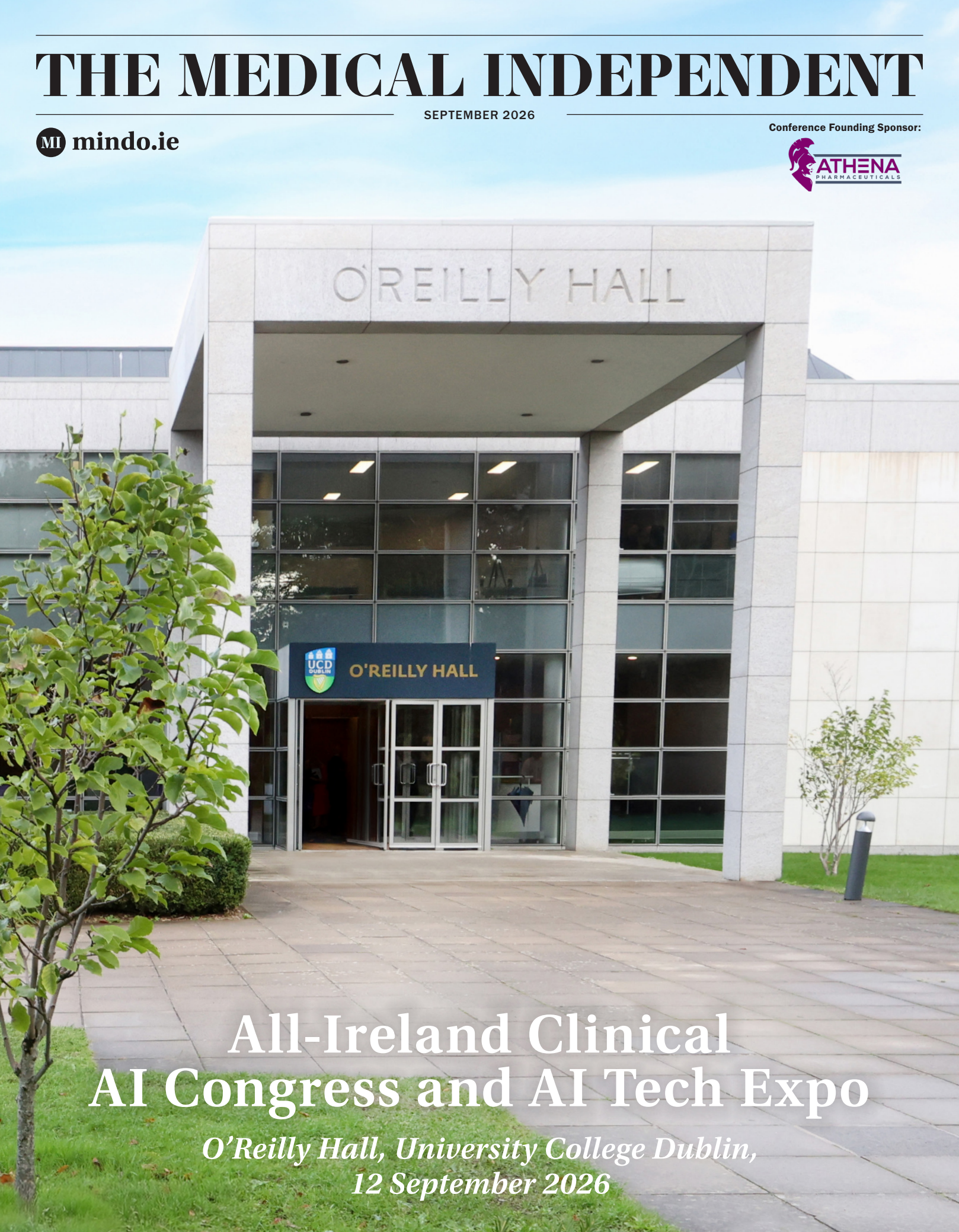
THE MEDICAL INDEPENDENT

SEPTEMBER 2026

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All-Ireland Clinical AI Congress and AI Tech Expo

O'Reilly Hall, University College Dublin, 12 September 2026

Commercial Feature

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Making AI count in healthcare

The recent inaugural All-Ireland Clinical AI [Artificial Intelligence] Congress and AI Tech Expo, hosted by Athena Pharmaceuticals, brought together an exceptional array of policymakers, industry leaders, clinicians, and AI specialists to discuss how AI can be used to handle data, enhance patient care, and ultimately improve outcomes. The Congress, which was attended by 550 delegates, provided expert insights, clinical case studies, primary care perspective, and an international keynote speech on global AI strategy.

A selection of the wide-ranging topics discussed included the HSE AI for Care strategy; digital transformation and AI research; and AI deployment. Throughout the meeting, a number of fascinating panel discussions were held, involving stakeholders from many disciplines.

The Congress was opened by Mr Dave Shanahan, CEO, Athena Pharmaceuticals, who spoke about the need to preserve empathy in an AI-influenced world and the need to "get it right" with AI.

"We certainly didn't get it right with social media," Mr Shanahan told attendees.

"If we went back, we would probably say there is a better way to do social media with our young people. If we are going to do better with AI, it is going to be a 'team sport', involving Government, industry, and academia all working together as never before, because we all have a stake in this. But we must also always be cognisant that we have to always be in control of the technology."

Mr Shanahan introduced Mr Derek Tierney, Secretary General, Departm ent of Health. "Our health service is changing rapidly, we all know this," Mr Tierney told the conference.

"Demand is rising, care is more complex, staff are under pressure, and ultimately resources must be used well… technology will not solve these challenges alone, but it can help."



Dr Amrita Kumar, *Consultant Radiologist HealthBay, Medica Group, UAE*; Xxxxxx xxxxxxx, Prof Patricia Maguire and Dave Shanahan

He added that AI technology should be designed around people's practical needs and that should be translated into better outcomes for patients.

"Used well, AI can reduce administration, support documentation, organise information, and identify patterns in complex data. It can give clinicians something valuable, and that's time… the objective is not to put technology between the clinician and the patient," he continued.

"I believe it is to use technology to create more space for the relationship between them."

Mr Tierney told the Congress that AI should support clinical judgement and accountability, rather than replacing them.

"The future of healthcare will be more digital and data-enabled; therefore, our mission should be that it also becomes more connected, more responsive, and more compassionate, and, ultimately, more human. This is the challenge before us, but it's also an opportunity."

Used well, AI can reduce administration, support documentation, organise information, and identify patterns in complex data.

Future-proofing AI across the HSE

The All-Ireland Clinical AI Congress and AI Tech Expo heard from Mr Damien McCallion, HSE Deputy Chief Executive Officer and Chief Technology and Transformation Officer. Mr McCallion provided an overview of how the HSE is planning for AI across the Irish health system and also gave the attendees an update on the introduction of the national electronic health record.

Mr McCallion presented an example of how AI can be proane to error, particularly when people seek information online, and how references are often conspicuously absent from AI's responses to questions. "AI has a lot of strengths, but we also have to use it cautiously," he told the Congress.

He outlined the four main pillars of the HSE AI for Care strategy: Clinical care; operations; research and innovation; and public population health.

Mr McCallion provided examples of where AI, when used appropriately, can enhance primary care consultations. This included patients with complex mental health needs, as it gives GPs quality time to listen to the patients, while AI captures the necessary notes.



Mr Damien McCallion, *HSE Deputy Chief Executive Officer and Chief Technology and Transformation Officer*

"Documentation bedevils our system," Mr McCallion told the Congress. "In parallel with investing in the new tools in the laboratory, in radiology and in our electronic health records, we have to make sure that we use AI sensibly to minimise the impact on people on the frontlines."

He concluded: "Why are we doing this? It is ultimately for patients – to make their experience better, to give them tools so they can interact with us in a better way as a system – more efficiently and to give them more confidence in how they work with us.

"Many patients are very frustrated," he continued. "When they get into the system, the general feedback is that the system works well. The issue is to engage with them – 'Where am I on the waiting list?' 'Why am I getting two appointments for the hospital that are 10 miles apart on the same day and I'm travelling from Donegal?'"

These are some of the uncertainties that currently often frustrate patients, he said. "So it's about using the technology to improve the patient experience and to give them guidance… and also for our staff, to ensure that they have more time to spend with patients and deliver care. That's where the technology should ultimately help… and to provide assistance to clinicians in making decisions, rather than replacing them."

The presentation was followed by a lively panel discussion, which featured the session's speakers and Prof Patricia Maguire, Professor of Biochemistry and Director of the Institute for Discovery, University College Dublin (UCD), and Prof Peter Doran, Professor of Clinical Trials and Director of the UCD Clinical Research Centre. The session was rounded off with a presentation by Mr Liam Tremble (PhD), Principal Scientist, Poolbeg Pharma.

AI deployments in clinical practice

The All-Ireland Clinical AI Congress and AI Tech Expo heard from Dr Amrita Kumar, Consultant Radiologist HealthBay, Medica Group, UAE, who delivered a fascinating talk titled 'Lessons learned in AI deployment'. She is a Consultant Radiologist specialising in breast imaging and is also Clinical Lead at Medica UK. Dr Kumar also works in clinics in Dubai, where she was asked to implement mammogram AI into clinics' breast screening service in the region.

She described three 'real-world'



Dr Amrita Kumar, *Consultant Radiologist HealthBay, Medica Group, UAE*

deployments of AI and illustrated the disparity between how an algorithm works on paper, versus deployment in a real-world service. "The algorithm is the easy part – deploying it is the hard part," Dr Kumar told attendees.

"We have spent a decade asking the question, 'Does AI work?' The models work, but the hard question, and the one that decides whether a patient actually benefits, is whether you can deploy it safely and govern it."

Dr Kumar pointed out that Ireland has

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approximately half the median amount of radiologists compared to our European counterparts, at 6.5 per 100,000 people, and demand for acute out-of-hours imaging is rising sharply. "You cannot simply recruit your way out of that," she said. "That is why AI matters."

The issue also becomes primarily a patient safety one, rather than solely a question of efficiency.

Dr Kumar gave the attendees a synopsis of three deployments of different types of AI, one of which is currently in use in Ireland.

From these examples, she outlined some lessons learned to the Congress.

"Lesson one: AI deployment is a service transformation, not a software one," she said. "Also, technology alone does not reduce the waiting list. You don't treat AI as a purchase that just sits on a shelf; it is a service transformation and if you treat it like that, it really delivers. Lesson two: Validate locally, because your own evidence will always beat the vendor claims."

She continued: "Lesson three: Be honest about what the evidence does and does not show… the lesson is not that we failed to measure something; the lesson is to build the measurement from the start, before you deploy, because afterwards is too late. Lesson four: Make the human accountable and design human factors… the AI does not decide the final report. That is deliberate, and it is what regulators expect right now.

"I think lesson five is the most important," Dr Kumar told the Congress. "AI is a 'team sport'. Every statistic I have shown to you exists because of a multidisciplinary team. Clinical specialists, radiographers, AI programme managers, data teams, operations, bookings, clinical governance support, all working alongside the vendor… and I say this to the policy-makers in the room: State AI adoption is not a piece of software you buy; it is the organisational ability that you build in."

The need for appropriate governance in AI was a theme that ran through the Congress.

Dr Kumar told attendees that her advice is to match governance to the risk exposure.

"One size does not fit all, because the risk is generally very different at any stage," she said.

"I want you to think about what all parts of this room could be doing to get AI deployment right in this shared journey," Dr Kumar concluded. "To the policymakers: Fund the validation pathways and share standards that let firms validate these tools properly. To the vendors: Bring us evidence, not claims, and help your healthcare providers to validate locally to generate their own evidence.

"To my fellow clinicians: Own the governance and keep clinical judgement at the centre of it. And to the academics: Build the methods for real-world post-market evidence, because that is the evidence that actually governs deployment. As I said, the algorithm is the easy part, but together we can get the deployment right."

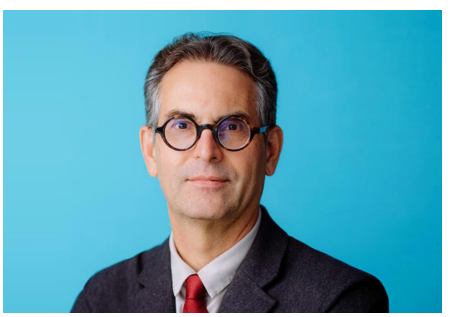
Dr Kumar's talk was followed by a lively and informative panel discussion. The panel held a practical discussion on the lessons learned from deploying AI in secondary care, with examples from diagnostic imaging, breast screening, prostate cancer pathways, prescribing, and acute hospital systems. The panel explored workflow integration, clinical governance, implementation barriers and the potential for AI to improve earlier diagnosis and patient outcomes.

The global view on AI strategy deployment

The keynote speaker at the inaugural All-Ireland Clinical AI Congress and AI Tech Expo was Dr John Halamka, President, Mayo Clinic Platform. The platform is the Mayo Clinic's healthcare innovation and technology ecosystem.

Dr Halamka delivered a talk titled 'Harnessing the power of platform thinking to transform healthcare'.

Dr Halamka provided a brief overview of how AI is utilised in the Mayo Clinic and discussed the role of AI in reshaping healthcare systems globally, and what opportunities it may present for Ireland. In common with many other speakers at the Congress, Dr Halamka stressed the importance of good governance and described how this works at the Mayo Clinic.



Dr John Halamka, *President, Mayo Clinic*

Dr Halamka also discussed clinical innovations from the Mayo Clinic, including a wide array of clinical algorithms. "The challenge is to figure out which one of these innovations is going to solve your clinical or business problem," he said.

"There are a thousand algorithms in radiology for pancreatic cancer, renal cell carcinoma, pleural effusion, and so on, so it's a challenge to figure out what to buy and how to use it.

"This constellation of capabilities is there," Dr Halamka told the Congress.

"But we are starting to see this front-ended with AI agents. You say, 'here's what I want to do,' and the AI agent goes and finds the right tool, it runs the tool, and brings the

results back to you."

He stressed the importance of all stakeholders in healthcare, including patients, to be clear about what they want from AI before they employ it. He also provided some clinical examples of how AI is used in the Mayo Clinic in the areas of atrial fibrillation and other illnesses.

Dr Halamka discussed how AI can be used to predict the development of disease in these patients. It can also be used to predict the survival for a patient with glioblastoma, he added. He also highlighted the potential for AI innovation in a patient's home and how this might free up precious nursing staff resources.

"This set of technologies is empowering," Dr Halamka told the attendees. "It is augmenting human capabilities. It will enable us to practise at the top of our licence with the right patients in the right settings. There are good ways to control its safety and its quality, and most importantly, we all need to work together to share our experiences and best practices."

He concluded: "I probably have about 30 years left on the planet and the way I would like to leave something behind is by convening all of us, and sharing our AI innovations for the benefit of patients, and I hope you will join me in that."

Dr Halamka's presentation was followed by the AI Innovation Poster Exhibition Bursary Award, which selected the most outstanding poster showcasing local AI innovation. The exhibition saw an extremely high standard of entries amounting to more than 20 posters.

AI on the frontline of primary care focus

The All-Ireland Clinical AI Congress and AI Tech Expo featured a number of in-depth panel discussions. They included topics such as 'Beyond the algorithm: The human side of AI adoption', which explored the human, organisational, and cultural dimensions of AI adoption. This panel talked about how healthcare organisations can build trusted, integrated AI workflows supported by strong data foundations, clinical leadership, governance, and workforce engagement.

This was followed by another engaging panel discussion titled 'From evidence to routine practice', which involved clinician-led adoption of AI, the evidence-base behind imaging AI, and the leadership and mindset required for AI adoption.

The final session of the Congress was dedicated to primary care. This session heard an informative and thought-provoking presentation by Prof David Lowe, Clinical Director of Innovation, University of Glasgow, and Deputy Director of CERSI-AI.

"It's important to think about how AI integrates into the workflow, and how we measure this," Prof Lowe told the Congress.

It should be integrated into the electronic patient record and the risk of "copy and paste" errors should be considered, he added.



Prof David Lowe, *Clinical Director of Innovation, University of Glasgow, and Deputy Director of CERSI-AI*

"You should ensure that you have a dashboard of metrics, such as reliability, error rate, correction rate, and uptime, and these should be automatically measured," Prof Lowe said.

"It's also important to identify the many opportunities for AI.

"These could include high-volume, structured consultations, where the benefit of using the technology will support the workflow. You should also build the incident route before you need it. This includes post-market surveillance, with a working path for clinical governance reporting designed for chained systems rather than isolated components – be clear on who is the data controller, or is that responsibility shared?

Prof Lowe's presentation was followed by a panel discussion titled 'AI at the frontline'. This exchange of ideas and opinions was a focused discussion on how AI reaches patients through community pharmacies and general practice in Ireland.

The panel discussed dispensing accuracy, drug interaction alerts, patient adherence, the practicalities of integrating AI into a busy primary care setting, and the patient voice in AI integration.

Ms Ailis Reape, Boots Ireland, spoke about how AI is reshaping the role of the pharmacist, from dispensing accuracy and drug interaction alerts to patient adherence tools. Dr Donal Bailey, Chief Medical Officer, Centric Health and Managing Director, Care-Connect, discussed integrating AI into primary care, and Ms Mary Quinn, Irish Cancer Society, provided the patient perspective.

The final panel discussion of the day was titled 'Foundations and clinical workflow' and included Ms Helen Waters, Executive Vice-President and Chief Operations Officer, MEDITECH; Mr Mitchell O'Gorman, Chief Executive Officer, X Wave; and Prof David Lowe. In another compelling discussion, the panel discussed using the electronic health record as a foundation for AI, next-generation clinical support, and ambient voice technology in urgent and emergency care.



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