricetin) on proliferation and collagen expression. |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| References: (1) Allanore Y et al. Nat Rev Dis Primers. 2015 Apr 23;1:15002; (2) Bhattacharyya S et al. Arthritis Research & Therapy 2016;18:216; (3) Reihill JA et al. Br J Pharmacol. 2016 Feb;173(4):778-89; (4) Tiruppathi C et al. Nat Immunol. 2014 Mar;15(3):239-47; (5) Bhattacharyya S, Varga J. Curr Rheumatol Rep.2015Jan;17(1):474; |
| This project will characterise A20 and DREAM expression in cultured lung fibroblasts (a commonly used model for Ssc lung fibrosis) in response to TGFß. We hypothesis that augmentation of A20 (decreasing DREAM) will reduce proliferation and collagen expression in cultured lung fibrosblasts. |
| Fibroblasts will be grown in submersion, stimulated (TGF β) and A20, the repressor DREAM (mRNA, protein), proliferation marker p21 and collagen I and III (mRNA) will be determined by qRT-PCR and Western Blotting. |
| Tissue culture and sterile working techniques (culture of human lung fibroblasts, stimulation with TGFß2 (10 ng/ml) in the presence and absence of the predicted drugs), collection of total mRNA, conversion into cDNA and quantitative real time PCR. Protein analyses by Western Blotting. Statistical analyses of results. Transferrable skills: Working in a team and alone, presentation of data and communication to other members the laboratory and the wider scientific community and the collaborators. |
| |

Centre for Medical Education

| Project Title | How do medical students | s learn | to be 'good' doctors? | |
|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------------------------------------------------------|--|
| Supervisor(s) | 1. Tim Dornan | | | |
| School / Centre | Centre for Medical Educati | on | | |
| Principal Supervisor's Contact Details | Email: timothy.dornan@gmail.cor | n | Tel: 07712 528565 | |
| Degree Pathway for which project is suitable (🗸) | Medical Science Biochemistry Microbiology | Х | | |
| Is project of suitable standard | General awards | | Subject-specific awards British Assoc Dermatologists | |
| / subject for studentship application? (√) | Wolfson Foundation Jean Shanks Foundation | | Digestive Disorders Foundation | |
| , | | | Pathological Society Other | |
| Background information: | This intercalation offers one or maximum two highly motivated students the opportunity to work as members of a small, collegial research group, specialising in education research. The distinguishing feature of our work is that it is as much a social science as a medical science. The main strand of our work is research into how medical students learn to practise medicine amidst the social complexity of workplaces. This offers benefit on several quarters. It helps candidates learn to be good doctors; it helps them learn to teach; and it teaches them ways of thinking that are not so strongly promoted by the mainstream medical curriculum. We 'tailor' projects to the wishes and needs of individual | | | |
| Aims / objectives | students. Projects we can offer this coming year include: - How do children experience hospitals and how can they contribute to medical students' and doctors' learning? - How do medical students learn to 'hold their own' in hospital settings, and prescribe safely there - How can medical humanities contribute to medical education | | | |
| Techniques employed: | We have expertise in a range of methodologies, chiefly qualitative research. This means interviewing or conducting discussions with people in order to learn about social situations, like practising medicine or prescribing. | | | |
| | literature review. These ma | ay, if do | o learn how to conduct a rigorous one well, lead to publications. esearch, implementation science, | |

Intercalated BSc in: Medical Science

Biochemistry Microbiology

| Project Title | Interprofessional simulation based education: a scoping | | |
|---------------------------------|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------|-----|
| | review | | |
| Supervisor(s) | 1. Dr Briegeen Girvin | | |
| | 2. Dr Gerry Gormley | | |
| School / Centre | 1. School of Pharma | | |
| Duin ain al | 2. Centre for Medica | | |
| Principal | Email: | Tel: | |
| Supervisor's Contact Details | b.girvin@qub.a.cuk | 02890972017 | |
| Degree Pathway | Medical Science | + | |
| for which | Biochemistry | | |
| project is | Microbiology | | |
| suitable (√) | Wilciobiology | | |
| Sultuble (*) | General awards | Subject-specific awards | |
| Is project of | General awards | Gubjeet speeme awards | |
| suitable | | British Assoc | |
| standard / | Wolfson Foundation | Dermatologists | |
| subject for | | | |
| studentship | Jean Shanks | Digestive Disorders | |
| application? (√) | Foundation | Foundation | |
| | | | |
| | | Pathological Society | |
| | | | |
| | | Other | |
| Background | BACKGROUND | | |
| information: | Interprofessional educ | ation | |
| illioilliation. | The demands of modern healthcare provision are complex and | | |
| | increasingly revolve around <i>teams</i> of professionals, rather than | | |
| | relying on <i>individual</i> practitioners. Competent individuals may not | | |
| | necessary make <i>competent teams</i> . Professional development that | | |
| | focuses on <i>collaborative practice</i> is known to improve the quality of | | |
| | patient care. Such a focus on interprofessional skills must be | | |
| | established at undergraduate level. | | |
| | | | |
| | Simulation based education | | |
| | Simulation based Education (SBE) has emerged as a significant | | |
| | educational methodology that can advance student learning and | | |
| | best prepare healthcare professionals for practice. The evidence | | |
| | base is now irrefutable of the benefits that SBE can bring to patient | | |
| | care. The simulated experience provides a realistic and | | |
| | challenging learning opportunity that can prepare healthcare teams to perform successfully in real clinical settings. | | |
| | to portorni successiully li | Troat official sourings. | |
| | The emerging roles of | pharmacy | |
| | | eutical Council Standards on the init | ial |
| | | of pharmacists advise that the MPHAR | |
| | | ctical experience of working with patien | |

carers and other health care professionals. This is currently

achieved through a mix of off-site placement visits, using patients, carers and other health care professionals in-class, and simulations.

Qualified pharmacists are increasingly being involved in more clinical roles which involve close interprofessional working both in secondary and primary care. Examples include managing and prescribing for patients with long term conditions, such as hypertension, heart failure, diabetes, asthma and COPD. The expanding roles for pharmacists require competence in various skills such as clinical skills (including physical assessment), critical thinking, communication and team work skills. Pre-2011, most of the published literature around use of simulation in the education of health care professionals has been in medical and nursing schools and less often in pharmacy. Preliminary evidence shows that interprofessional learning through simulation enables participants to practice teamwork and communication skills that are essential for preventing errors and patient harm (Crea, 2011). A review of the published literature on the effectiveness of simulation in pharmacy education and particularly where simulation has been used in interprofessional education, would be a huge benefit to universities when planning training to prepare their students for work in practice.

Aims / objectives

AIM

 The overall of this project is to establish an understanding of the role of simulation based education in the role of pharmacist training and interprofessional education.

OBJECTIVES

- Undertake a scoping review to map current evidence relevant to a SBE in pharmacy and interprofessional education
- identify all relevant publications, and draw whatever conclusions the evidence supports in the use of SBE in pharmacy
- consider how this information may have an impact on educational policy and practice
- Identify topics for future educational research and development.

Techniques employed:

The successful applicant will use a *scoping review* methodology to review the literature. Such a form of literature review is exploratory in nature that aims to map current evidence relevant SBE in pharmacy

The review will follow the methodological steps for scoping reviews devised by Arksey and O'Malley (2005) Namely:

- Step 1: Identifying the research question
- Step 2: Finding relevant articles
- Step 3: Selection of relevant articles
- Step 4: Charting the data
- Step 5: Collating and summarizing the data

Step 6: Consultation exercise (focus groups)

The proposed benefits to the successful applicant

- 1) Generate and synthesize knowledge that could be used to influence practice and policy
- 2) Develop skills in critical thinking, research methods, searching the evidence base, interview skills, presentation skills
- 3) If would be the hope that this work will lead to a publication in a scientific journal and presentation at academic conferences

Arskey H and O'Malley L. Scoping Studies: Towards a Methodological Framework. Int J social Research Methodology 2015; 8 (1): 19-32

Crea KA. Patient simulation. Practice skill development through the use of human patient simulation. American Journal of Pharmaceutical Education 2011; 75 (9): Article 188.

| Project Title | The role of conversation | during | g intravitreal eye injections. | |
|----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| Supervisor(s) | Dr Michael William Dr Catrin Rhys | ns | | |
| School / Centre | | , | | |
| Principal Supervisor's Contact Details | Email: m.williams@qub.ac | .uk | Tel: 07540386492 | |
| Degree Pathway for which project is suitable (√) | Medical Science Biochemistry Microbiology | Х | | |
| Is project of suitable standard / subject for studentship application? (✓) | General awards | | Subject-specific awards - | |
| Background information: | Intravitreal eye injections (IVIs) are the most commonly performed ophthalmic procedure in the developed world, usually performed for treatment of macular degeneration or diabetic macular oedema. Patients are accepting of the procedure as they are driven by fear of losing vision without treatment, but nevertheless experience variable amounts of anxiety before and during injections. Conversational practice in the injection room varies: for some patients it may reassure and relax them, while some <i>injectors</i> may believe that conversation distracts or even may increase infection risk. This project will use 'conversation analysis' (CA) to explore the role of utterances in the intravitreal injection room. CA is an established empirical method used by researchers from several disciplines to analyse the sequence and actions of what is said. The insights gained may be both therapeutic and linguistic in nature. Dr Williams will be closely supervising this and another related CA-based intercalated project, with Dr Rhys providing specialist linguistics input. | | | |
| Aims / objectives | To explore the role of conversation analysis | ersation | on during intravitreal injections usin | g |
| Techniques employed: | will hopefully be in place be The project will then involved consent, setting up record ('the data'), notating the tra | y the s re iden ing equ anscrip | ation, and ethical committee approvatant of the project. cifying participants, seeking their sipment, transcribing the conversation ts using 'Jeffersonian notation', and to analyse and write up findings. | ions |

| Project Title | The role of conversation du | ring vi | sual acuity measurement. | |
|-------------------------------------------------|-------------------------------------------------------------------------|-----------|---------------------------------------------|----------|
| Supervisor(s) | Dr Michael Willian Dr Catrin Rhys | ms | | |
| School / Centre | MW: Centre for M | | Education, SMDBS, QUB cation and Media, UUJ | |
| Principal Supervisor's Contact Details | Email: m.williams@qub.ac.uk | | Tel: 07540386492 | |
| Degree | Medical Science | Х | | |
| Pathway for | Biochemistry | | | |
| which project | Microbiology | | | |
| is suitable (√) | | | | |
| Is project of suitable standard / subject for | General awards | | Subject-specific awards | |
| studentship application? (✓) | - | | | |
| Background | Visual acuity (VA) measurement | ent is d | one in every ophthalmic consult | ation, |
| information: | locally usually by ophthalmic i | nursing | staff. The VA result is an impor | tant |
| | | - | naking, for example on whether | |
| | | | al injections. Conditions in whic | |
| | | | as possible, but there is still so | |
| | | | • | |
| | | _ | n a patient's VA from one visit to | |
| | another may not represent a c 'noise'. | change | in their condition, but merely be |) |
| | Conversation between nurse | and pa | tient is an inherent part of VA | |
| | measurement, as the nurse explains the task, and encourages the patient | | | |
| | to read as many letters as pos- conversation in this setting. | ssible. I | No protocols exist for the nature | of |
| | · · | ation an | alysis' (CA) to explore the role of | of |
| | | | CA is an established empirical i | |
| | | | sciplines to analyse the sequence | |
| | _ | | gained may be both therapeutic | |
| | | • | e closely supervising this and a | |
| | | | , , | |
| | linguistics input. | | t, with Dr Rhys providing specia | |
| Aims / objectives | To explore the role of convers conversation analysis | sation d | uring visual acuity measuremer | nt using |
| Techniques | An ethics application is in pre- | paratio | n, and ethical committee approv | al will |
| employed: | hopefully be in place by the st | | | |
| | | | ng participants, seeking their co | nsent |
| | | - | scribing the conversations ('the | |
| | | | onian notation', and then workir | , . |
| | the supervisors to analyse an | | | ig willi |
| | the supervisors to analyse and | u wiile | ap iliuliys. | |

Centre for Public Health

| | T = | | | |
|------------------------------------|----------------------------------------------------------------------------------------------------------------------|---------|--------------------------------------|---------|
| Project Title | Dementia data analytics in | | ern Ireland | |
| Supervisor(s) | 1. Dr Bernadette McGuinne | ess | | |
| | 2. Prof Peter Passmore | | | |
| School / Centre | CPH | | | |
| | | | I = | |
| Principal | Email:b.mcguinness@qub | .ac.uk | Tel:90978959 | |
| Supervisor's | | | | |
| Contact Details | Mar Paral Octobria | 1 | | |
| Degree Pathway | Medical Science | Х | | |
| for which project | Biochemistry | | | |
| is suitable (√) | Microbiology | | Cubicat angaitic augusto | |
| le project of | General awards | | Subject-specific awards | |
| Is project of suitable standard | | | British Assoc Dermatologists | |
| / subject for | Wolfson Foundation | | Dillion / loose Dermatologists | |
| studentship | Volison Foundation | | Digestive Disorders Foundation | |
| application? (√) | Jean Shanks Foundation | | Dethalasia d Casiat | |
| application: (*) | | | Pathological Society | |
| | | | Othor | |
| Pookaround | We are funded by Atlantia | Dhilost | Other | ont of |
| Background information: | | | itia analytics project in Northern | 5111 OI |
| illiorillation. | | | of data from the Data warehouse | CP |
| | | | cer service. Outputs will include: | , GF |
| | | | , political and administrative decis | sion |
| | | | | SIUII |
| | makers; will inform policy and predictions of cost 2 Framework for ensuring quality of diagnosis, treatment and care | | | |
| | across the country and Europe | | | |
| | 3 Use to further develop D | | a National Strategy | |
| | 4 Generate new research I | | | |
| | 5 Link with other European | | | |
| | | | er-reviewed high impact journals | |
| | | • | 3 , , | |
| Aims / objectives | Several projects will be car | ried ou | at by the team including the interc | alated |
| - | student. One example is a | nalysis | of anticholinergic drug use and | |
| | mortality in patients with de | ementia | а. | |
| | | | tia with a high anticholinergic drug | |
| | | | ity rate compared to patients with | |
| | dementia not on anticholin | | | |
| | | | of GP prescriptions of anticholine | |
| | | | ompared to patients with dementi | |
| | | ia mort | ality rates in both over a five year | Γ |
| Tooknieusee | period. | dotos | nto. | |
| Techniques | Statistical analysis of large | uatase | #IS | |
| employed: | | | | |
| | | | | |
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| | | | | |
| | | | | |
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| | L | | | |

Intercalated BSc in: Medical Science

Biochemistry Microbiology

| Project Title | Microvascular, cognitive and renal outcomes in UK Biobank | | | |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Supervisor(s) | Dr Gareth McKay | | | |
| | 2. Dr Bernadette McGuinness | | | |
| | 3. Mr Euan Paterson | | | |
| School / Centre | Centre for Public Health | | | |
| | _ , , , , , , | | T | |
| Principal | Email: g.j.mckay@qub.ac. | uk | Tel: 90978958 | |
| Supervisor's Contact Details | | | | |
| Degree Pathway | Medical Science | √ | | |
| for which project | Biochemistry | • | - | |
| is suitable (√) | Microbiology | | - | |
| is suitable (*) | General awards | | Subject-specific awards | |
| Is project of | General awarus | | Subject-specific awards | |
| suitable standard | | | British Assoc Dermatologists | |
| / subject for | Wolfson Foundation | | | |
| studentship | | | Digestive Disorders Foundation | |
| application? (√) | Jean Shanks Foundation | | Pathological Society | |
| ' ' ' | | | 1 athological Society | |
| | | | Other | |
| Background | There is a paucity of ev | idenci | e relating to primary and seco | ndary |
| information: | | | irment. The retina is derived | |
| | neural tissue and conresharing cellular similarity blood vessels are ame and measurement allow changes prior to the consture. Renal dysfund reported in association sectional and longitudinate evaluated against could be evaluated against | nected ies to nable wing indeveloption a with cal stude ognitive Captures of carch with restricts of tential | to the brain via the optic rathe central nervous system. Rate direct non-invasive visualism vestigation of early microvaled and vascular disease have ognitive outcomes in several dies. Retinal vascular parameter and renal function measures will in calibre, tortuosity, and brand confounding variables will also will help determine whether a confounding to functioning is duced cognitive functioning is confounding factor. | nerve, Retinal sation scular scular been cross- ers will s from nclude nching so be retinal ity in and if |
| Aims / objectives | will analyse cross section | nal da | Participants from UKBB. This ta to evaluate associations be and cognitive and renal fu | tween |

Techniques employed:

This study will use VAMPIRE (Vascular Assessment and Measurement Platform for Images of the REtina) software to identify and measure retinal microvasculature changes from digital photographs acquired from the UK Biobank. The standardised measured area is defined within the region 0.5-2.0 disc diameters from the optic disc margin. Fractal analysis will quantify geometric branching complexity and density of retinal vessels providing a holistic overview of retinal microvascular health. Statistical analyses will evaluate associations between retinal microvascular variation and cognitive and renal function with consideration of potential confounding variables.

| Project Title | | | ascular health – a study of renal |
|--------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | dysfunction in the UK | Біора | ink conort |
| Supervisor(s) | Dr Gareth McKay Prof Jayne Woodside Mr Euan Paterson Dr Charlotte Neville | | |
| School / Centre | | | |
| Principal Supervisor's Contact Details | Email: g.j.mckay@qub.ac. | uk | Tel: 90978958 |
| Degree Pathway for which project is suitable (✓) | Medical Science Biochemistry Microbiology | √ | |
| Is project of | General awards | | Subject-specific awards |
| suitable standard / subject for studentship | Wolfson Foundation | | British Assoc Dermatologists Digestive Disorders Foundation |
| application? (✓) | Jean Shanks Foundation | | Pathological Society |
| | | | Other |
| Background information: | The retinal vasculature is accessible to direct and repeated non-invasive assessment enabling detection of early microvascular changes prior to clinically significant events. A good diet is associated with reduced chronic disease risk, but the association between diet and retinal vascular health is underexplored. | | |
| | individuals with renal im (ACR) > 3mg/mmol) for normal ACR. Com measurements, including calibre, tortuosity, and | pairm comp pariso ng m bran | UK Biobank will be used to identify ent (urinary albumin/creatinine ratio parison with control individuals with the will examine retinal vessel icrovascular parameters such as ching patterns. A wide range of considered in the analysis. |
| | diet and patterns of inta | ke and | dietary data to examine food, whole d explore whether diet is associated renal impairment in this population. |
| Aims / objectives | We are receiving data for 6998 participants from the UKBB. This study will analyse cross sectional data from a subset of these participants to evaluate associations between dietary patterns, microvascular health and renal function. | | |

Techniques employed:

This study will use VAMPIRE (Vascular Assessment and Measurement Platform for Images of the REtina) software to identify and measure retinal microvasculature changes from digital photographs acquired from the UK Biobank. The standardised measured area is defined within the region 0.5-2.0 disc diameters from the optic disc margin. Fractal analysis will quantify geometric branching complexity and density of retinal vessels providing a holistic overview of retinal microvascular health. Statistical analyses will evaluate potential associations between dietary patterns, microvascular variation and renal function with consideration of potential confounding variables.

| | T - | | | |
|---------------------------------|-----------------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------|------------|
| Project Title | Deep phenotyping and genetic analysis for Behçet's disease – a | | | |
| | complex, multifactorial rare disease | | | |
| C | A 1 B 4 a 1 / a : a b 4 | | | |
| Supervisor(s) | AJ McKnight | | | |
| School / Centre | SMDBS – Centre for Pub | lic Hea | lth | |
| Control / Contro | CIVIDDO CENTRO TOT I AD | iio i ica | | |
| Principal | Email: a.j.mcknight@qub. | ac.uk | Tel: 02890 638460 (shared line | e) |
| Supervisor's | | | · | |
| Contact Details | | | | |
| Degree Pathway | Medical Science | Yes | _ | |
| for which project | Biochemistry | Yes | - | |
| is suitable (√) | Microbiology | No | | |
| la musicat of | General awards | | Subject-specific awards | |
| Is project of suitable standard | | Yes | British Assoc Dermatologists | Yes |
| / subject for | Wolfson Foundation | 165 | | 165 |
| studentship | TTORISON TOURISMENT | | Digestive Disorders Foundation | Don't |
| application? (√) | Jean Shanks | Yes | Pathological Society | know |
| , , | Foundation | | l amerogram control | |
| | | | Other | |
| Background | The European Union (EU |) defini | tion of a rare disease is one tha | at affects |
| information: | • | - | million persons directly affected | |
| | | | | |
| | • | and ~106,000 affected in Northern Ireland. These diseases are | | |
| | individually rare, but collectively common and represent a significant | | | |
| | public health problem. This project investigates inherited risk factors and | | | |
| | the impact of living with a selected rare disease: Behçet's disease (BD). | | | |
| | Constitute and environmental factors contribute to DD but the account | | | |
| | Genetic and environmental factors contribute to BD, but the process of | | | |
| | diagnosis is challenging with inconsistent clinical manifestations of this | | | |
| | disease. A recent survey of individuals living with rare disease(s) in | | | |
| | | | % of individuals receive ≥1 miso | _ |
| | | | dividuals with BD report a wide | • |
| | | | n onset, severity, and frequency | |
| | ups for this systemic | vascu | litis. This disease involves a | bnormal |
| | inflammation / immune | e resp | onses and common features | include |
| | recurrent ulcers, skin lesi | ons, ar | id serious eye inflammation. | |
| | | | | |
| | BD is most often reported | l in pop | oulations along the Silk Road. The | e highest |
| | prevalence is reported | in T | urkey at 20-420/100,000, co | ompared |
| | | | UK. Recent mapping through | |
| | | | n higher than expected preva | |
| | 1 - | | Ireland population. This high | |
| | | | the identification of several fam | |
| | | | makes NI ideal to explore ger | |
| | factors for BD. | .oocu, | makes in lacal to explore ger | .cac nak |
| | | | | |
| | i | | | |

| | This project involves deep phenotyping and strategies to improve recognition of Behçet's disease, identify genetic risk factors, and improve data sharing. |
|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Aims / objectives | The primary aim of this project is to survey patients affected by Behçet's disease, identify genetic risk factors associated with BD in Northern Ireland, and evaluate information sources for patients. |
| Techniques employed: | This project will involve generating data from online surveys and focus groups, as well as state-of-the-art genotyping (next generation sequencing and / or high density microarrays) to analyse more than one million unique genetic markers for association with Behcet's Disease in a Northern Ireland population. |
| | For the dedicated student, this project may also include working with multiple stakeholders and using mixed methodological approaches to evaluate access to appropriate information sources, the social impact of living with this rare disease, and evaluate mental health and wellbeing. |

| Project Title | Gene-environment interactions in Age-related macular Degeneration | | | |
|----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| Supervisor(s) | Amy Jayne McKnight & Ruth Hogg | | | |
| School / Centre | Centre for Public Health | | | |
| Principal Supervisor's Contact Details | Email: a.j.mcknight@qub.ac.uk | | Tel: (0)28 9097 6359 | |
| Degree Pathway for which project is suitable (✓) | Medical Science Biochemistry Microbiology | Х | | T |
| Is project of suitable standard / subject for studentship application? (✓) | General awards Wolfson Foundation Jean Shanks Foundation | | Subject-specific awards British Assoc Dermatologists Digestive Disorders Foundation Pathological Society | |
| | | . " | Other | <u> </u> |
| Background information: Aims / objectives | significant proportion of the recent report highlighting 5 variants across 34 loci ¹ , he also well established that be contribute to the developm the characteristic phenotyphave been to date no large cohorts well-phenotyped for demographic and environment the disease. The Northern Aging provides such an ophave underwent an extension health assessment which is retinal images (colour, OC field Optomap images) have phenotypes such as reticul deposits. This project would data with environmental rist related phenotypes. | e herita 2 inde 2 inde 2 wever both ge ent of 2 es in A 3 escale or AMD nent ris Ireland portun ive hor nclude T, infra re beer ar pse d seek k facto betwe | shave proved successful in reveal bility related to AMD, with the more pendently associated common ar missing heritability still remains. Inetic and environmental factors AMD, but how these interact to read the population based studies involving as well as characterised for the sk factors known to be associated by a sapproximately 4,500 particity as approximately 4,500 particity as approximate | esult in re many d with pants and e wide l |
| , and , expeditor | risk factors in AMD through | the u | se of a genome-wide scan in a widy in Northern Ireland (NICOLA | |

| Techniques employed: | Bioinformatics, multivariate statistical analysis, retinal grading. |
|----------------------|---------------------------------------------------------------------|
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| | |
| | |
| | |

| Project Title | Improving the food envir | onmer | nt in primary schools |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Supervisor(s) | Professor Jayne Woods Dr Michelle McKinley | de | |
| School / Centre | Centre for Public Health | | |
| Principal Supervisor's Contact Details | Email: j.woodside@qub.ac | .uk | Tel: 02890978942 |
| Degree Pathway | Medical Science | Х | |
| for which project | Biochemistry | Х | |
| is suitable (√) | Microbiology | | |
| | General awards | | Subject-specific awards |
| Is project of suitable standard / subject for studentship application? (✓) | Wolfson Foundation Jean Shanks Foundation | | British Assoc Dermatologists Digestive Disorders Foundation |
| application? (*) | Jean Sharks Foundation | | Pathological Society Other |
| Background | There is growing concern a | hout d | liet quality in childhood and how poor |
| information: | quality diets being associate Children, particularly in urbof where their food comes body of work aiming to investigate with the food sector, and a | ted with an sett from. estigate Iteratio | oment and cognitive function, with low h lower academic achievement. tings, also often have little knowledge This project will be based in a wider e the potential impact of engagement n of the food environment in the alth and wellbeing outcomes. |
| Aims / objectives | | | f changes in the school food Ith and wellbeing outcomes. |
| Techniques employed: | Systematic literatu Qualitative researd | | |

Centre for Biomedical Science Education and RISUS (Rugby Injury Surveillance in Ulster Schools) Project

| 1 | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| | al injury and concussion risk in schoolboy prehensive neuromuscular control ay protocol. | | | |
| | (Rugby Injury Surveillance in Ulster Schools) | | | |
| | | | | |
| 2.Sean Roe | | | | |
| Centre for Biomedical Scien | nces Education/Ulster University | | | |
| Email: poolerarchbold@aol | .com | | | |
| | Tel: 02890972640 | | | |
| | | | | |
| Medical Science | | | | |
| Biochemistry | | | | |
| | | | | |
| General awards | Subject-specific awards | | | |
| | British Assoc Dermatologists | | | |
| Wolfson Foundation | Digestive Disorders Foundation | | | |
| Jean Shanks Foundation | Pathological Society | | | |
| | | | | |
| | Other | | | |
| prevention initiatives. There is concern surrounding an increased number of injuries in young rugby players. A recent study found that players with a history of a previous concussion were at increased risk of musculoskeletal injury during the study period (AHR 1.45; 95% CI 1.02 to 2.06). It is accepted that having a history of previous concussion is one of the strongest and most consistent risk factors for future concussion The relationship between concussion and subsequent musculoskeletal injury is an emerging theme in recent studies. In retired NFL American football players, studies have demonstrated a correlation between previous history of concussion and an increased incidence of lower extremity musculoskeletal injury including osteoarthritis. Another study has also examined this relationship in adolescent high- | | | | |
| the odds of sustaining a subsequent time-loss lower extremity injury increased by 34%. It is established that balance and motor function can remain compromised following a concussive episode, despite clinical recovery from this event. In adolescent athletes where the brain is developing, a prolonged recovery period is already recommended prior to return-to-play. A more comprehensive rehabilitation plan that encompasses facets of neuromuscular control and cervico-vestibular rehabilitation may be warranted to reduce the risk of subsequent musculoskeletal injury in this population. | | | | |
| | rugby players with a com rehabilitation return to players with a com rehabilitation return to players with a composition of the players, studies have demonstry of concussion and a musculoskeletal injury included and stronged recovery period iplay. A more comprehensificates of neuromuscular cobe warranted to reduce the | | | |

| The aim of this project is to assess the efficacy of a focused return to play protocol – encompassing key neuromuscular control goals prior to a RTP with the aim to reduce the incidence and burden of rugby-relate injuries in a schoolboy population. The project will focus on the under rugby teams across the province of Ulster. Data collected will include player demographics, biometrics, and strength, previous history of injury, level of play and the use of protective equipment. |
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| Project Title | | | oskeletal injury and concussion h a preactivity neck strengthen | | |
|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--|
| Supervisor(s) | 1.Pooler Archbold (RISUS Group) | (Rugb | y Injury Surveillance in Ulster Sch | nools) | |
| | 2.Sean Roe | | | | |
| School / Centre | Centre for Biomedical Scie | nces E | ducation/Ulster University | | |
| Principal Supervisor's Contact Details | Email: poolerarchbold@ao s.roe@qub.ac.uk | l.com | Tel: 02890972640 | | |
| Degree Pathway | Madical Caionas | | | | |
| for which project | Medical Science | | | | |
| is suitable (√) | Biochemistry | | | | |
| is suitable (*) | Microbiology | | Subject apositio augusta | | |
| la muais at af | General awards | | Subject-specific awards | | |
| Is project of suitable standard | | | British Assoc Dermatologists | | |
| / subject for studentship | Wolfson Foundation | | Digestive Disorders Foundation | | |
| application? (√) | Jean Shanks Foundation | | Pathological Society | | |
| | | | Other | | |
| Background information: | Identifying modifiable risk factors is central to injury surveillance and prevention initiatives. There is concern surrounding an increased number of concussions in young rugby players. Perhaps surprisingly, a recent study found concussion accounted for more than 1 in 3 of the injuries sustained in U15 rugby players. Although the reported incidence of 6 concussions per 1000 match hours is similar to that reported in the U-18 cohort of players concussion comprised a much larger proportion of injuries in U15's (1 in 3 injuries). It is clear, however, that the higher proportion of head injuries in this cohort indicate that the head and neck are more susceptible to injury than other body parts in this younger group of players. Neck strength has been shown to be substantially lower in adolescent rugby players and increased concussion risk is associated with lower neck strength. A recent study has shown that introducing a targeted exercise program of neck resistance exercises can reduce concussion risk. These results indicate that further work in the adolescent game is required to understand this relationship and help develop further preventative strategies to decrease concussion risk. | | | | |
| Aims/objectives | movement control exercise burden of rugby-related injuthe influences of programm. The project will focus on the of Ulster. Data collected wi | interv uries ir ne dose e unde Il inclu | is the efficacy of a pre-activity ention to reduce the incidence and a schoolboy population and to a e and compliance on injury outcoer 15 rugby teams across the provide player demographics, biometrinjury, level of play and the use of | ssess mes. vince ics, | |