



## Dear Colleagues,

I am very aware of the strong working relationship the Hospital has with its GP and Healthcare professional community. It is clear that this partnership plays a vital role in ensuring patients receive seamless, high-quality care and I am eager to build on that foundation.

As I settle in my role I will be visiting our various locations in the community, connecting with teams to better understand the challenges you face and the support you need. The Hospital has evolved significantly, expanding its reach to better serve the wider community.

Our shared goal is to bring care closer to home and strengthen integration across services.

Looking ahead, improving access and delivering more joined-up care will be central to our efforts. I know that by working closely with you, we can deliver meaningful change for the communities we serve.

I look forward to working with you and attending my first Local Integrated Care Committee meeting on September 9th.

Le meas,

**Barbara Keogh Dunne**  
Chief Executive Officer  
Tallaght University Hospital

## New Dementia Café

Our Consultant Geriatrician, Prof Seán Kennelly, gave the opening address at the opening of Café Memoir, a dementia café which has just opened this month in Tallaght Library. Prof Kennelly praised this new café, saying it will foster social connections and community, which is very helpful for those living with dementia.

The first meeting of the new Café Memoir was packed, with everyone enjoying tea, coffee, biscuits, and a variety of cakes. For the last hour, there was singing by the Kingswood Community Choir, which went so well that some of those attending decided to sing solo!

Café Memoir will continue to meet in Tallaght Library on the first Wednesday of every month between 3pm and 5pm and is open to anyone with dementia, their family, and carers. Anyone who would like to volunteer or help out is also very welcome to attend. Café Memoir meets again on August 6th next.



Pictured from left to right: Volunteers Caroline Creaner, Pauline Dalton & Fiona Delaney, Prof Seán Kennelly, and Volunteer Sharon Lally

## New ED Mental Health Signposting Resource

Following extensive consultation with local community groups and experts, a new Mental Health Signposting Resource has been introduced in our Emergency Department.

The materials are designed to support staff in guiding patients toward community mental health services - especially those who leave before assessment or where inpatient admission is not possible. It will help improve the transition of care from acute to community services and will also act as a resource to those who are supporting a loved one experience a mental health crisis.

The resource, developed with input from TUH staff and those with lived experience, will be available in the ED from June to August 2025, with an evaluation planned for September to measure the impacts of the materials.

*A part of the resource that has been introduced to the ED*

**You matter more  
than you know.  
Stay with us.**

Hope is real.  
Mental Health Support is available.

## Patient Identifiers

Personal Public Service (PPS) Numbers are now being added to patients' files across the health service. This is being done to enable digital health advancements such as electronic healthcare records and the HSE app, accurate patient identification is essential for these projects.

The collection of these unique numbers will also provide a reliable way to uniquely identify each person; helping connect patients to their healthcare records and improve data accuracy and reduction of duplication errors.

A reminder will be placed in patient appointment letters reminding patients to bring this number to their next appointment.

## New Indirect Calorimetry Machine Enhances Patient Care

The Hospital is now one of the few in Ireland to have an advanced indirect calorimetry machine. This development is courtesy of funding secured by senior ICU dietitians through the SPARK Innovation program. This state-of-the-art equipment represents a major step forward in the care that can be provided for critically ill patients.

Indirect calorimetry is considered the gold standard for measuring how many calories a patient's body is actually burning. It works by analysing the oxygen a patient consumes and the carbon dioxide they produce, providing a precise understanding of their energy needs. The result is nutrition plans can be tailored with much greater accuracy.

When patients are in the ICU, their bodies are under extreme stress and their nutritional needs can change rapidly. Feeding them too little or too much can slow down recovery or cause complications. The indirect calorimetry machine helps dietitians make sure each patient receives exactly the right amount of calories and nutrients to support healing and recovery.

With this technology, we can:

- ▶ Personalise nutritional care for each patient, reducing risks linked to underfeeding or overfeeding.
- ▶ Adjust feeding plans in real time based on changes in metabolism and clinical condition.
- ▶ Support faster, safer recovery by optimising energy intake during critical care.

By adopting this cutting-edge tool, our hospital is leading the way in patient-centred ICU nutrition in Ireland. This investment reflects our commitment to using the best possible science and technology to improve outcomes for our patients.



*Pictured from left to right Shannon Brothers, Senior ICU Dietitian; Fionnuala Staunton, Senior ICU Dietitian; Stephen Bligh, Clinical Specialist Clinical Engineer, ICU; Aine Kelly, Clinical Specialist ICU Dietitian and Kate Muldowney, Senior ICU Dietitian*

## New Discovery

A new study at TUH has discovered an innovative solution which helps patients complete their capsule endoscopy. Capsule endoscopy is the gold standard diagnostic procedure to examine the small intestine.

To take this test the patient swallows a tiny camera no bigger than a pill. As it moves through the digestive system the camera takes a video which is recorded on a device worn on a belt, around the patient's waist. On completion of the test, they give the recorded footage back to their doctors. The capsule then passes naturally from their body. This recording helps doctors diagnose and treat the patient. Our colleague, Professor Deirdre McNamara, Consultant Gastroenterologist was key to the rollout of capsule endoscopy at the Hospital.

This is an innovative test for patients who are experiencing issues with their digestive system. Unfortunately, for some patients with medical issues like diabetes and hypertension, the tiny camera can get held up in certain places such as the stomach, which causes it to run out of battery before the capsule has seen all the small intestine.



*Dr. Fintan O'Hara*

The study ran over a six month period with 135 patients participating. They all had risk factors for delayed transit. Dr. Fintan O'Hara, Consultant Gastroenterologist that ran the study wanted to see if the problem could be overcome by the simple intervention of giving patients some peppermint oil diluted in water, as they swallowed the camera. The study discovered that taking peppermint oil helped 98% of these patients (with risk factors for delayed transit) complete this test.

## Testicular Cancer Research

Researchers from TUH have made an important discovery for survivors of Testicular Cancer, which is the most common cancer in young men (aged between 15 and 35).

This new paper has found that five years or more after their cancer treatment, these men are more likely to develop a range of other health problems like high blood pressure, cholesterol as well as lung and hormone-related complications. If left untreated these issues could negatively impact their quality of life or cause serious illness.

The ANP led Clinic where the research was carried out runs weekly at the Hospital and reviews men with a history of Testicular Cancer. During their annual appointment, the men are screened for several potential health complications. The results formed the basis of this new research. This new study from TUH on the long term side effects of Testicular Cancer and its treatment\* has just been published in the **Supportive Care in Cancer** monthly peer-reviewed medical journal.

This new paper found that 40% of these men had hypertension or high blood pressure, while 55% had dyslipidaemia, a general term for having unhealthy levels of cholesterol in the blood. The ANP nurse-led clinic at TUH, where these patients continue to be monitored, also identified two cases of coronary artery disease, when the arteries on the surface of the heart get clogged with fat. It was found that one patient had suffered a heart attack at the age of just 45.



*Consultant Oncologist Raheel Khan and Oncology Advanced Nurse Practitioner Patrice Kearney Sheehan who led this new research.*

## Webinar Series for GPs

Hosted by the Integrated Care Chronic Disease Management Hub in Tallaght the following workshops are scheduled for July and September. Each event is 60 minutes and will start at 1pm.

The events are tailored for GPs, Practice Nurses and healthcare professionals to improve their understanding of chronic disease management within the integrated care framework.

The sessions will provide updated guidance on type 2 diabetes and chest pain, covering the latest clinical guidelines, diagnostic methods, treatment strategies and referral pathways. Participants will gain practical knowledge to support improved patient outcomes and alignment with the HDE's integrated care objectives. ICGP CPD points are available by completing a feedback form at the end of each session.



### Management of Type 2 Diabetes Date: July 17, 2025, 1:00 pm

Speaker:  
Dr. Ferrah Shaamile, Consultant Endocrinologist

- Best practices in diabetes control
- Lifestyle and pharmacological management
- Referral criteria and monitoring



[CLICK HERE](#)



### Chest Pain Assessment in 2025 Date: September 18, 2025, 1:00 pm

Speaker:  
Dr. Peter Wheen, Consultant Cardiologist

- Assessment and triage of chest pain in general practice
- Red flag identification
- Pathways for rapid referral



[CLICK HERE](#)

## Some Exciting News!

TUH has been chosen to participate in a €6M project to help survivors of Testicular Cancer. The initiative will look at how XR technology (e.g., virtual reality devices) can be used to help meet the needs of testicular cancer survivors.

Testicular cancer is the most common cancer in young men. Research has discovered that survivors often face a heavy burden in the years after their treatment has finished in terms of late side effects, which can include cardiovascular disease and mental health issues. Our Consultant Oncologist, Dr. Lynda Corrigan, will be the principal investigator on this important project for TUH. To find out more, click this [link](#).



## Expect to be Checked

The Hospital has launched a new video titled [Expect to Be Checked](#), part of our ongoing Positive Patient Identification Campaign. This powerful short animation is designed to engage both patients and healthcare staff, reinforcing the importance of accurate patient identification as a key pillar of safe, high-quality care.

The video is live on both the staff intranet and YouTube channel and will be featured across patient-facing areas and during staff training sessions. It highlights real-life scenarios where staff are seen actively checking patient details such as name, date of birth or MRN and encourages patients to expect and welcome these checks every time.

For staff, Expect to Be Checked serves as a reminder that asking questions, confirming identity, and scanning wristbands or barcodes is not just routine—it's vital. For patients, it reassures them that being asked multiple times is normal and part of a strong safety culture.

Positive patient identification is everyone's responsibility.





## Professor Davis Coakley Award for Creativity in Ageing & Medicine

The Irish Gerontological Society is open for submissions for the Professor Davis Coakley Award. This Awards celebrates artistic expression inspired by ageing, geriatric medicine, and the lived experiences of older adults.

The prestigious award honours the legacy of Professor Davis Coakley (1946–2022) - an academic geriatrician, literary scholar, and passionate advocate for integrating the humanities into medicine.

Submissions are welcome from anyone who cares for, works with, or is inspired by older people - including healthcare professionals (current, retired, or in training), carers, and creatives from all walks of life. You do not need to be a member of the Irish Gerontological Society to enter.

Submissions can include:

- ▶ Prose
- ▶ Poetry
- ▶ Artwork (any medium)
- ▶ Sculpture
- ▶ Photography



This year's pieces should reflect themes related to ageing or geriatric care, and may draw inspiration from the 2025 conference theme: "Designing & Delivering Sustainable Age Friendly Healthcare."

The top 10 submissions will be invited to showcase their work at the IGS Annual Scientific Meeting in October, where the winner will be announced. Deadlines for submission is August 1st 2025. To enter, email: [daviscoakleymedal@irishgerontology.com](mailto:daviscoakleymedal@irishgerontology.com) Include your name, profession, and your artwork (PDF for written work; photo for visual pieces).



## New Equipment

**Our Cellular Pathology Laboratory which is responsible for testing patient tissue samples has just installed a cutting edge new piece of equipment known as the Axlabs AS-410M. This new development will speed up and significantly increase the Hospital's capacity to test patient samples.**

The main benefit of the Axlabs AS-410M is that it can automate one of the most time consuming, manual and repetitive tasks in the lab, which is a big positive given demand to test patient samples has increased by almost 10% at our hospital over recent years.

TUH is currently in an expansion phase, increasing capacity in areas such dermatology, gynaecology, surgery and endoscopy, all of which directly impact the demand for cellular pathology testing in the Hospital Laboratory. Additionally the complexity of testing has increased and is expected to continue rising putting additional demands on the service.

Sarah Delaney the Chief Medical Scientist in the Cellular Pathology Laboratory at TUH says "Our Lab receives about 65,000 patient samples per year. One patient sample could need up to 20 blocks, depending on the sample type. Each block could produce 1-20 slides.

Before the arrival of the the new technology our Laboratory had a shortfall of 160 blocks a day. We will now be in a position to create 200-300 blocks per day, so we are somewhat future proofed for increased demand as our services grow.

The Hospital is the first site in Ireland to introduce this vital piece of new equipment. The purchase was funded by Bowel Screen a national programme which first began at TUH.



*Pictured from left to right Christopher Owens and Dannie Loayon, Medical Laboratory Aides in the Cellular Pathology Laboratory*



If you would like any more information about any articles in the Connect or have suggestions for future editions please do get in touch

Email: [GPCConnect@tuh.ie](mailto:GPCConnect@tuh.ie)