



## ITS Council Candidates

### 1.0 ITS Council – Ordinary Member Candidates

- **Stanley Miller**

**Please advise of your current role and experience**

I am a Consultant Respiratory Physician with 16 years clinical experience (both UK and Ireland) and am an associate Clinical Professor, UCD School of Medicine.

My MD thesis, conferred in June 2008, was based on my basic science research in Alpha-1-antitrypsin Deficiency. I also spent two years as a Non-invasive ventilation research fellow at St. James' University Hospital, Leeds (ERS Long Term Research Fellowship Nos. 154 and 89).

From September 2009 to September 2020, I was Consultant in Respiratory and General (Internal) Medicine at Leeds Teaching Hospitals NHS Trust, where in collaboration with Leeds Community Health NHS Trust, I was Lead Consultant for the Leeds Integrated COPD Service and the Leeds Virtual Respiratory Ward.

From November 2020 to February 2022, I was Consultant in Respiratory and General (Internal) Medicine at Our Lady's Hospital, Navan and Mater Misericordiae University Hospital, Dublin and provided support to the Integrated Respiratory Services in both CHO Area 8 and CHO Area 9.

I am currently Consultant in Respiratory and General (Internal) Medicine at Mater Misericordiae University Hospital, Dublin and Lead for Integrated Respiratory Care MMUH / Dublin North Central. My current subspecialty interests include Integrated Respiratory Care, COPD, Alpha-1 antitrypsin Deficiency, Noninvasive ventilation and Sleep.

I was the HSE National Clinical Lead for Respiratory Medicine from 2022 to 2024 and subsequently became Chair of the Board of COPD Support Ireland in October 2024.

I am also currently Chair of the ITS Tobacco Control Advisory Committee.

Since February 2025, through my COPD Support Ireland role, I have engaged with the ERS International Respiratory Coalition project and have collaborated with the ITS in the initial stages of setting up the Respiratory Coalition of Ireland.

I believe that I have significant experience in leadership, advocacy (professional and patient-related), multi-stakeholder collaboration projects, and broadcast media, and through this experience, have developed a network of professional relationships that I can draw on.

**Please advise why you would like to join the ITS Council**

I feel that membership of the council is a unique opportunity to contribute to, advocate for, and effect change for, Respiratory Medicine in Ireland. I would like to positively contribute to both the current and future strategic directions of the ITS.



I believe that, through my experience, I can provide the Council with unique insights into the HSE and patient advocacy, and build on the network of relationships and experience that I have developed during my previous HSE National Clinical Lead for Respiratory Role and current COPD Support Ireland Role.

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During my time as HSE National Clinical Lead for Respiratory, Deputy Chair/Chair of the ITS Tobacco Control Advisory Committee and Chair of COPD Support Ireland, I have already had the pleasure of either working alongside or collaborating with both the ITS CEO and the majority of the existing members of the ITS Council.

In this context, I believe that I can help the ITS influence national policy and services to help reduce the health and economic burden of lung disease, and to ensure equitable access to the best standards of respiratory care across the country, working in a spirit of partnership and collaboration with all those who share the ITS vision including patient organisations, government, the HSE, industry and academia.

I am very grateful for the council's consideration of my application and for the opportunity to contribute.

- **Hilary McLoughlin**

**Please advise of your current role and experience**

I am a Respiratory Consultant in Portlincun Hospital and currently leading the East Galway Integrated Care team. I moved into this role in early 2024 after working in PUH as a consultant for 7 years. I have had a lot of success in reducing waiting lists from 3 years to 10 months and I am enjoying the challenge of introducing new efficient methods of patient care with a multidisciplinary team in the community. I still retain a busy hospital role since there is a vacant Respiratory Consultant post at PUH.

I have experience working in the Private sector (Galway Clinic) while I waited to be appointed to a HSE consultant post, and prior to that I was a consultant in St James's University Hospital, Leeds for 7 years. I am an Adjunct Associate Professor with the University of Limerick and participate in their undergraduate teaching programme at PUH.

**Please advise why you would like to join the ITS Council**

I have recently stepped down as Associate Clinic Director for Medicine and ED at PUH and I have some time which I could commit to a new project. I am keenly interested in the advancement of Respiratory Medicine within Ireland and I see from my involvement in the ITS Tobacco Advisory Group how important Council and committee representation is in issuing guidance and statements and in lobbying the Department of Health for improvements in funding for patient care. An organised and coordinated approach is required. I am pleased with the changes I have seen in the ITS over the past few years. I enjoyed organising the Spring Meeting in Athlone in 2024 in particular. I would like to be a part of the future efforts to effect change in Respiratory Health in Ireland by being a member of the ITS committee. I have a lot of energy to bring to the role.



- **Trevor Nicholson**

**Please advise of your current role and experience**

- Consultant in Respiratory Medicine and Cystic Fibrosis in St. Vincent's University Hospital since 2017
- Consultant in Blackrock Clinic (2016-2021), SVPH (2022-present)
- Post-CSCST Pulmonary and Critical Care Fellowship in Northwestern in Chicago (2012-2016)
- Broad interest in respiratory medicine, with expertise in CF, bronchiectasis, chronic pulmonary infections,
- respiratory muscle weakness/respiratory muscle dysfunction/mechanisms of dyspnoea and pulmonary
- physiology
- Very experienced with management of complex CF cases, greatly aided by the close clinical support of the
- CF multidisciplinary team – Specialist nurses, Respiratory Physiotherapists, Dieticians, Social work,
- Psychologists, Pharmacists as well as colleagues from Clinical Microbiology, Thoracic surgery, ENT
- surgery, Gastroenterology, Nephrology.
- Member of CF Registry of Ireland
- Member of European Cystic Fibrosis Society Acute Exacerbation working group
- Member of ECFS Telehealth working group
- Currently developing a telehealth strategy for Cystic Fibrosis in SVUH
- Currently performing a systematic review of telehealth in CF and also a narrative review of the use of
- telehealth in chronic disease management outside of CF
- Currently researching the role of using nasal epithelial samples in monitoring treatment response in CF

**Please advise why you would like to join the ITS Council**

The ITS plays a crucial role in the promotion of lung health in Ireland, advocating on behalf of patients, respiratory physicians and surgeons, as well as trainees and multidisciplinary team



Irish Thoracic Society

members. This is something where I believe I could contribute positively and help with established initiatives as well as developing new directions.

Having previously trained in respiratory medicine in Ireland, Northern Ireland as well as the US, I believe this experience has greatly enhanced my overall approach to managing many respiratory conditions. My consultant experience in both the private and public sector has also provided me with additional experience in complex or unusual pathologies and also novel diagnostic and treatment modalities for various conditions.

Important areas where I would see the ITS playing an integral role in the coming years would be:

- Continued close interaction with, and support of, the HSE national clinical programs in both Respiratory Medicine and also Cystic Fibrosis.
- Development of a national lung cancer screening program
- The adoption of a national/universal electronic health record and how this might be adapted to suit
- respiratory specialities and also the multidisciplinary teams within respiratory medicine.
- Eventual adoption of an EHR nationally would also greatly aid in the possible development of a national lung telehealth strategy.
- Continued advocacy for reimbursement of novel drug therapies (e.g. Brensocatib)
- Advocacy for poorly represented lung diseases (e.g. non-CF bronchiectasis) and rare lung diseases in Ireland the UK, and Europe
- Close interaction with the ERS, in anticipation of Ireland taking over as President of the European Council in July 2026.
- Education on e-cigarette use and monitoring of long term outcomes among users
- Initiatives aimed at improving data on all lung disease in Ireland, perhaps mirroring the success of the CF Registry of Ireland, the Alpha-1 Antitrypsin Deficiency Registry and the ILD Registry

I would greatly welcome the opportunity to work with the Council on the advancement of lung health in Ireland.



## 2.0 ITS Council – Northern Ireland Representative

- **Paul McKeagney**

### **Please advise of your current role and experience**

I am a Consultant in the Belfast Trust with specialist Interests in Occupational Lung Disease and COPD. I have also held many representative roles over the last few years.

I Chair the regional NI Hyperinflation/Lung Volume reduction MDT which has recently introduced Bronchoscopic Valve and surgical Lung Volume reduction procedures for advanced Emphysema. My main subspecialist interest is Occupational Lung disease and am in the process of developing a regional clinic. I work closely with Occupational Medicine providers in the region and sit on the NI Occupational Health Practitioners group which works with statutory bodies (Health and Safety Executive Northern Ireland) as well as medical practitioners to review policy, training and practice within the region.

I am a member of the UK Group of Occupational Lung Disease specialists (GORDS) and have just been appointed to the British Thoracic Society Specialty Advisory Group for Occupational and Environmental Lung disease.

I am a Fellow of the Faculty of Occupational Medicine, Royal College of Physicians of Ireland and a former Fellows Representative on the Governance Board of the Faculty.

I am also a former Secretary of the Ulster Thoracic Society

### **Please advise why you would like to join the ITS Council**

I have been a member/supporter of the ITS since I was a Registrar and have attended, presented, as well chaired sessions at Scientific meetings since.

I feel it is important that the Society continues to have Northern Representation but I also feel that there is potential for widening the membership in Northern Ireland (particularly amongst trainees).

I believe that there is increasing potential for cross border co operation on many issues given the size and population of the Island particularly on less common sub specialties eg occupational lung disease! I do feel I can contribute positively to the council and the society and reflect the current feeling of Respiratory Medicine in Northern Ireland in this role



- **Paul Minnis**

**Please advise of your current role and experience**

Dr Minnis is a specialist in Interstitial Lung Disease with interests in the inflammatory mechanisms driving fibrotic lung disease and the application of technology in the diagnosis and management of chronic disease. He has an active role in undergraduate and postgraduate medical education and is the curriculum lead for the C25 undergraduate medical course in the Northern Trust. He sits on Northern Ireland Biobank steering committee, BTS ILD Registry Steering Group, BTS ILD and Rare Diseases Special Advisory Group, and BMJ ORR Editorial Advisory Board, a representative of the NI Research Recovery and Resilience Task Force, a SWORD reporter and member of the Q community led by the Health Foundation. He has recently completed masters in Medical Ethics and Law with special consideration of the provision of healthcare services including resource allocation and public health.

He undertook a fellowship in ILD at St Vincent's University Hospital Dublin. Here his research strands included the role of microRNA in IPF, observational studies in sarcoidosis and live data studies at the Insight Centre for Data Analytics UCD investigating the potential for connected health solutions in chronic disease. Dr Minnis is the Director of Research and Development in the Northern Trust.

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The roles and experiences outlined above have solidified skills required to manage change, frame boundaries, synthesis data across multiple evaluations, embrace innovation and work effectively in varied settings. They have sharpened critical analysis in both a narrow specialist area of expertise but also developed an appreciation and understanding of a wide range of important considerations effecting healthcare. Dr Minnis is capable of strategic thinking, adaptive management, and impact assessment in complexity. His addition to would bring fresh experience and a unique set of skills, strengthen cross border collaboration and add further dynamism and innovative approaches to the group. Having undertaken a fellowship and subsequently worked as a consultant within the Irish system I have had the opportunity to develop strong relationships and look forward to maintaining and developing further exciting opportunities and collaboration.