Q&A with the Patient and Research Group co-chairs.

1. What is your role within the Oxford Health BRC?

Douglas Findlay: Having been a member of the Patients and Research (PAR) group since 2016, I decided to apply to be the co-chair of the new OH BRC PAR group and was delighted to be chosen to chair with Dr Amy Gillespie as my professional co-chair.

Amy Gillespie: I joined the Patients and Research (PAR) group in 2018, and immediately after my first meeting could see how valuable and important it was, so became a staff member. I then became staff co-chair of the PAR group in 2020, which involves working with Douglas and the PPIEP manager to organise/Chair/follow up on actions from the meetings which discuss PPIEP strategy across Oxford Health BRC. I also have a few other hats – I am a senior postdoctoral researcher and project manager for the Depression Therapeutics Theme and am the PPIEP staff champion for that theme.

2. What motivated you to take up this role, particularly in Oxford?

Douglas Findlay: My introduction to the research environment was quite recent, following a period of caring for my parents who died in 2013/4. My initial foray was as a subject of research into being a carer of cancer patients. Following this, I was invited to co-produce a piece of ethnographic research in an Emergency Department. Due to such positive experiences of involvement, I applied to chair a patient group for an Oxford study into how patients use online media for health information. What sparked my interest in joining the OH BRC was becoming a co-author on a study researching treatments for depression. This essentially provided my introduction to the fascinating and extensive work of the mental health research community across Oxford.

Amy Gillespie: I’ve wanted to work in mental health since I was a teenager – partly motivated by my own experiences of depression – and I love the potential for research to change our understanding and care for mental health problems. When I was finishing up my PhD in 2017, I saw the opportunity to work with the fantastic PERL team investigating novel treatments for depression, using an approach I admired and recognised from my Psychology degree, and I was delighted when I got the job. I’ve steadily become more involved in PPIEP as I saw how transformative to research it could be, and how essential it is to embed it throughout your work for it to have the most meaningful impact. More fundamentally, I don’t really see the point of research without the voices of people with lived experience – helping people with mental health problems is the motivating force behind whatever I work on, so their voices are essential.

3. What is the area of research within the Oxford Health BRC that is of most interest to you?

Douglas Findlay: This is quite a challenging question to answer, as each of the 11 themes
provides so much potential for both innovative research as well as future breakthrough discoveries. If pressed for a favourite area of research, I would say it would be the Molecular Targets theme, mainly because of its potential to cut across all of the themes, as well as helping us to better understand identify and test new therapeutic targets for psychiatric disorders, utilising genomics and other techniques. The limitations of current psychiatric drugs contribute to poor outcomes and low quality of life, so I imagine that this area of research has enormous potential to change outcomes for patients and carers, by offering new therapies for clinicians.

Amy Gillespie: Of course, treatments for depression are my primary interest, which includes understanding how existing and new treatments work, or why they don’t work in some people. I’m particularly interested in the ways treatments effect how we perceive or interact with the world and other people – what we remember, how we interpret things, what we choose to invest our energy in. More broadly, I really appreciate the broad range of research going on in the BRC and the diverse perspectives and approaches being taken to tackle mental health problems at every level, from core biology to the context of the society we live in. Every piece of the puzzle is needed!

4. What is the project you are currently working on/planning and how does this fit within the BRC’s strategic priorities?

Douglas Findlay: I purposely haven’t linked myself to any particular theme, as co-chairing the PAR group will provide me with the opportunity of engaging with all of the 11 themes, as well as helping the PAR team to develop the group’s ability to better engage and work with the themes. We have been developing a long-term strategy and we are keen to implement much of this strategy across the lifetime of the new OH BRC.

Amy Gillespie: I’m currently close to finishing analysis of the data from two big studies in patients with depression, which explored the effects of a new drug – the drug is a 5HT4 agonist, which means it affects a specific serotonin receptor in the brain, in a way that is different to conventional antidepressants. We looked at the way this drug affects people’s interpretation and recall of emotional information, as well as various other measures of different cognitive abilities. Not only will it give us insight into the potential benefits of this drug, but also more insight into how this serotonin receptor in the brain may be relevant in depression.

5. What or who inspires you?

Douglas Findlay: I have always been inspired by the life and work of Jesus as I believe his teachings leads us to eternal truths and his servant leadership style is a perfect model for all contemporary leaders.

Amy Gillespie: It’s very hard to pick out any individual – I’m inspired by so many of my colleagues, and participants, and the people in my life. I’m inspired by anyone who choose to do the right thing over the easy thing. I’m inspired by the bravery of true vulnerability. I’m
inspired by academics who manage to produce fantastic science, while also having a life outside of their work!