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# Keeping the ethos of Hume Street alive

Money from sale of the building is being used to further dermatology in keeping with principles of the hospital charter

**A**S THE State grapples with the fallout of years of irresponsible banking and unsustainable property price increases, one question often plaintively asked is: "Where did all the money go?"

In many instances, it was never really there in the first place. Much of the testosterone-fuelled wheeling and dealing amounted to nothing but the pile of debt that was passed on to us.

Happy endings are so very rare that it is truly heartening to learn how a declining Dublin hospital constrained within the confines of a complex of overstretched Georgian buildings rose phoenix-like to become something truly astonishing.

Exactly 100 years ago, visionary philanthropist Andrew Charles founded a voluntary hospital in Hume Street, Dublin, to provide "for the treatment of diseases of the skin, cancer, rodent ulcer, lupus, kidney and other urinary diseases".

The City of Dublin Skin and Cancer Hospital, better known as Hume Street Hospital, was granted a royal charter in 1916, the last such to be granted to a

voluntary hospital in Ireland.

Prof Eoin O'Brien, board member and former visiting physician, is adamant that this charter remains relevant today.

"Everything is dictated by it. It is very stringent and well thought out and, most importantly, it protected the buildings, which became very valuable," he says.

The hospital, run by a loyal and dedicated staff of doctors, nurses and administrators, thrived and expanded over the decades.

However, towards the end of the last century, funding and the maintenance of a period building became problematic. The Department of Health decreed that the hospital should be gradually wound down.

At the annual meeting in 2004, O'Brien, aware that closure was inevitable, encouraged the hospital board to seize the initiative and preserve the memory of Andrew Charles by safeguarding the continuation of his good works.

"I stressed that there was life after death and that once the hospital was sold the board would be in possession of considerable largesse, so why not use that to further dermatology in keeping with the principles of the charter," he explains.

The board agreed to sell the building and, in co-operation with suitable partners, use the proceeds to found a centre of excellence for dermatological research. They were insistent that this institute, to be named the Charles Institute, must engage in "translational research", ie bench-to-bedside - whatever was discovered in the laboratory must be taken out to the patient.

Despite the high incidence of skin disease in Ireland, dermatology has been sorely neglected. At that time no chair of dermatology existed on the island and the number of qualified dermatologists per capita still falls far short of the European average.

Notice of closure was given to the HSE, and both University College Dublin and Trinity College Dublin were invited to pitch as collaborative research partners. Board chairman Peter O'Flanagan describes the UCD submission as "outstanding", adding: "The ambition of it was what struck us. The proposal worded the ethos of what Hume Street stood for in a way that created great resonance."

In essence, it stipulated that the Hume Street board give funding of €12 million and that UCD provide €6 million, a dedicated standalone facility and appoint a full-time professor of dermatology as director of the institute.

This individual would have an exemplary international reputation and the proven ability to attract funding and highly qualified research staff. The proposal also envisaged a close collabora-

tive relationship between UCD, St Vincent's University Hospital and the Mater hospital.

An existing relationship with St Vincent's, dating back to a time when the functions of The City of Dublin Skin and Cancer Hospital were transferred there, has been further strengthened by the establishment of a collaborative relationship that will result in significant investment in the dermatology wards. The intention is to create a first-class treatment facility capable of implementing the initiatives arising from the work of the institute.

Prof Des Fitzgerald of UCD is hopeful that significant progress in the eradication of diseases such as epidermolysis bullosa (as highlighted by Debra Ireland) is now within reach.

He describes the skin as "the most accessible organ", adding: "We have learned that understanding the mechanisms of skin disease provides insights into other unrelated diseases such as asthma, irritable bowel syndrome and systemic cancer."

The third element of this ambitious project is the establishment of the Irish Skin Foundation (ISF), an advocacy body modelled on the Irish Heart Foundation and representing patient groups coping with skin diseases such as psoriasis, eczema and melanoma.

The board has agreed to fund the ISF for a minimum of two years and oversee the appointment of a chief executive, a medical director and a secretariat, as well as developing an educational programme aimed at patients and medical practitioners.

The Charles Institute has already generated a considerable buzz internationally and is one of just two worldwide, the other being the National Skin Centre in Singapore. In this sense, it emulates the UCD Centre for Research in Infectious Diseases (CRID) which resulted in UCD being invited to manage an infectious diseases unit in the Philippines.

O'Flanagan is still amazed by the timing of the whole exercise. He describes the serendipity of "having operated under the threat of closure for so many years to then sell at the height of the property boom [the building was sold for €31 million] and not invest the money in a by then falling stock market because it was earmarked for this project."

As O'Brien says, "Out of the ashes of what was Hume Street Hospital has risen quite a phoenix in three different forms— a centre of excellence, a service facility at St Vincent's Hospital and the Irish Skin Foundation to bring the science to society."

He says that "the hospital is gone but the hospital lives on in an even greater form and doing much more for dermatology than it ever would have done had it just stayed there as a hospital", adding: "A building is just a building. You have to put sentiment to one side."

See [ucd.ie/research/chartesinstitute](http://ucd.ie/research/chartesinstitute)

## ELEANOR FITZSIMONS



**The Charles Institute at UCD where the work of Hume Street Hospital will continue (left), and the old Hume Street Hospital building (below left).**



