

Interview with Dr James Moon



Dr James Moon is a Senior Lecturer and Consultant Cardiologist at UCL and the Heart Hospital. He set up and runs the cardiac MRI department dividing his time between clinical practice and research.

He is part of a team of 5 research fellows in the new Heart Hospital Imaging department. He is interested in understanding the structure and function of the heart, particularly the heart muscle, and in detecting abnormalities of the heart to better target treatment.

How long have you been working in your speciality?

12 years (3 as consultant)

Which aspect of your work do you find most satisfying?

The creative aspects of research - joining the dots on information that does not fit and constructing a coherent body of work.

What achievements are you most proud of in your medical career?

Changing statin prescribing in England – as a registrar, I did not have access to cardiac MRI for 2 years and I worked relentlessly at all levels of the healthcare system –including up to Commons Health Select Committee - on this with the result

that £1billion was saved or diverted to treat more individuals with statins – the UK now has the highest uptake of statins for primary prevention in the world.

Developing new ways of detecting different types of disease with MRI or CT scanners – in its latest iteration, we may be onto a technique that can measure a fundamental process common to most diseases and organs – not just the heart, and with CT as well as MRI: the volume of cells, fibrosis and their ratio.

Which part of your job do you enjoy the least?

New bureaucracy which we did without just a few years ago..

What are your views about the current status of medical training in your country and what do you think needs to change?

I worry about a tickbox ‘learning portfolio’ culture which dumbs down initiative and personal responsibility leaving a misplaced sense of entitlement.

How would you encourage more medical students into entering your speciality?

I’ve not seen the need to – cardiology is a fantastic, over-subscribed specialty with something for everyone so its pretty competitive.

What qualities do you think a good trainee should possess?

The same as those of a doctor. I have never seen this trainee:consultant divide; there is a continuum of learning and responsibility development.

What is the most important advice you could offer to a new trainee?

My advice is about learning rather than being a trainee. Medicine does not have that many raw facts to learn. What it does have is interconnected systems. Rarely consciously try and learn information – rather, try and link everything you have ever learned together, preventing isolated islands of knowledge. It takes longer to create the story, but you will never forget it and it’s far more rewarding. If you encounter something new - a tricky JVP waveform, an ECG repolarisation abnormality or

some esoteric MRCP clinical sign, invoke your know of the physical world and apply it to explain the new phenomena – write the essay, deconvolute the phenomena and build it back up, perhaps with subtle changes to see where that gets you. You have spent decades learning about the Krebb's cycle, anatomy, electron transport, fractals, Newtonian dynamics, Brownian motion, fluid dynamics, conservation of energy, entropy, cell structure, evolutionary biology, statistics etc etc – use them.

What qualities do you think a good trainer should possess?

I am not sure I know, but generating enthusiasm in people, and then rewarding and promoting it - that's a good starting point.

Do you think doctors are over-regulated compared with other professions?

No.

Is there any aspect of current health policies in your country that are de-professionalising doctors? If yes what should be done to counter this trend?

It's the effects on individuals that concern me. I fully understand the need for process, protocol teamwork and hierarchy, but these remove individual responsibility

Which scientific paper/publication has influenced you the most?

The non-medical maths/science/philosophy books and magazines I read at school and university. I particularly remember Martin Gardner recreational maths books. Recently I have used fractals and the concepts behind trapdoor ciphers in my understanding of cardiology.

What single area of medical research in your speciality should be given priority?

Prioritize individual researchers/teams rather than topics to create progress through their enthusiasm and own perceptions of priorities.

What is the most challenging area in your speciality that needs further development?

Managing our increasing technical capability which comes with ever reducing incremental benefit.

Which changes would substantially improve the quality of healthcare in your country?

I would overhaul the way society pays for and develops drugs. I would focus on increasing drug company reward for the risk associated with genuine innovation whilst reducing reward for expensive 'me too' drugs with no added value. My group estimated that about 10% of the NHS drug budget could immediately be reallocated improving societal value for money in prescribing, paying for all those much needed NICE decision cancer type drugs and concurrently turbocharging rather empty pharmaceutical drug development pipelines.

Do you think doctors can make a valuable contribution to healthcare management? If so how?

Absolutely. If you have transparently good and altruistic ideas, are selfless about who gets the credit for them, and sufficiently driven to achieve results, the NHS is a wonderful place - its like a demagnetized iron – apply a sufficiently persuasive external field, and the domains line up, generating far more force and direction than expected.

How has the political environment affected your work?

The UK has been great for my field –new techniques are adopted early and the international bane of my field - cardiology-radiology turf wars are less acrimonious here as socialized medicine does not reimburse on a pay per procedure basis..

What are your interests outside of work?

My young family, recreational science, cooking.

If you were not a doctor, what would you do?

Who knows. Perhaps an economist or maybe evolutionary biologist.