

Alumni: (Past student)

Name: Dr Nick Cunniffe

Age: 32 (b. 1987)

Year graduated from Ousedale: 2006

Photo of you in your workplace



What qualifications did you gain at Ousedale?

GCSEs with grades: Maths, Statistics, Double Science, English Literature/language, History, Geography, German, Food technology, Sports science (All A*, except A in German)

A Levels with subjects and grades: Maths, further maths, biology, chemistry, physics. All A's.

Did you pursue any Further or Higher education? College/Apprenticeship/University/study while working

Yes. After leaving Ousedale I studied medicine at Gonville and Caius College, University of Cambridge. I matriculated in 2006 and graduated in 2012.

What did you enjoy most about your school life at Ousedale?

Spending time with my friends – whom I still see on a regular basis, now many years later.

I particularly enjoyed maths and physics-based subjects.

I was very well supported by my teachers at Ousedale and owe a lot to the school.

Current job title and description of your role?

I am a Neurologist, currently working at Addenbrooke's Hospital in Cambridge. I also lecture at Cambridge University, and am responsible for the provision of undergraduate neuroscience teaching within Gonville and Caius College.

In my primary role, I am responsible for caring for people with neurological illnesses. Working both in outpatient clinics and on hospital wards, doctors refer me people with symptoms such as weakness, sensory loss, visual changes, headaches, balance difficulties, and cognitive decline. My job is to make accurate diagnoses – examples include multiple sclerosis, motor neuron disease, epilepsy, Parkinson's disease, brain tumours, dementia and strokes – and to initiate appropriate treatments. Most of this is undertaken during the "working day". On occasion, about once every 10 days, I am also "on-call" for acute neurology and stroke for East Anglia – in which case I have to provide advice 24:7 and sort out emergencies whenever they arise. This might include giving life-saving treatments for strokes overnight.

Additionally, I also undertake research in the field of multiple sclerosis. I am currently working to address the greatest unmet need in this condition, which is to find a treatment that can delay (or hopefully prevent) the progressive disability that the majority of people with MS eventually develop.

This involves conducting drug trials in people living with MS, but also using advanced technologies to measure the structure and function of nerves in health and disease.

How did you achieve this role? *Starting job title/level, in-house training, extra study/courses/degree, CPD opportunities. Promotion – explain each area of your career – daily role and responsibilities, skills learnt, working hour’s etc. changing organisations.*

In order to qualify as a doctor, you have to undertake at least 5 years at medical school. I undertook an extra neuroscience degree during my years of study, and so I spent 6 years at University.

After leaving medical school, I stayed in the east of England to undertake “Foundation training”. These are 2 years of working at the most junior level as a doctor, in which you rotate through several different specialties. I worked in cardiology, liver/pancreas surgery, and emergency medicine, among others; this gives you a good grounding as a doctor and allows you to make a more informed decision as to what path you should take for the next stage of training.

I then proceeded to internal medical training (instead of taking the path of a GP, surgeon, pathologist or alike). I spent 2 years in South London, again rotating through a host of medical specialties: oncology, acute medicine, geriatrics, neurology etc. During this time, I undertook an extra set of exams to allow me to practice medicine at a senior level. This involves study/attending courses outside of your usual working hours; the exams do not stop after medical school (sadly).

Over these years as a “house officer”, doctors work on a rota to make sure the hospitals are staffed adequately. On average, I would work 8am – 6pm during the week, and about 1 weekend in 4. At variable frequencies, you have to work night shifts (but you do get the days off when you do!). These are usually 8pm – 8am, and you tend to do 3-4 in a row. When working in ED I would work 1 week of nights a month. When working in medicine, it was fewer – perhaps every 2 months. You do work hard during these formative years, but you are well supported by senior medics and you do still get to have a life outside of your job!

The day-to-day job involves seeing patients that your team is looking after, reviewing sick patients, treating illnesses and problems as they arise, and performing procedures. When working for surgical specialties I would assist with transplant and cancer operations, but I had no desire to do this long term. Instead, I chose a more academic path involving diagnosing and treating neurological diseases.

I took up my current post in 2016, having secured a neurology training position in Cambridge. I now just see people with diseases affecting the brain, spinal cord and peripheral nerves – i.e. working as a specialist. My working hours are similar, but the evenings/nights/weekends commitment is less as I can often work from home. In order to be a senior neurologist, you typically also undertake a PhD; I will be completing mine by the end of 2020.

What advice would you give our current students about the World of Work?

- A) Pick something you are going to find interesting/entertaining for the next 40(!) years. Medicine is constantly evolving and you can help shape its future, so it really is a good choice.
- B) If you chose medicine you should do it for the right reasons. This is to help people. Not for prestige and not for money (you do earn a very good wage as a senior doctor, but do not

have anything like the same earning potential of bankers and alike). I went in eyes wide open and do not regret my choice.

If there was a student interested in your career sector what advice would you give them and where could they find out further information?

Obviously you need to work hard. Top grades are required to get into medical school. Also make sure you know what the entry requirements are to medical schools – most specify a certain number of the science-based subjects at A levels.

However, you should additionally seek work experience in the care setting. I spent 12 months working for Willen Hospice as a health care assistant on my Saturdays during years 11 and 12. Others managed to get work experience at hospitals. This is important to get exposure to caring for unwell people, and also to demonstrate to your interviewer that you know what you are getting yourself into. Ideally, get on the case with organising this at least a year before applications.

Some light reading that gives you an idea about life as a doctor:

- ➔ This is going to hurt, Adam Kay. (This is a comedic take on it, but is well written)
- ➔ Trust me, I'm a (junior) doctor, Max Pemberton
- ➔ Do no harm, Henry Marsh

And the BBC series your life in their hands is particularly interesting (the one about surgery, the one focussed on junior doctors is a bit overly dramatic and silly). Henry Marsh appears in one called "the English Surgeon", which I think you can find online for free somewhere and is very inspiring.

Please feel free to add any further comments and photos you wish to share.

1. Medical school is good fun. I spent more time rowing than working



2 Life as a junior doctor on the ward (photo 2013)



3 The sort of patient I see as a Neurologist. This chap became confused, aggressive, and had odd facial movements; all due to a form of brain inflammation (encephalitis). You can see the inflammation of his hippocampus (lighter part on the brain scan).

