

Dr Chris Jones
Academic Clinical Fellow

I am an Academic Clinical Fellow (ACF) in Clinical Oncology based in Leeds and have an interest in cancer research that stretches back to medical school, where I completed both an intercalated degree and a number of research projects in the UK and US, around half of which were in the field of oncology.

I am currently at a very early stage of my clinical oncology training, having recently completed my core medical rotations. As an ACF I am nevertheless able to contribute 25% of my time to academia. For me, this means spending three months each year in a lab focussing on early cellular signalling events in oesophageal cancer. This is an area that has interested me for some time and I was supported to design a research project in this field by both my research supervisors and through funding from Cancer Research UK and the Pathological Society.

One of the most enjoyable parts of this academic/clinical split is the variety it brings. Whilst I might spend one month building my clinical experience, the next could be spent working alongside post-doctoral scientists and PhD students in a world-class lab. On an average day here I'll spend most of my time at the lab bench itself though I also spend time in our research group's office where I'll do things like order my reagents, plan experiments and draft papers. As this lab is within the University campus I also attend one or two talks each week, as well as our own lab meetings.

Overall, although very different to working within a hospital, the lab is a great environment to be in and working with non-clinical scientists provides a valuable difference in perspective. I also enjoy the challenges that this work brings - it's rewarding to know that from year to year I'm not just growing as a clinician, but that I'm also building a repertoire of lab and research skills.

In moving from clinical work to the lab a noticeable change for me has always been the freedom I gain to plan my own time. Whilst on my clinical rotations I'm often responding to bleeps and the needs of others, I'm largely free during my academic block to choose what I do from day to day. This can be liberating but my time is nevertheless still driven by the experiments I need to do to test my hypotheses. They can be quite involved, too, so it's not unusual for me to have to come in to the lab on a weekend to feed my cells or complete the last bit of a long experiment.

There are some other harder aspects to having an ACF. I do miss seeing patients after a couple of months in the lab, particularly when my experiments don't seem to be working for weeks at a time! Having started research at such an early point in my clinical training, it also

takes a lot of planning and extra work to maintain my medical skills whilst training to achieve independence both within the lab and in craft radiotherapy skills.

Despite this, I really enjoy the different aspects of my job and strongly believe that the skills I gain undertaking research support my development as a clinician. Having an ACF has also provided me with an opportunity to take on leadership and administrative roles - such as sitting on a national research ethics committee - that have provided an entirely different but very valuable skillset.

Like most other ACFs, my next step will be to secure a Clinical Research Training Fellowship. This will enable me to complete a PhD focussed on the lab research I have already started, with a longer term view to establishing my own research group that focusses on hypotheses I develop from my clinical work. I intend to attend a small number of clinics and remain on the on-call rota during this Fellowship to maintain my clinical skills. This again means striking a balance between clinical and academic work, but this is something that has so far been something I have been able to achieve through planning ahead and liaising with both the training programme director and my academic colleagues.