

ROLE MODEL

Donal O'Shea

Anne Gulland speaks to the consultant endocrinologist and national clinical lead for obesity in Ireland



THE IRISH INDEPENDENT

"In Ireland we have never funded obesity surgery adequately"

NOMINATED BY AMY MORGAN

"Professor O'Shea taught me as an undergraduate and I worked with him during my intern year and as a senior house officer. He is incredibly inspiring in his commitment to teaching students and to his patients. While I followed a different career path, I learnt a lot about chronic disease management, our responsibility as clinicians to see our patients as more than disease entities, and being confident in my own abilities." Amy Morgan is a GP in Drogheda, Ireland

The seven years Donal O'Shea spent working in the diabetes and endocrinology units at Hammersmith and Charing Cross hospitals in London were an experience that proved formative in many ways. O'Shea became interested in endocrinology as a medical student at University College Dublin but it was in the UK that he developed as a doctor, researcher, and teacher.

His first days were daunting. "It was so intimidating. Hammersmith had a reputation for being a world centre of excellence and the people walking along the corridors were household names in the field," he says.

He was soon appointed senior lecturer, despite being young, and settled in thanks to consultant endocrinologist Peter Wise, whose clinics he took over. Wise was "incredibly generous" with his time, says O'Shea, sharing his knowledge and experience at the end of every clinic, despite being retired.

O'Shea says, "I did most of my endocrinology learning in that post-clinic discussion. This is something that the UK system is very good at—you have that half an hour to an hour where you discuss cases and get different views. I've brought that back into the job I'm doing and I see the trainees thoroughly enjoy it."

Endocrinology is a varied specialty and O'Shea saw patients with diabetes, growth problems, and endocrine tumours, as well as patients undergoing gender reassignment.

"You're dealing with a complete age range and a spectrum of illness and disease. One of the reasons I enjoy the specialty is the range of treatment options for what the body is missing. You're not curing the disease but you're managing it," he says.

As a researcher he studied a relatively new hormone called glucagon-like

peptide 1 and, more recently, obesity—the study and treatment of which has become a major focus of O'Shea's work. He also won a fellowship to study how the brain controls appetite.

After seven happy and fulfilling years in London, O'Shea and his wife, an anaesthetist, moved back to Dublin.

Since coming back, O'Shea has been at the forefront of efforts to ensure that the Irish government takes the treatment and prevention of obesity seriously.

"In Ireland we have never funded obesity surgery adequately. We have the lowest rate of obesity surgery in the developed world and that's not something I'm proud of. There are now 17 randomised controlled trials showing the benefit of surgery. Economically we're now at the point where it's silly not to be doing it," he says.

However, O'Shea's lobbying is beginning to bear fruit: in 2016 the government published an obesity strategy and this September it appointed O'Shea to the newly created post of clinical lead for obesity for the Irish Health Service Executive.

"I now realise, in the few weeks I have been doing the job, that I wasn't sitting at the right tables. I'm going to be saying the same thing that I've been saying for the past 10 years, only now I'll be with the decision makers and the people who hold the purse strings," he says.

And with Leo Varadkar, a former doctor and health minister, elected prime minister this June, O'Shea is confident of being able to influence change.

"I wouldn't have taken the job if I didn't think there were significant opportunities for progress," he says.

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NOMINATE A ROLE MODEL

To nominate someone who has been a role model during your medical career, send their name, job title, and the reason for your nomination to arimmer@bmj.com



Deanna Attai, 53, is a breast surgeon in Los Angeles who puts patient empowerment high on her priority list. Born into a New York medical family, she was educated at Vassar College and Georgetown University and practised in Virginia for five years before moving west in 1999. She was president of the American Society of Breast Surgeons during 2015-16 and is assistant clinical professor of surgery at the University of California, Los Angeles. Patient communication, she says, is "one of the joys of breast surgery and part of what drew me to the field." She co-moderates Breast Cancer Social Media, a Twitter based breast cancer support group.

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Deanna Attai Operation Chocolate

What was your earliest ambition?

I thought that the best job in the world was professional athlete. Unfortunately, I wasn't good enough at any sport.

What was your best career move?

After four years at a large group practice in Washington, DC, I moved across the country to Los Angeles to join a small group general surgery practice. After 18 months I left that practice, went out on my own, and then transitioned from general surgery to a breast-only practice.

What was the worst mistake in your career?

Not focusing enough on my own health, especially after I went into solo practice.

How is your work-life balance?

I learned, the hard way, to respect my limits. I'm now fiercely protective of my free time: I say "no" more often, and I say it without guilt.

How do you keep fit and healthy?

Moderate exercise, gardening, and playing with my kittens. I'm in bed by 9 pm most nights. I do consider regular doses of chocolate critical to my health.

What do you wish that you had known when you were younger?

That it would all work out in the end. I shouldn't have stressed so much.

To whom would you most like to apologise?

My staff. I don't always let them know how appreciated they are.

What do you usually wear to work?

Scrubs. I like to be comfortable.

Which living doctor do you most admire, and why?

My father, who is a retired cardiac surgeon.

What unheralded change has made the most difference in your field?

The field of breast surgery and breast oncology has progressed thanks to researchers who design innovative and forward thinking clinical trials and the courageous patients who participate in these studies.

What new technology or development are you most looking forward to?

Non-operative ablative therapy shows promise for selected patients.

What is your guiltiest pleasure?

Chocolate and sleep. And I've learned not to feel guilty about either of them.

Where are or when were you happiest?

Where I am right now. I'm very content with my current life and situation.

What personal ambition do you still have?

I go back and forth about writing a book: right now it's a low priority, but that could change overnight. I'd like to learn to cook well.

What is your pet hate?

People who don't keep their word or who have hidden agendas. Just be honest.

Is the thought of retirement a dream or a nightmare?

A dream, but I'm not ready for it just yet.

If you weren't in your present position what would you be doing instead?

Rescuing stray kittens and tending to an organic vegetable farm.

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