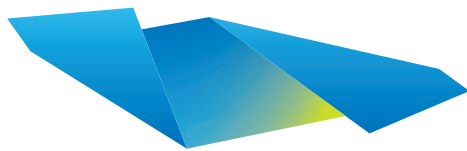
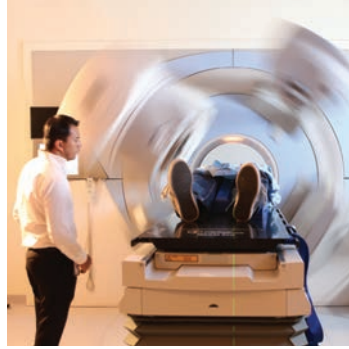
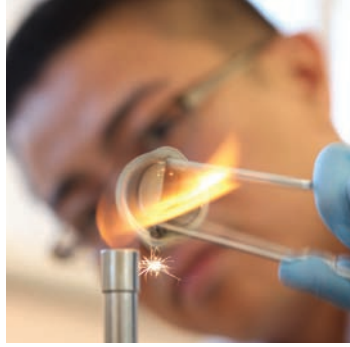




2012
Annual Report



Ingham Institute
Applied Medical Research

Creating hope through health research

SUPPORT RESEARCH. CREATE HOPE.

ISBN 978 1 74079 150 2

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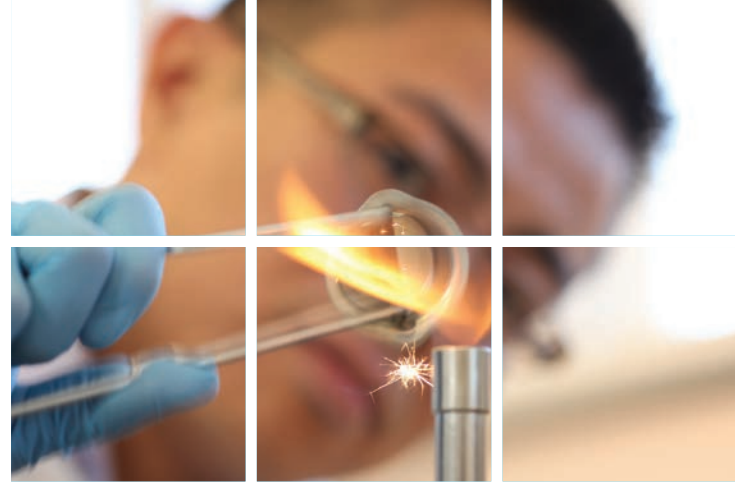
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1996 - 2008

22 JANUARY 96

The Ingham Institute's Founding Benefactors, Jack and Bob Ingham of Inghams Enterprises, send a letter of commitment to establish and support the Ingham Institute. This marked the beginning of their continuous generous support year after year.



9 JULY 96

The State Government makes a commitment to match the founding funds donated by Jack and Bob Ingham dollar for dollar.



18 FEBRUARY 97

The Institute is incorporated under the control of the Sydney South Western Area Health Service (SSWAHS).



14 FEBRUARY 08

The Institute appoints its Board Members including Terry Goldacre (Chairman), Dr Teresa Anderson, Amanda Larkin, Glenda Cleaver, Prof Peter Smith, Arnold Vitocco, Mike Wallace, David Hazlett, Prof Neville Yeomans and John Hexton.



11 DECEMBER 08

The Institute changes its Constitution to become an independent legal entity.



2009

13 JANUARY 09

The Ingham Institute team drive to Canberra to submit an application to the Federal Government's Health and Hospital Fund for \$46.9M to build a new research precinct linking the Institute with Liverpool Hospital.



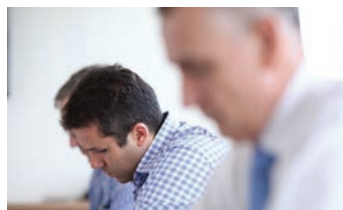
13 MARCH 09

A key turning point, it is announced that the Ingham Institute has been successful in its application for \$46.9M from the Federal Government.



16 APRIL 09

The Institute appoints additional Board Members including Jim Marsden, Tim Bryan, Tony Perich and Debbie Killian.



24 APRIL 09

A Project Manager (Capital Insight Pty. Ltd.) is appointed for the construction of the Institute's new research building.

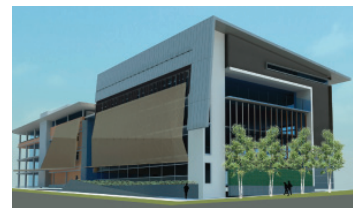
1 AUGUST 09

Bob Ingham commits to further funding of \$3M over three years, while Lady Mary Fairfax commits \$450K over three years.



2 NOVEMBER 09

Architects (McConnel Smith and Johnson) appointed.



2010

15 JANUARY 10

The Minister for Health Nicola Roxon formally signs the Commonwealth Funding Agreement.



1 FEBRUARY 10

Liverpool Hospital's Health Services Building is refurbished with state of the art laboratories, laying the foundation to begin to house Ingham Institute researchers.



13 APRIL 10

A billboard is erected to mark the construction site of the new building. Deputy Prime Minister Julia Gillard and Premier of NSW Kristina Keneally turn the first sod at the site, officially opening it.

30 JUNE 12

Ingham Institute research building completed.



24 JULY 12

Research groups begin moving into new building.



10 AUGUST 12

Founding Benefactor Mr Bob Ingham AO donates \$1 million at the Narellan Rotary Ball.



10 AUGUST 12

The Ingham Institute receives \$100k from Lady (Mary) Fairfax AC, OBE.



30 AUGUST 12

CHETRE's MECSH Program rolls out to the UK.



23 OCTOBER 12

Official Launch and Opening of Ingham Institute by the Prime Minister of Australia, the Hon Julia Gillard MP.



14 APRIL 10

The Institute submits its first milestone report to the Federal Government.



26 MAY 10

An Expression of Interest is issued to building contractors.



17 JUNE 10

Preferred contractors are shortlisted.



17 AUGUST 10

Tenders close for contractors.



1 SEPTEMBER 10

Ingham Institute researchers start to move into new laboratory space in the Health Services Building.



23 SEPTEMBER 10

Building contract awarded to Richard Crookes Construction.



1 OCTOBER 10

Demolition and site clearance commences.

2011

5 JANUARY 11

Construction of the Institute's new main building begins.



14 APRIL 11

The Institute's new identity is launched: The Ingham Institute for Applied Medical Research.



19 JULY 11

The Institute's South West Sydney Translational Cancer Research Unit (SWSTCRU) wins a prestigious \$1.8 million grant from the Cancer Institute NSW.



24 AUGUST 11

The Ingham Institute's documentary 'The Journey' premieres.





lyham institute

lyham institute



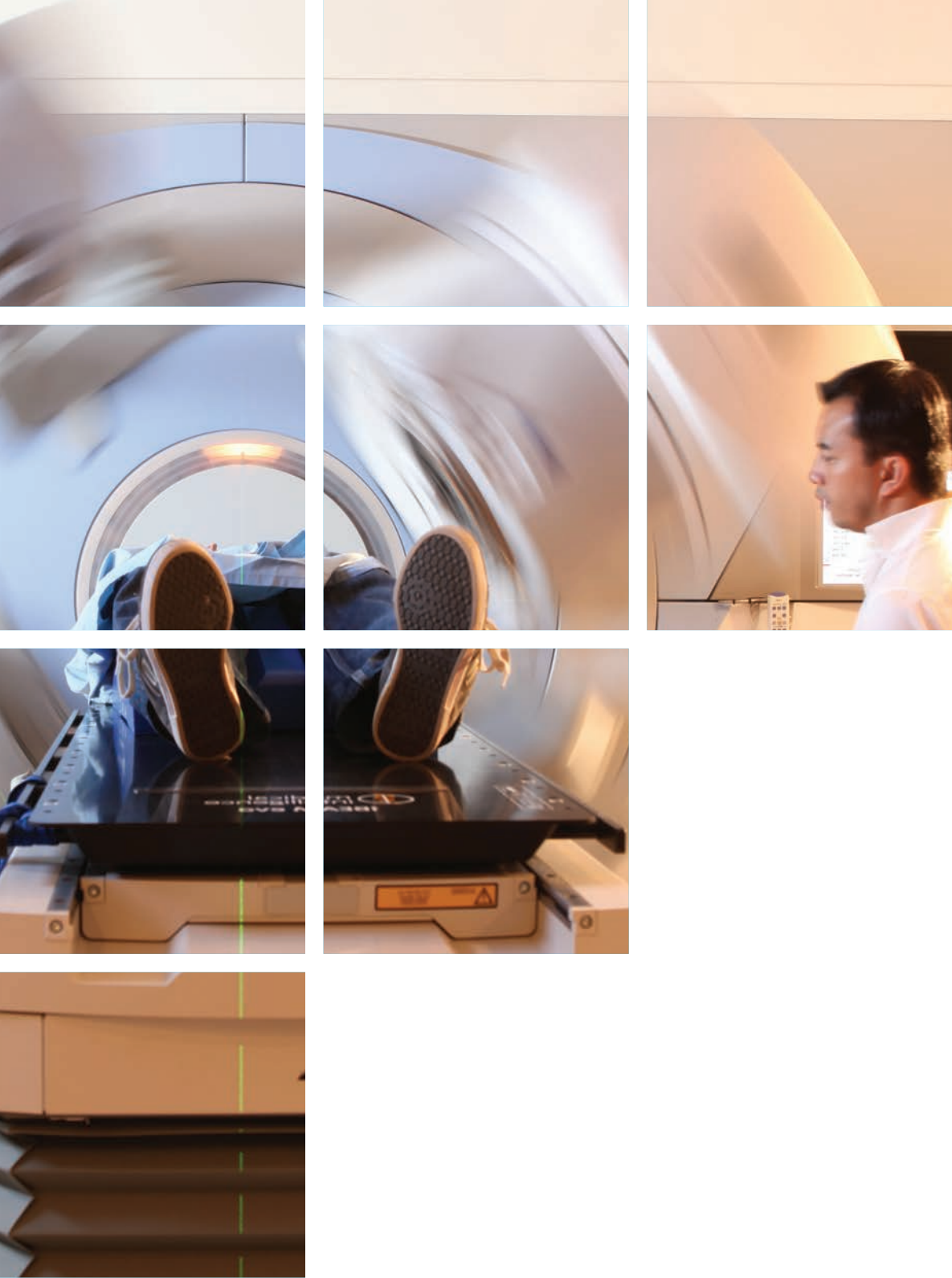
Research is about finding answers to the unknown...

Health and Medical Research focuses on improving the outcomes for people living with disease.

The Ingham Institute is about translating these research findings to real-life health outcomes and improving the overall quality of life for those affected and living with devastating diseases.

And this is our story...

Ingham Institute 2012 Research Annual Report



PREAMBLE



OUR FACILITIES

Phase One: Research Facility

2012 was a triumphant year for the Ingham Institute for Applied Medical Research as it marked the completion of its Australian Government funded research precinct which is located on the grounds of Liverpool Hospital, the largest tertiary referral hospital in Australia.

The research precinct consists of a state of the art research building, Research Bunker to house the MRI Linear Accelerator (MRI-Linac) for research into cancer therapy and a high-tech teaching and training facility called the Clinical Skills & Simulation Centre.

Incorporating both wet and dry research areas, the Ingham Institute research building boasts the latest equipment, laboratories and facilities. The basement level entails an Biological Resources Unit which gives researchers the opportunity to develop improved and better translational research practices.

The custom built facility extends to accommodate 200 researchers and serves as the hub for innovation and medical breakthroughs in the South West of Sydney. In August 2012, 22 research centres relocated to the Ingham Institute and, more importantly, 160 health and medical researchers, who are dedicated to supporting the efforts of the Ingham Institute.





Phase Two: Research Bunker

One of three in the world, the Ingham Institute will be the first medical research institute in Australia to acquire an MRI-Linac, an MRI scanner linked with a Linear accelerator, for research into cancer therapy.

Set for launch by mid- 2014, the Australian Government invested \$9 million towards the procurement of a MRI-Linac designed to improve the health and welfare of Australia's growing number of cancer patients.

Professor Paul Keall leads the Translational Cancer Research which resulted in a further injection of \$5.7 million from the National Health and Medical Research Council (NHMRC) towards the purchase of the MRI-Linac.

Described as a state of the art piece of technology, the MRI-Linac is set to redefine cancer treatment in Australia by accurately locating tumours during a radiation therapy treatment session in real time, offering greater potential of improving patient cancer treatment outcomes.

Phase Three: Clinical Skills & Simulation Centre

The Ingham Institute will officially open the doors to its brand new Clinical Skills & Simulation Centre on the grounds of Liverpool Hospital in January 2013.

The high-tech Centre will provide a state of the art simulated training ground for clinicians, nurses, students and allied health professionals that which supports the translation of research and policy into practice.

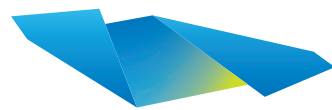




OUR ORGANISATION

OUR MISSION

At the Ingham Institute, our Mission is to challenge the understanding and treatment of existing medical conditions and processes and by doing so radically transform community health outcomes for the better.



Ingham Institute
Applied Medical Research

OUR VALUES

We abide by a commonly held set of values that determine our culture. We work to ensure our commitment to research excellence is matched by a pragmatic focus on the quantifiable improvement of health outcomes:

REAL: We are down to earth and grounded in the real world. We demonstrate practical integrity in everything we do and say.

EXCELLENCE: Measured by our ability to be a true world-class leader in translational research that benefits the community through practical application.

INCLUSION: We work collaboratively with each other, are transparent and open to the outside world, and welcoming to the local community who are a crucial partner in our ongoing success.

ABOUT THE INGHAM INSTITUTE

The Ingham Institute for Applied Medical Research is at the forefront of leading health and medical researchers to set their research agendas and assist those to achieve their goals.

The Ingham Institute drives a unique collaboration between the South Western Sydney Local Health District (SWSLHD), the University of New South Wales (UNSW) and the University of Western Sydney (UWS). These strong synergies allow for wider scope of studies and improved access to better resources.

The Ingham Institute is governed by an independent Board of Directors, currently chaired by Mr Terry Goldacre.

Welcome to our Annual Report highlighting our studies and achievements for the 2012 calendar year, January through to December.



It gives me great pleasure to provide you with another edition of our Annual Report. This report is a reflection of the achievements and studies of our seven research streams and their studies and achievements over the calendar year.

Ms Lisa Wilkinson, Channel 9 Today Show Co-Host joined the Ingham Institute in her role as Ambassador and one of the faces of health and medical research in the South West of Sydney. The Board of Directors were thankful and proud that someone of Lisa's stature and talent has aligned themselves with the Institute to help us raise its profile.

2012 represents a time of great change and growth for the Ingham Institute with many key developments taking fruition. The year marked the completion of the Ingham Institute's Australian Government funded research precinct. The new health and medical research facility strengthens the Institute's link between Liverpool Hospital, the South Western Sydney Local Health District (SWSLHD) and two partner Universities, UNSW and UWS. The new research precinct was a result of funding from the Australian Government. Building contractor Richard Crookes was engaged to complete the extensive project and I am most pleased to report that construction of our new research facility was completed on time and within budget.

August 2012 marked the move-in date for the Ingham Institute team and affiliated 200 researchers who are dedicated to performing health and medical research towards the Ingham Institute's common goal of creating hope through health research. The move into Ingham Institute's state of the art research facility which houses purpose built laboratories and the best of the best scientific equipment will increase research capacity and encourage collaboration between groups to improve translational research outcomes.

The Prime Minister of Australia, the Hon Julia Gillard MP, officially opened the Ingham Institute at the October 23 event as part of the grand-scale official opening. Monarch butterflies were released by the Board and key VIP guests symbolising hope for the future of research and the health and wellbeing of South West Sydney and wider Australia.

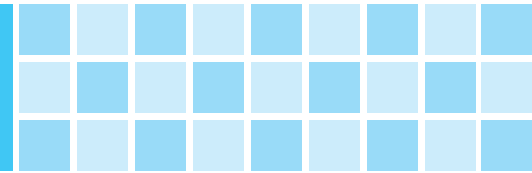
The Ingham Institute again extends its thanks to Narellan Rotary Club for hosting its Annual 'A Night to Remember' Charity Ball. At the 13 August 2012 event, the Ingham Institute was presented with the largest donation of the night. Ingham Institute Founding Benefactor Bob Ingham AO pledged his support by donating a further \$1 million to the Institute. A special thank you to all our donors and supporters who have continued to show their support of the Ingham Institute.

The Board has continued to actively support the Ingham Institute with great attendance at all general meetings. Mr John Ingham also joined the Board of Directors as an Alternate Director in March, a valuable addition to our dedicated and passionate team.

Further, our partners, the SWSLHD, UNSW and UWS have greatly contributed to the shaping of the Ingham Institute and contributed to the research achievements featured in this report.

The Institute thanks our supporters, staff, researchers and donors who together play a vital role in the success of our research programs, promoting the efforts of our research centres as together we unite to create hope for those affected and living with disease.

Terry Goldacre
Chairman
Ingham Institute for Applied Medical Research



2012 has proven to be a signature year for the Ingham Institute as building works to Ingham Institute's multi-million dollar, state of the art research facility were finally completed and researchers across almost thirty research groups moved to their new home.

Amidst all the change, the Ingham Institute has continued to actively participate in research programs and multi-centre clinical trials to further embrace opportunities to grow and prosper our research portfolio. This includes encouraging collaborations between research centres and fostering a strong commitment to our research centres.

Our Annual Report marks the importance of health and medical research in the community and the important role the Ingham Institute plays in the wider community. I am most pleased to report on a number of important initiatives underway as well as key discoveries and ground-breaking results. The Ingham Institute's Translational Cancer Research Unit was awarded \$9 million towards the establishment of an Australian first Research Bunker containing the MRI-Linear Accelerator, a cancer therapy research project which is set to place the Ingham Institute on the world map of improved cancer treatments.

We have seen some key appointments across our research streams as well as the purchase of high tech equipment to accommodate our purpose built laboratories and Biological Resources Unit.

Dr Norbert Kienzle, Program Manager was appointed to establish the Translational Cancer Research Unit and bring together cancer research centres to underline our efforts to generate practice-improving research and its more rapid adoption for improved cancer outcomes.

CHETRE's Maternal Early Childhood Sustained Home-visiting (MECSH) Program was licensed by the University of NSW. The MECSH Program, including training and fidelity monitoring, was purchased by three sites in the UK. MECSH-UK is to be implemented with health visitors in North Essex, South Essex and Plymouth. The rollout of the MECSH programs confirms the stature and quality of the group's ground breaking and important childhood studies.

The Ingham Institute continues to engage and foster a strong collaborative culture and this is evident from our links worldwide, with our research groups committed to a number of internationally renowned research studies.

We have also continued to build on our research successes by attracting further funding, more awards and prizes and recognition of our dedicated researchers. I am pleased to confirm our researchers have managed to sustain excellent research results building on last year's achievements. We can all be proud of these results, we work together to achieve the common goal of improving health outcomes in the South West.

Please take the time to read this report and acknowledge and appreciate the incredible efforts of our researchers and research groups.

Professor Michael Barton OAM
Research Director
Ingham Institute for Applied Medical Research



2012 was an important year for the Ingham Institute as the doors to our state-of-the-art research facility were officially opened by the Prime Minister of Australia, the Hon Julia Gillard MP. More than 200 guests including the Ingham family, State and Federal Members of Parliament, Government Officials, Corporate Supporters and members of the public gathered to see the unveiling of the Institute made possible thanks to funding from the Australian Government's Health and Hospitals fund in 2009. The year proved to be bigger and better incorporating times of great change and development. Not only were building works completed but almost 30 research groups moved into the new state-of-the-art research facility and became affiliated with the Institute, now known as the Hub of innovation in the South West of Sydney.

Research groups have continued to sustain competitive grant income from both the National Health and Medical Research Council and Australian Research Council. A total of 56 grants were received by the Institute during the year with 18 of these from category one sources.

It is pleasing to see new achievements from our research groups as well as our operational mission and values being applied in the day to day practices. New collaborations between research groups have been formed and the services of our recently established Biostatistical Services Unit have been utilised by our researchers. A series of workshops and seminars were conducted by the Unit to assist

not only novel researchers but all researchers, with the preparation of research project design step by step.

In addition, the Institute was awarded a number of equipment grants to accommodate our growing research facility. The Translational Cancer Research Unit is the proud owner of the Circulating Tumour Cells (CTC) machine which arrived at our doors in March 2013, and is the first device of its kind in NSW. The technology is used for vital cancer research studies by detecting CTCs in the bloodstream of cancer patients. This new technology will lead to a more personalised approach to treating cancer rather than applying a 'one size fits all' approach.

During 2012, the development of the Ingham Institute's Clinical Skills & Simulation Centre continued. The high-tech medical training centre built on the grounds of Liverpool Hospital will provide next generation medical, nursing and allied health students, trainees and practitioners with a simulated learning environment which will boast some of the most high-level simulation equipment, the centre's 'stand-out' high-fidelity robotic patient mannequin 'SimMan' and two of Australia's few fully simulated operating theatres to enable 'mock' operations.

I thank all Ingham Institute staff and researchers for their tireless efforts and congratulate them on their achievements outlined in the following pages and look forward to continued research success from our team. Finally, I would like to acknowledge our partners, namely the SWSLHD, the University of New South Wales and the University of Western Sydney, who have all contributed to this report and assisted the Ingham Institute to translate its research outcomes into benefits for patients.

Associate Professor Greg Kaplan
Chief Operating Officer
Ingham Institute



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OUR AWARDS

Antibiotic Resistance and Mobile Elements Group (ARMEG)

- Björn Espedido: achieved the Ingham Institute Research & Teaching Showcase Poster Prize.

Centre for Applied Nursing Research

- Maree Johnson: Named Finalist in the Australian Educational Publishing Awards 2012 in the Tertiary Education category; Research Methods in Nursing and Midwifery: Pathways to evidence-based practice, Melbourne: Oxford University Press.
- Samuel Lapkin: Best Research Higher Degree Student Publication Award, Faculty of Health, University of Newcastle.

Centre for Health Equity Training Research & Evaluation

- Emma Friesen: Second Prize in Soft Technology Award from the Australian Rehabilitation and Assistive Technology Association (ARATA), for work into Building Capacity in Primary and Community Health.

Centre for Medical Radiation Physics, University of Wollongong

- K Loo: Winner of the '3 minute PhD BrachyView Thesis Presentation 2012', University of Wollongong.
- Antony Espinoza: Winner of Jordanov's Award and Phelps Education Grant Award from IEEE NPSS for Magic Plate for HDR Brachytherapy QA Instrument.

Centre for Research, Evidence Management & Surveillance

- Bin Jalaludin: Health Built Environments Program in which REMS is an active collaborator received the Cutting Edge Research and Teaching Award from the Planning Institute for Australia, NSW Division.



Collaboration for Cancer Outcomes Research and Evaluation (CCORE)

- **Michael Barton:** 2012 Medical Oncology Group of Australia (MOGA)-Novartis Oncology Cancer Achievement Award 2012. Presented in Brisbane, Friday 10 August, 2012. Nominated for Professor Barton's recognised research activities, valued commitment to MOGA research projects such as the Workforce Study and radiation oncology workforce issues, dedication to improving the training of young medical oncologists and important work influencing policy at a governmental level.
- **Shalini Vinod & Jesmin Shafiq:** Best of the Best Poster Presentation "Timelines in Lung Cancer Diagnosis and Treatment at South West Sydney" at the 39th Annual Scientific Meeting of the Clinical Oncology Society of Australia (COSA), Brisbane, 13-15 November 2012.
- **Shalini Vinod & Jesmin Shafiq:** Awarded Paper of the Year 2012 by UNSW Clinical School. Do Multidisciplinary Teams Make a Difference in the Management of Lung Cancer? *Cancer* 2011;117:5112-5120.

Palliative Care

- **Meera Agar:** Received the Early Career Researcher Award from the European Association for Palliative Care.

Pancreatic Cancer Research Group

- **Minoti Apte:** Recipient of the Frank Brooks Memorial Lecture awarded by the American Pancreatic Association (APA), November, 2012.
- **Sri Pothula:** PhD student: Received the Translational Cancer Research Unit Scholarship.

Translational Cancer Research Group - Psycho-Oncology

- **Afaf Girgis:** Received Australia's first Psycho-Oncology Award at the Clinical Oncology Society of Australia conference in November, 2012.
- **Sylvie Lambert:** 14th World Congress Travel Grant from the Clinical Oncology Society of Australia / International Psycho-Oncology Society (IPOS) conference.
- **Janelle Levesque:** PhD awarded from Charles Sturt University.

Whitlam Orthopaedic Research Centre WORC

- **Ian Harris:** Received Research Award from the Australian Orthopaedic Association.



Terry Goldacre, Chairman

Terry joined the Institute Board in 2008. He is currently the Managing Director of Harrington Estates (NSW) Pty Ltd, which since 1993 has been responsible for the development of the leading residential estate Harrington Park. Prior to this, he held executive positions in the civil engineering and land development industries. He is past president of the Urban Development Institute of Australia (NSW Division) and is a founding trustee of the Harrington Park Foundation.



Dr Teresa Anderson

Dr Teresa Anderson is the Chief Executive of the Sydney Local Health District. Teresa was previously Director of Clinical Operations of the Sydney South West Area Health Service until she took up her current position in January 2011.



Tim Bryan

Tim Bryan is a Chartered Accountant; he is a Senior Client Director and Managing Partner of Kelly+Partners South West Sydney, a financial advisory group based at Campbelltown. Tim is a Founding Director and Chairman of the Finance Committee, Kids of Macarthur Health Foundation; Director and Vice Chairman of the Macarthur Business Enterprise Centre Ltd; and Chairman of St Gregory's College Finance Advisory Committee. Tim has a special interest in research into childhood diseases.



David Hazlett

David Hazlett has lived and worked in the Macarthur area all of his life and is managing director of Cameron Brae Pty Limited a successful family business based in Sydney's South West. Cameron Brae is currently involved in importing and distribution along with property investment and development. David was President of the Liverpool Rotary 1993-1994 and was made a Paul Harris Fellow in 1997. He was previously a committee member of the Health Research Foundation Sydney. He and his family have always supported local charities and organisations.



John Hexton

John Hexton became a Board member in 2008. John has been the Director Corporate Services at Inghams Enterprises Pty Limited since 1987 and has more than 30 years' experience in a wide range of areas within the business including direct responsibility for all financial and legal matters, HR, IT, OHS and property.

John is a Fellow of the Institute of Chartered Accountants, the Institute of Chartered Secretaries and the Institute of Directors. John previously served on the Board of St Patricks College, Campbelltown and was the chairman of the Finance Committee at St Gregory's College, Campbelltown.



Professor Annemarie Hennessy

Professor Annemarie Hennessy is the Dean and Foundation Chair of Medicine at the University of Western Sydney. She was the Director of the Hypertensive Disorders of Pregnancy (HDP) Unit at the Royal Prince Alfred Women and Babies (RPAWB) from 1998 until October 2006 and continues in an honorary capacity within the unit.

Annemarie has a commitment to medical research in her capacities as Dean of the School of Medicine, UWS. She is also the group leader of the Vascular Immunology Group at the Heart Research Institute, Director of the NHMRC Baboon Colony, Chair of the NSW University Physician Training Council and Executive Director of the PEARLS Research Group. Annemarie is a Renal Physician with a research interest in Hypertension and Hypertension in Pregnancy which she has now been working on for 17 years.



John Ingham

John joined the Institute Board as an Alternate Director in March 2012. John Ingham was born at Liverpool and worked at Inghams Enterprises for over 10 years in various positions and was the National Sales and Marketing Manager for a number of years. He is the Managing Director of Upstart Marketing, a Marketing Consultancy focusing on designing and managing web sites for companies large and small for over 15 years.

John attained a Bachelor Of Business Administration (BBA) and is a Graduate of the Australian Institute of Company Directors (GAICD). He was Vice Chairman on the Australian Jockey Club Board and a Board Member till the merger that created the Australian Turf Club. He also served as Chairman of the Australian Stud Book, a director of Racingcorp Pty Ltd and Australian Genetics Testing Pty Ltd.



Debbie Killian

Debbie Killian has 25 years' experience working in health, education, community welfare and local government in greater Western Sydney - much of it in the South West. This has included senior roles in managing community health services; inpatient and outpatient allied health services; and community development programs among a range of other service types. Recently she worked as a consultant to a range of agencies including SSWAHS, providing specialist skills in service planning and management in the areas of health, welfare and education services.

Ms Killian has been a team member on a number research projects including in the areas of primary health care and preventative care. She has a particular interest in ensuring that the health needs of the most vulnerable and marginalised in the community are appropriately considered and our skills further developed to effectively address them.



Amanda Larkin

Amanda Larkin is the Chief Executive of South Western Sydney Local Health District. Previously Amanda worked as the General Manager of Camden and Campbelltown Hospitals and the Queen Victoria Memorial Home. Ms Larkin has a Bachelor of Social Work, Associate Diploma in Environmental Service and is working towards a Masters in Public Health.

Amanda has over 25 years of experience in health service management working in the areas of community health, corporate services and acute service management in small and large health services. She has done extensive work with management committees and boards of non-government organisations including neighbourhood centres, day care centres, short term and accommodation facilities for men and women. Her specific areas of focus are leadership, governance, patient quality and safety and health service planning and development.



Jim Marsden

Jim Marsden is the Senior Partner at Marsdens Law Group. His firm is based primarily at Campbelltown with offices at Liverpool, Camden and the City of Sydney. Jim has a history in a number of areas of community involvement. His past involvement includes Chairman of West Magpie Rugby League, Wests Tigers, the Chamber of Commerce, and board membership of NSW Rugby League and Odyssey House. Jim currently Chairs The Macarthur Club and the Macarthur Development Advisory Group based out of Campbelltown.



Tony Perich

Tony is the Joint Managing Director of Leppington Pastoral Company, Organic Fertilisers [Leppington], the Greenfields Development Company, Arrowvest, Narellan Town Centre and Dart West Development Ltd. Tony has an outstanding record of service within the local community having previously served as President of Narellan Rotary, Chairman of the Fundraising Committee for the Spastic Centre's Growth Point Project in Liverpool, Vice-President of the Narellan Chamber of Commerce and President of the Dairy Research Foundation of the University of Sydney.

In addition Tony is an ongoing member of the Urban Taskforce, the Property Council of Australia and the Urban Development Institute of Australia. He has enormous interest in all areas of medical research and development with a particular interest in cancer research.



A/Professor Anthony M Schembri

Associate Professor Anthony Schembri is the General Manager of Liverpool Hospital and conjoint appointee in the South Western Sydney Clinical School of the Faculty of Medicine at the University of New South Wales. Anthony is a Fellow of the Australian College of Health Service Executives and a member of the Clinical Excellence Commission (CEC) Hand Hygiene Advisory Committee and the Expert Group on Preventing Hospital Acquired Infections and previously appointed to the Clinical Council of the CEC. He previously held a statutory appointment as a Tribunal Member of the NSW Administrative Decisions Tribunal (ADT) and the NSW Appeal Panel of the ADT. Anthony is a Surveyor for the Australian Council on Health Care Standards.

In a volunteer capacity, Anthony has been active working with marginalised young people and was President of Twenty-Ten Youth Services and Official Visitor for the former Community Services Commission advocating for the rights of children in out of home care and Deputy Chairman of the NSW Government Youth Advisory Council. Anthony has held appointment as a National Director for Allied Health Professions Australia and both National Board and State Committee for the Australian Association of Social Workers.



Professor Peter J Smith

Professor Peter Smith is Dean of the Faculty of Medicine of The University of New South Wales. He specialised in cancer medicine and research following study in Australia, USA and Germany. Professor Smith has held senior hospital management posts in Brisbane and Melbourne, senior academic appointments at the Universities of Queensland, Melbourne and Auckland. He has served in a consulting role to government, including as Chair of the recent Inquiry into Vietnam Veterans Cancer Incidence and Mortality. Professor Smith is currently a Director of St Vincent's and Mater Health Sydney, New South Innovations, MedSys Assurance (NZ) and a number of research centres and institutes.



Arnold Vitocco

Arnold Vitocco is a local Macarthur resident and licensed builder. His family's development company, D. Vitocco Constructions Pty Ltd has been building and developing in the Liverpool and Macarthur region since the late 1950s. Notable developments by his family company include the Narellan Town Centre and Gregory Hills, a 2,500-lot subdivision and 43 hectares of employment zone. Arnold is a member of Narellan Chamber of Commerce and is a committee member of the St Gregory's College, Campbelltown. He was a Board Director of the South Western Sydney Area Health Service 1997-2003 and a committee member of the Health Research Foundation Sydney South West, which successfully helped raise \$8 million.



RESEARCH HIGHLIGHTS

Cancer

Completed the development of the following Coping-Together resources to assist couples facing cancer to cope, which will be tested in a randomised controlled trial, with 4-year NHMRC funding:

- Six information booklets addressing the main psychosocial challenges faced by couples after a diagnosis of cancer (e.g. making their treatment decision, self-managing symptoms, supporting each other, managing stress and worry).
- A documentary style DVD incorporating information from health care professionals and couples facing cancer.
- An Interactive Website.

Cardiovascular Disease

Published one of the largest studies on long-term survival in transient ischaemic attack (TIA), providing the first modern-day estimates of relative survival in this important clinical syndrome. The study was the subject of a press release by the American Heart Association, internationally syndicated in both the medical and lay press.

Population Health, Primary Care & Health Service Research

Two social and health intervention programs were licensed by the University of NSW. The Maternal Early Childhood Sustained Home-visiting (MECSH) Program, including training and fidelity monitoring, was purchased by 3 sites in the UK. MECSH-UK is to be implemented with health visitors in North Essex, South Essex and Plymouth.

Early Years

Early Years research groups' flagship project "Maternal and Child Health Outcomes" kicked off. This large data linkage project will have the potential to improve the planning and delivery of effective and dedicated health services for families with young children, ultimately improving their health and developmental prognosis and outcomes.

Infectious & Inflammatory Disease

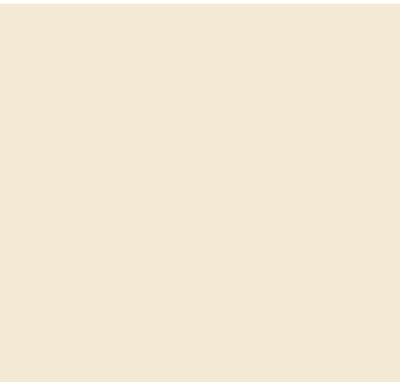
Respiratory Medicine awarded \$2.4 million over four years from the NHMRC for studies into understanding and ameliorating the human health effects of exposure to air pollution; from knowledge to policy and public health practice.

Injury

Initiated Australia's first clinical outcomes registry in arthroplasty, ACORN, Arthroplasty Clinical Outcomes Registry.

Mental Health & Brain Science

Findings from the Separation Anxiety study allow for the early detection starting from the perinatal period and guide attachment based intervention programs targeting these symptoms in the mother which in turn will improve the maternal and infant outcomes.



OUR RESEARCH



CANCER



Stream Leader: **Professor Geoff Delaney**

The Cancer Research Stream encompasses a large number of research groups all working towards finding a cure for the disease and working towards improving cure rates and reducing side effects from treatment from this devastating disease.

The Cancer Research Steering Committee was established in 2011 following a planning day of researchers. This was with the aim of consolidating and increasing cancer research efforts. Since then, this group has been meeting regularly to discuss collaborations and to develop a strategic plan. In 2012, the NSW Cancer Institute provided funding to establish a Translational Cancer Research Unit in South Western Sydney. The aim is to develop projects that are translational from bench to bedside and bedside to bench. Recently the Illawarra and Shoalhaven Local Health District Cancer Service joined our TCRU as their expertise and ours complemented each other. This group, led by Professor Paul De Souza and Dr Norbert Kienzle, has been working on a few large-scale project ideas that will develop a more systematic approach to data capture and

development of analysis strategies that ultimately lead to point-of-care data analysis, collection of tissue and blood, storing of data, analysis of biomarkers and analysis of outcome. This is planned for pilot in colorectal cancer.

The Australian Radiation Research Bunker Project – a project led by Professor Paul Keall, University of Sydney, is a pivotal project set to redefine cancer treatment in Australia. This is an exciting NHMRC-funded program of work to develop a system where an MRI scanner and a radiation linear accelerator work together to allow better targeting of tumours for radiation treatment. This is one of only three such facilities that have been developed internationally and the only one of its type in the Southern Hemisphere. This project is complemented by the MRI simulation project team who are examining and developing the role of MRI in tumor imaging and radiotherapy delivery.

The Psycho-Oncology Research Group, Professor Afaf Girgis and her team are working on the Patient Reported Outcomes Measures for Personalized Therapy (PROMPT) – a project developing IT methods of data collection of patient reported outcomes and for the data to be available at the time the patient is seen. This project is led by Professor Afaf Girgis and is in partnership with the NSW Cancer Institute and the Illawarra and Shoalhaven LHD Cancer Service.

A program of work has been developed to store cancer specimens and use them for molecular research lead by Professor Soon Lee and his team. Professor Raymond Clarke's group are examining detection and prognosis of prostate cancer.

The Pancreatic Cancer Research Unit is investigating biological mechanisms for the development and growth of pancreatic cancer, receiving major NHMRC funding in 2012 for the project – Targeting Microtubules to Overcome Chemoresistance in Pancreatic Cancer.

Clinical Trials also form a substantive percentage of the Institute’s activities. Currently we have 42 clinical trials open for patient’s facilitated by the Oncology Clinical Trials Unit. Currently the Clinical Trials Department is under-developed compared with our needs and we will continue building this group.

The Commonwealth Department of Health and Ageing has invested \$1.5 million into the Institute’s Palliative Care Research Unit for its studies into the improvement of palliative care for people with advanced dementia living in a residential aged care facility. This project commenced in 2012 with the aim of redefining and improving aged care service delivery.

Cancer Leaders received the recognition they deserve with a number of prestigious national and international awards scored at various conferences. Professor Afaf Girgis received the inaugural COSA Award, in recognition of the highest level of contribution to Psycho-Oncology, a vital component of cancer research that investigates the psychological, social and behavioural aspects of cancer – stretching beyond the physical disease itself.

Professor Meera Agar’s work into delirium scored her the Early Career Researcher Award from the European Association for Palliative Care in 2012. Professor Michael Barton (OAM) was awarded the highly prestigious Medical Oncology Group of Australia (MOGA)-Novartis Oncology Cancer Achievement Award at the MOGA Annual Scientific Meeting at the Sofitel Hotel in Brisbane.

CANCER PATHOLOGY AND CELL BIOLOGY RESEARCH GROUP

Group Leader: Professor C. Soon Lee

Affiliated with the University of Western Sydney, the Cancer Pathology and Cell Biology Research Group

headed by Professor Soon Lee had an outstanding year participating in more than \$962,406 in research grant funding. Professor Lee was appointed to the position of Expert Member of the International Study Group on Rectal Cancer Regression based at the



University of Oxford and University of Toronto. The Cancer Pathology and Cell Biology research group seeks to understand biomarkers of prognosis and treatment response in the most common human cancers such as breast, prostate, colorectal and oropharyngeal.

The group is also undertaking research on innovative methods of treatment in animal models that can be subsequently translated to human cancer management such as targeted alpha therapy. The group is also interested in invitro modelling of newly discovered genes or molecules that may be important in the pathogenesis of some of the common human cancer malignancies.

The group collaborates with many national and international groups of its kind with Professor Lee working alongside Dr Michelle Hill from the Diamantina Institute and University of Queensland to investigate the role of caveolin in prostate and breast cancers. Professor Lee is also assessing tumours generated in a murine model with Smg1 haploinsufficiency from the Radiation Biology Group led by Professor Martin Lavin and Dr Tara Roberts from the Queensland Institute of Medical Research.

A/Professor Raymond Clarke, Co-Director is collaborating with Professor Frank Gairdner and Professor Martin Lavin from the Queensland Institute for Medical Research and University of Queensland to study the BMCC1 gene in prostate cancer.

Research Highlights

- In 2013, Professor C Soon Lee is appointed President – Elect (2013-2015) of the International Academy of Pathology.
- Professor Lee was appointed the External Expert Reviewer for the Oxford Biomedical Research Centre at the University of Oxford.
- Variation in histopathological assessment of rectal cancer regression following chemoradiotherapy.
- Susan D’Silva completed her MSc (Hons).
- International recommendations on the histopathological assessment of rectal cancer regression post-chemoradiotherapy.
- Discovered Smg 1 haploinsufficiency predisposes to lung cancer and lymphoma formation and inflammation.
- Increased cytoplasmic β -catenin and γ -catenin expression appears important in early development of breast phyllodes tumours and E-cadherin is required for malignant transformation.
- Determined epithelial E-cadherin expression as an independent prognostic factor for specific survival in breast phyllodes tumour.
- Revealed successful localisation of proteins using quantum dot nanocrystal probes and Immunocytochemical localization by wide field epifluorescence, super-resolution light and immunoelectron microscopy.

CENTRE FOR MEDICAL RADIATION PHYSICS, UNIVERSITY OF WOLLONGONG

Group Leader: Professor Anatoly Rozenfeld

Headed by Professor Rozenfeld, the Centre for Medical Radiation Physics (CMRP) is a largest education and research institution in medical physics in Asia and Pacific. The major research program is concentrating on development of radiation instrumentation for quality assurance in radiation therapy including medical LINACs, hadron therapy and synchrotron MRT, dosimetry in diagnostic radiology, radiation imaging, and radiation transport simulations including in nanoparticles and DNA scale. CMRP is an internationally recognised leader in semiconductor radiation dosimetry and

microdosimetry and its application in IGRT, including MRI LINAC, proton, heavy ion and synchrotron microbeam radiotherapy and space.

Strong Monte Carlo simulations research program is directed to understanding of the synergetic effect of the magnetic and radiation fields on DNA damage, RBE enhancement from nanoparticles in all kinds of radiotherapy and macroscopic dose effects in MRI LINAC.

Strong experimental research program in proton and heavy ion therapy including proton CT, micro- and nano-dosimetry is carried out in conjunction with major international hadron therapy facilities in the USA, Europe and Japan.



Research Highlights

- Two papers published with collaborators are out of four highlighted by Editorial Board (Physics) of IJROBP (Red Journal) as the best medical physics papers in 2012.
- Paper published by CMRP with collaborators is Highlight of 2012 in PMB.
- Prof Anatoly Rozenfeld was an Invited Speaker at the 4th Annual National Cancer Centres Symposium, Melbourne, 25-26 September, 2012.
- CMRP has run International Micro- Mini- Nano-Dosimetry Workshops (MMND 2012) and International Workshop on Prostate Cancer Treatment (IPCT), December, 2012.

- The group's invention "Dual Detector" featured on:
 - ABC Radio, Sandy Aloisi, "Statewide Drive Program", Dec 2012
 - ABC Radio National, Desley Blanch, "Radio Australia Afternoon Program" Dec. 2012
 - WIN TV News, December 2012
 - Illawarra Mercury Newspaper Article, November 2012
 - Campus Review Weekly "Waiving Their Magic Wand", Dec 2012
- Published 18 papers in national and international peer reviewed journals including International Journal of Radiation Biology.
- Key industry partners include Insight Oceania P/L, Varian Oncology Systems P/L, Siemens Australia.
- Collaborates and partners with local, national and international facilities including NASA Space Radiation Laboratory (NSRL), BNL, USA.
- Received funding to the tune of \$1,374,000 for radiation studies for the year.
- Granted Patents:
 - US Patent "Method and Apparatus for Tissue Equivalent Solid State Microdosimetry"
 - US Patent "Dual Detector"
 - Chinese Patent "MOSkin Dosimeter"
- Developed and demonstrated in a phantom Magic Plate for QA in HDR brachytherapy.
- Developed and tested 512 channels high spatial resolution (2mm) movable detectors and new DAQ system for QA in motion adaptive radiotherapy.
- Developed and tested first prototype of BrachyView system for QA in HDR and LDR prostate brachytherapy.
- Demonstrated application of CMRP SOI microdosimeter in Carbon -12 therapy for RBE determination at Heidelberg HIT facility.
- Demonstrated effect of calcification in prostate on dose perturbation from I-125 seeds in permanent implant brachytherapy.
- Demonstrated on 9L gliosarcoma cell experiment dose enhancement effect from new Tantalum Pentoxidenanoparticles irradiated with 10MV X-ray from medical LINAC.

CLINICAL CANCER REGISTRY

Group Leader: Nasreen Kaadan



The SWS & SLHD Clinical Cancer Registry (CCR) is a patient based repository of agreed, notifiable cases of cancer that are diagnosed and/or treated within South Western Sydney Local Health District (SWSLHD) and Sydney Local Health District (SLHD) public facilities from 1st July 2005. Registry activities are carried out in accordance with the Cancer Institute NSW (CINSW) Cancer Plan and the NSW Cancer Information Strategy.

A minimum data set (MDS) for clinical cancer registration is collected for each new case, along with some additional state-wide tumour specific data. The MDS comprises approximately 50 data items which include, but not limited to: Patient demographics, disease diagnosis information, disease staging, initial treatment received, access to care information and quality of care indicators. The SWS & SLHD CCR also collects a number of data set extensions, which can provide more in depth and clinically significant data items for specified tumour groups.

The SWS and SLHD CCR provides a quality cancer information source that can be utilised for improving patient care, service planning and delivery, clinical & epidemiological research and educational purposes.

Clinicians, researchers and data managers can apply to access and use the data held in the SWS&SLHD CCR but will require compliance with ethical and privacy legislation and policies.

Research Highlights

- Karen Duggan presented her poster “Is There A Survival Benefit with the Receipt of Guideline Recommended Therapy for Non-Metastatic NSCLC?” at the Best of the Best Clinical Oncological Society of Australia’s (COSA) 2012 Annual Scientific Meeting in November in Brisbane, QLD.
- The incidence and extent of disease as diagnosis of cancer in the CALD population in SWSLHD was presented at Ingham Institute’s Research Showcase 2012 event in November.
- The group’s six year retrospective review on merkel cell carcinoma in the SWSLHD was published in the Asia Pacific Journal of Clinical Oncology.

COLLABORATION FOR CANCER OUTCOMES RESEARCH AND EVALUATION (CCORE)

Group Leader: Professor Michael Barton OAM



CCORE, established in 1999, is affiliated with the Cancer Therapy Centre, Liverpool Hospital, and is headed by Professor Michael Barton, Research Director. The Liverpool Hospital Cancer Therapy Centre is a tertiary referral centre for the treatment of cancer patients in South Western Sydney. Professor Barton in addition holds the position of Research Director of the Ingham Institute for Applied Medical Research and is Research Director for South West Sydney Local Health District.

CCORE aims to improve cancer outcomes through research and the implementation of best practice measures into routine clinical practice in the treatment of cancer. The CCORE unit has particular expertise in radiotherapy but also has broad interests in all areas of cancer management. Staff members

include radiation oncologists, an epidemiologist, and research project managers.

Research Highlights

- Dr Karen Wong’s successful completion of PhD thesis into the estimation of the optimal number of radiotherapy fractions for cancer patients was awarded in November 2012. The aim of the research was to construct an evidence-based model to estimate the optimal number of radiotherapy fractions per cancer patient and per treatment course, building on the existing optimal radiotherapy utilisation model. These data can provide a benchmark for services delivery and for comparison with actual fractionation in practice. This model can also be applied to predict future radiotherapy workload and hence aid in future radiotherapy services planning in Australia.
- Infrastructure Equipment Grant totalling \$600,000 in conjunction with University of NSW, University of Sydney, University of Wollongong, SWSLHD – for the provision of an adaptable and dedicated linear accelerator for medical radiation research.
- Findings from the Radiotherapy Utilisation in NSW and ACT (2004-06), data linkage and GIS experience study led by Dr Gabriel Gabriel indicated the overall raw radiotherapy utilisation (RTU) rate in NSW and ACT was 32%. After data linkage with Central Cancer Registries, the overall RTU was 24% for unique patients diagnosed and treated within the study period. This is the first study to use data linkage to match radiotherapy treatment data received from all radiotherapy departments to all central cancer registries in NSW and ACT. December 2012 brought to a conclusion the study ‘Review of Radiotherapy Optimal Utilisation rates (2011 -2012)’ M Barton, S Jacob, J Shafiq, K Wong, S Thompson, G Delaney, T Hanna funded by the Commonwealth Dept. of Health and Ageing which updated a study by CCORE during 2001 – 2003 into optimal radiotherapy utilisation for all cancers in Australia. The latest study aimed to review the evidence to determine a contemporary position in regard to the optimal proportion of new cancers that would benefit from radiotherapy as part of their treatment plan. This study will set the benchmark for the delivery of radiotherapy services in Australia and internationally for the next decade.

GASTRO – INTESTINAL VIRAL ONCOLOGY RESEARCH GROUP

Group Leader: Professor Shan Rajendra

Human Papilloma Virus (HPV) and Barrett's Oesophagus / Oesophageal Adenocarcinoma are the core interests of the Gastro-Intestinal Viral Oncology Group led by Professor Rajendra. HPV has been associated with oesophageal squamous cell carcinomas and oropharyngeal tumors. The potential role of HPV in Barrett's esophagus/neoplasia is unclear. The few previous investigations of HPV and Barrett's esophagus/esophageal adenocarcinoma have produced either negative data, positive results of doubtful clinical/etiological significance or detected only low risk HPV types without evidence of biological activity.

Recently, the group reported for the first time that transcriptionally active high-risk HPV was strongly associated with Barrett's dysplasia and esophageal adenocarcinoma. HPV was detected only in a minority of patients with Barrett's metaplasia and controls and was largely biologically inactive. Viral infections in the esophagus were focal, i.e. detected more frequently at the transformation zone as compared to non-junctional tissue. We found a significant association between increasing viral load and disease severity along the Barrett's metaplasia-dysplasia-adenocarcinoma sequence. Hr-HPV integration into the host genome was an early event and there was increasing integration with disease severity. In situ hybridisation revealed that the HPV genome was located in the Barrett's columnar, dysplastic and cancer cells. All the above data (reported for the very first time) support a potential role for hr-HPV in the pathogenesis of esophageal adenocarcinoma.

The group's recent discoveries have opened up a whole new field in gastroenterology and will change practice within the next two years.

These are game changer discoveries in the fight against oesophageal glandular cancer, the fastest growing malignancy in the Western World. The group is currently investigating ways of eradicating the virus and potential protecting against it by vaccination.

Research Highlights

- First group in the world to hypothesise and prove that high risk human papillomavirus is strongly associated with Barrett's dysplasia and oesophageal adenocarcinoma.
- First group in the world to demonstrate that increasing viral load and integration of high risk human papillomavirus correlated with increasing disease severity in the Barrett's metaplasia – dysplasia – adenocarcinoma sequence.
- First in the world to clearly demonstrate that the HPV genome is found in the oesophageal metaplastic, dysplastic and adenocarcinoma cell.
- Prof Rajendra article Management of Barrett's Oesophagus and intramucosal oesophageal cancer: Review of Recent Development was published in the prestigious Therapeutic Advances in Gastroenterology Journal.

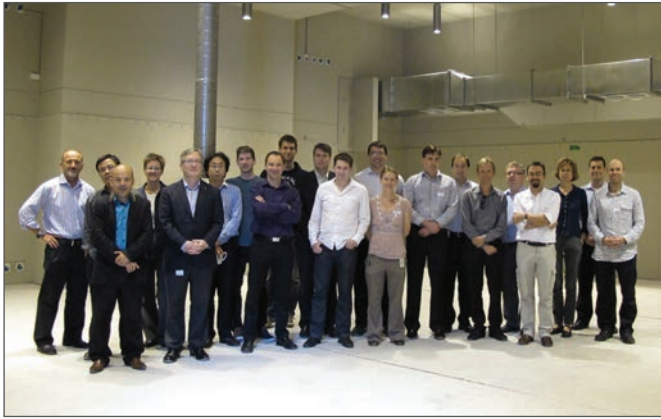
MEDICAL PHYSICS

Group Leader: Professor Paul Keall

Our research uses basic science and clinical research to improve patient outcome. The key focus of our research is on radiation oncology treatment and related imaging techniques. Our major research project is the development of a hybrid Magnetic Resonance Imaging – Linear Accelerator machine (MRI-Linac). This is one of only two other similar developments worldwide and will enable real time imaging of patient anatomy during radiotherapy treatment and the potential of improved cancer targeting and a reduction in treatment side effects. Improved cancer targeting will be possible with the increased soft tissue contrast of MRI and the potential of incorporating physiological cancer targeting through advanced MRI pulse sequences.

Supporting this research are other projects assessing the benefits of MRI and other imaging modalities for radiotherapy treatment planning and delivery, the use of advanced radiation dosimeters for treatment verification and the impact of uncertainties in radiotherapy delivery. This work is undertaken within the cancer therapy centres at Liverpool and Macarthur and other collaborating centres. Component projects are focused on specific clinical sites such as lung, breast and prostate.

Research Highlights



- A number of international visitors welcomed to Australia to work on Australia's first MRI-Linac
- Received funding to the tune of \$480K from the NHMRC for Magnetic Resonance Imaging- Linac for highly accurate radiotherapy cancer treatment.
- Collaborating with nine other affiliates including Stanford University USA for the successful completion of the Research Bunker.
- In collaboration with Stanford University NIH R21 grant to continue electron gun development technology proves work successful.
- MRI-Linac equipment purchases are underway and on time with key computational projects underway to inform equipment design.
- Dr Gary Liney employed as MR Physicist to work on the MRI-Linac program and MRI Simulator investigations.
- Hughes, J., et al., An Investigation into Factors Affecting Electron Density Calibration for a Megavoltage Cone-Beam CT system. *Journal of Applied Clinical Medical Physics* has influenced the approach to determining electron density calibration for MV CBCT at Liverpool Hospital and given that this has been published internationally may also have influenced practice in other departments.
- Holloway, L.C., et al., Comp Plan: A Computer Program to Generate Dose and Radiobiological Metrics from Dose-Volume Histogram Files. *Medical Dosimetry*, 2012 has influenced the approach to radiobiological modelling, enabling many models to be compared simultaneously. Since the publication of this article the group has had over 30 requests internationally for its radiobiological modelling computer code.

ONCOLOGY CLINICAL TRIALS

Group Leader: Dr Michael Harvey

The Oncology Clinical Trials Unit is actively engaged in scientific research to improve the survival and quality of life for patients with cancer. Cancer is of growing concern for the South West of Sydney and given the large sample size of patients affected with the disease, the Unit is leading a large number of trials.

The Unit is actively involved in both cooperative group and physician initiated studies as well as industry sponsored studies, with the aim of improving cancer care and providing access to newly developed treatment modalities.

Research Highlights

- Granted funding to the tune of over \$1 million over three years for 4 Clinical Trials Staff Members within SWSLHD starting 1 January 2012.
- Successfully opened 1st Phase 1 ASALN Clinical Trial at Liverpool Hospital's Oncology Clinical Trials Unit & a total of 10 patients were recruited within 10 months. Recruitment will continue for a further six months.
- The Oncology Clinical Trials Unit at Liverpool Hospital has provided an efficient service to sponsors as Lead Site within NSW, Victoria and Queensland Public Health Organisations.
- Consistently opening new studies in Medical Oncology, Radiation Oncology and Haematology with great success and growing numbers in enrolments.
- The position of a Clinical Trials Pharmacist has been approved with arrangements for the recruitment to take effect in the near future.
- Ms Anne-Marie Watson was acknowledged as Liverpool Hospital Principal Investigator on the APML4 Study, All - trans- retinoic acid, idarubicin, and IV arsenic trioxide as initial therapy in acute promyelocytic leukemia published in the *Blood Journal*.
- There has been a consistent increase in the number of trials conducted at the Oncology Clinical Trials Unit at Liverpool Hospital, with 12 new trials initiated in 2012

There are a large number of Clinical Trials underway at Liverpool Oncology Clinical Trials Unit and below is a snapshot of the types of trials underway:

| RESEARCH FIELD | CLINICAL TRIAL NAME | DESCRIPTION | SPECIALTY |
|----------------|----------------------|---|--------------------|
| BRAIN | AGOG | Australian Genomics and Clinical Outcomes for Glioma. | Radiation Oncology |
| | ACT IV Glioblastoma | An International, Randomised, Double-Blind, Controlled Study of Rindopepimut/GM-CSF with Adjuvant Temozolomide in Patients with Newly Diagnosed, Surgically Resected, EGFRvIII-positive Glioblastoma. | Medical Oncology |
| BREAST | Stars 08.06 | A Randomised Comparison of Anastrozole Commenced Before and Continued During Adjuvant Radiotherapy for Breast Cancer Versus Anastrozole and Subsequent Anti-Oestrogen Therapy Delayed Until After Radiotherapy [STARS – Study of Anastrozole and Radiotherapy Sequencing. | Radiation Oncology |
| | BREAST Setup Study | What Factors Affect the Level of Set-Up Error for Radiation Therapy to the Breast and is Cone Beam an Accurate Method for Determining Breast Set-Up Err. | Radiation Oncology |
| | Breast Mask Study | Large Breast Mask Immobilisation Study : LBIS. | Radiation Oncology |
| | BONES Study | Prevention of Osteoporosis as a Consequence of Hormone Treatment in Postmenopausal Women Treated for Breast Cancer. | Medical Oncology |
| | Radiation Echo Study | The Use of Advanced Echocardiographic Techniques for the Assessment of Cardiac Function during the Acute Phase after Radiation Treatment for Left Sided Breast Cancer. | Radiation Oncology |
| | TROG DCIS | A Randomised Phase III Study of Radiation Doses and Fractionation Schedules in Non-Low Risk DCIS of the Breast. | Radiation Oncology |
| | SUPREMO | An MRC Phase III Randomised Trial to Assess the Role of Adjuvant Chest Wall Irradiation in Intermediate Risk' Operable Breast Cancer Following Mastectomy. | Radiation Oncology |

| RESEARCH FIELD | CLINICAL TRIAL NAME | DESCRIPTION | SPECIALTY |
|---|------------------------|---|--------------------|
| PHYSICAL ACTIVITY & METASTATIC BREAST CANCER | | | |
| | Bayer RESILIENCE Study | A Phase III Randomised, Doubleblind, Placebo Controlled Trial Comparing Capecitabine Plus Sorafenib Versus Capecitabine Plus Placebo in the Treatment of Locally Advanced or Metastatic HER2Negative Breast Cancer. | Medical Oncology |
| | EVEREXES | A Phase IIIB, Multicenter, Open-Label, Expanded Access Study of Everolimus (RAD001) in Combination With Exemestane in Post-Menopausal Women With Estrogen Receptor. | Medical Oncology |
| | PUMARER1301 | A Study of Neratinib Plus Capecitabine Versus Lapatinib Plus Capecitabine in Patients With HER2+ Metastatic Breast Cancer Who Have Received Two or More HER2directed. | Medical Oncology |
| COLORECTAL | I4T-MC-JVBB | A Randomised, DoubleBlind, Multicenter Phase 3 Study of Irinotecan, Folinic Acid, and 5Fluorouracil (FOLFIRI) Plus Ramucirumab or Placebo in Patients With Metastatic Colorectal Carcinoma Progressive During or Following FirstLine Combination Therapy With Bevacizumab, Oxaliplatin, and a Fluoropyrimidine. | Medical Oncology |
| | CHALLENGE | A Phase III Randomized Study of the Impact of Physical Activity Program on Disease-Free Survival in Patients With High Risk Stage II or Stage III Colon Cancer. | Medical Oncology |
| | ACO-002 CRC | RandomiSed Double-Blind Phase III Trial of FOLF(HA)irivs FOLFIRI For Second or Third Line Therapy in Irinotecan-Naïve Patients With Metastatic Colorectal Cancer. | Medical Oncology |
| GASTRIC | TOPGEAR | A Randomised Phase II/III Trial of Preoperative Chemoradiotherapy versus Preoperative Chemotherapy For Resectable Gastric Cancer. | Radiation Oncology |
| | RAINBOW | A Randomised, Multicenter, Double-Blind, Placebo-Controlled Phase 3 Study of Weekly Paclitaxel With or Without Ramucirumab (IMC-1121B) Drug Product in Patients With Metastatic Gastric Adenocarcinoma, Refractory to or Progressive After First-Line Therapy With Platinum and Fluoropyrimidine | Medical Oncology |

| RESEARCH FIELD | CLINICAL TRIAL NAME | DESCRIPTION | SPECIALTY |
|----------------|---------------------|--|--------------------|
| LIVER | REACH | A Multicenter, Randomized, Double-blind, Phase 3 Study of Ramucirumab (IMC-TI21B) Drug Product and Best Supportive Care (BSC) versus Placebo and BSC as Second-line Treatment in Patients With Hepatocellular Carcinoma Following First-line Therapy With Sorafenib. | Medical Oncology |
| LUNG | ABC ITV | Active Breathing Coordination to Measure Tumour Motion in Lung Cancer patients: A Feasibility Study. | Radiation Oncology |
| | MRI | A Feasibility Study on Incorporating Dynamic MRI Data in Radiotherapy Planning For Lung Cancer. | Radiation Oncology |
| | NITRO | A phase III Randomised Trial of Adding Nitroglycerin to First Line Chemotherapy for Advanced Non-Small Cell Lung Cancer. | Medical Oncology |
| | CHISEL | A Randomises Phase III Trial of Highly Conformal Hypofractionated Image Guided (“Stereotactic”) Radiotherapy (Hypopt) versus Conventionally Fractionated Radiotherapy (CONRT) for Inoperable Early Stage I Non-Small Cell Lung Cancer. | Radiation Oncology |
| PANCREAS | LAPC | Phase 2 Placebo – Controlled Double-Blind Trial of Dasatinib Added to Gemcitabine for Subjects with Locally –Advanced Pancreatic Cancer. | Medical Oncology |
| PROSTATE | RAVES | A Phase III Multi-Centre Randomised Trial Comparing Adjuvant Radiotherapy (RT) With Early Salvage RT In Patients With Positive Margins Or Extraprostatic Disease Following Radical Prostatectomy. | Radiation Oncology |
| | LATITUDE | A Randomised, Double Blind, Comparative Study of ZYTIGA® (Abiraterone Acetate) Plus Low dose Prednisone Plus Androgen Deprivation Therapy (ADT) Versus ADT Alone in Newly Diagnosed Subjects With High Risk, Metastatic Hormone Naive Prostate Cancer (mHNPC). | Medical Oncology |
| | SPARTAN | A Multicentre, Randomised, Double – Blind, Placebo – Controlled, Phase III Study of ARN – 509 in Men with Non-Metastatic (MO) Castration – Resistant Prostate Cancer. | Medical Oncology |

| RESEARCH FIELD | CLINICAL TRIAL NAME | DESCRIPTION | SPECIALTY |
|----------------------|---------------------------------------|---|--------------------|
| GYNAECOLOGY | PROTEC – 3 | Randomised Phase III Trial Comparing Concurrent Chemoradiation and Adjuvant Chemotherapy with Pelvic Radiation Alone in High Risk and Advanced Stage Endometrial Carcinoma. | Radiation Oncology |
| | OUTBACK | A Phase III Trial of Adjuvant Chemotherapy Following Chemoradiation as Primary Treatment for Locally-Advanced Cervical Cancer Compared to Chemoradiation Alone. | Medical Oncology |
| | PARAGON | Phase II Study of Aromatase Inhibitors in Women with Potentially Hormone Responsive Recurrent/Metastatic Gynaecological Neoplasms. | Medical Oncology |
| RENAL CELL CARCINOMA | SORCE | A Phase III Randomised Double – Blind Study Comparing Sorafenib With Placebo in Patients With Resected Primary Renal Cell Carcinoma at High or Intermediate Risk of Relapse. | Medical Oncology |
| SKIN | MP3 | A phase II Efficacy Study of Chemo-Radiotherapy in PET Stage II and III Merckel Cell. | Radiation Oncology |
| HAEMATOLOGY | MDS4 | A Randomised Phase II Study Comparing the Efficacy of 5azacitidine Aone versus Combination Therapy with Lenalidomide and 5azacitidine in Patients with Higher Risk Myelodysplastic Syndromes (MDS) and Low Marrow Blast Count Acute Myeloid Leukaemia (AML). | Haematology |
| | Ablynx ATTP | A Phase II, Single-Blind, Randomised, Placebo-Controlled Trial to Study the Efficacy and Safety of Anti-von Willebrand Factor Nanobody Administered as Adjunctive Treatment to Patients With Acquired Thrombotic Thrombocytopenic Purpura. | Haematology |
| | Amgen 20090482 Multiple Myeloma Study | A Randomised, Double-Blind, Multicenter Study of Denosumab Compared With Zoledronic Acid (Zometa®) in the Treatment of Bone Disease in Subjects with Newly Diagnosed Multiple Myeloma. | Haematology |
| | ALL6 | A Phase II Trial of an Intensive Pediatric Protocol Incorporating PostInduction Stratification based on Minimal Residual Disease Levels For The Treatment of Adolescents Aged 15 Years and Above, and Young Adults Aged up to 40 Years, with Newly Diagnosed Acute Lymphoblastic Leukaemia. | Haematology |

| RESEARCH FIELD | CLINICAL TRIAL NAME | DESCRIPTION | SPECIALTY |
|----------------|----------------------------|--|------------------|
| | NHL21 | Early Treatment Intensification with R-ICE Chemotherapy Followed By Autologous Stem Cell Transplantation using Z-BEAM for Patients with Poor Prognosis Diffuse Large B-Cell Lymphoma as Identified by Interim PET/CT Scan Performed After Four Cycles of R-CHOP-14 Chemotherapy. | Haematology |
| | ENESTxtnd | Extending Molecular Responses with Nilotinib in Newly Diagnosed Chronic Myeloid Leukaemia (CML) Patients in Chronic Phase. | Haematology |
| Phase 1 | ASPLAN Phase Study 1 | Phase I Multiple Ascending Dose Study of ASLAN002 (BMS-777607) in Subjects With Advanced or Metastatic Solid Tumors. | Medical Oncology |
| | Cerulean CRLX301-101 study | Phase 1/2a Dose-Escalation Study of CRLX301 in Patients with Advanced Solid Tumor Malignancies. | Medical Oncology |

PALLIATIVE CARE CLINICAL TRIALS & RESEARCH UNIT

Group Leader: Associate Professor Meera Agar

The Palliative Care research group undertakes studies which explores approaches to improve the symptoms and quality of life for those with progressive life limiting illness.

The group undertakes investigator led clinical trials exploring pharmacological and health service interventions aimed at improving symptom control and quality of life in advanced illness. Particular interests are community based palliative care service models, palliative care in advanced dementia and delirium in advanced cancer. The group also is exploring delirium pathophysiology including investigating anti-cholinergic and circadian rhythm disorders in delirium.

Research Highlights

- Successfully lead the clinical trials group in palliative care for NSW.
- A/ Professor Meera Agar's work in delirium in advanced cancer received an Award from the European Association for Palliative Care.
- The group played a key role in the development of Australian cancer pain guidelines: <http://www.cancer.org.au/news/news-articles/cancer-pain-management-in-adults.html>
- A/Professor Meera Agar was awarded \$1.5 million over four years from the Commonwealth Department of Health and Ageing for her studies into the improvement of palliative care for people with advanced dementia living in residential aged care facilities.
- Successfully participated in the CSIRO Flagship project led by Professor Davidson in partnership with the University of Technology Sydney for the advance care planning in emergency departments.
- Awarded \$294K over three years from the Cancer Institute NSW for work into improving palliative care through clinical trials – the NSW Collaborative trials group in palliative care.
- Approximately \$2 million was received by the group for their Clinical Trial studies.

CLINICAL TRIALS

| FUNDING BODY | CHIEF INVESTIGATOR | TITLE OF PROJECT | DESCRIPTION |
|--------------------|--------------------|--|---|
| DOHA | Meera Agar | Randomised Control Trial of Oral Risperidone versus Oral Haloperidol versus Oral Placebo with Rescue Midazolam in the Management of Delirium in Palliative Care Inpatients. | This Study is Exploring the Best Approach to Managing Delirium Symptoms in People Who Have Advanced Illness. |
| DOHA | David Currow | A Randomised Double-Blind Multi-Site Parallel Arm Controlled Trial to Assess Relief of Refractory Breathlessness Comparing Oral Sertraline to Placebo. | This Study Aims to Explore if Sertraline Can Improve the Symptoms of Shortness of Breath in People with Advanced Illness. |
| DOHA | David Currow | A Randomised Double Blind Placebo Controlled Trial of Infusional Subcutaneous Octreotide in the Management of Malignant Bowel Obstruction at the End Of Life. ACTRN12608000211369 | This Study Explored the Role of Octreotide in Control of Vomiting in People Who Have an Obstructed Bowel Due to Cancer. |
| DOHA | Janet Hardy | A Randomised, Double-Blind Placebo Controlled Study of Subcutaneous Ketamine in the Management of Cancer Pain. ACTRN12607000501448 | This Study Explored the Role of Ketamine in Management of Cancer Pain in People Already Receiving Initial Analgesia. |
| DOHA | David Currow | Randomised, Double Blind Control Trial of Megestrol Acetate, Dexamethasone and Placebo in the Management of Anorexia in People With Cancer. ACTRN12608000405314 | This Study is Exploring Whether Megestrol or Dexamethasone Can Improve Appetite in People with Advanced Cancer. |
| NHMRC | Patsy Yates | A Two-Stage Trial of Response to Antiemetic Therapy in Patients with Cancer and Nausea Not Related to Anticancer Therapy. Study 1: A Randomised Open Label Study of Guideline Driven Targeted Antiemetic Therapy versus Single Agent Antiemetic Therapy. ACTRN12610000481077 Study 2: A Randomised Controlled Double Blind Study of Levomepromazine or Ondansetron versus Placebo with Rescue Antiemetics (Best Supportive Care) in Patients with Refractory Nausea. ACTRN12610000482066 | This Study is Exploring Approaches to Manage Nausea in the setting of Advanced Illness. |
| NHMRC | Katherine Clark | A Multi-Site Randomised Controlled Trial Comparing the Severity of Constipation Symptoms Experienced By Palliative Care Patients Receiving Usual Care Compared to Those Diagnosed and Managed According to the Underlying Pathophysiology. | This Study Aims to Better Manage Constipation in People with Advanced Illness By Assessing the Cause and Underlying Reasons for Constipation in a More Systematic Way Using Some Innovative and Low Burden Assessments. |
| Cancer Council QLD | Geoffrey Mitchell | Using Single Patient Trials to Determine the Effectiveness of Psychostimulants in Fatigue in Advanced Cancer Patients. ACTRN12609000794202 | This Study Explores the Use of Methylphenidate in Management of Fatigue in People with Cancer. |
| DOHA | David Currow | A Randomised Double-Blind Multi-Site Parallel Arm Controlled Trial to Assess Relief of Refractory Comparing Fixed Doses of Morphine, Oxycodone and Placebo. | This Study Aims to Explore if Morphine or Oxycodone Can Improve the Symptoms of Shortness of Breath in People with Advanced Illness. |

PANCREATIC RESEARCH GROUP

Group Leader: Professor Minoti Apte



Led by Professor Minoti Apte, the Pancreatic Research Group's main research interests are related to elucidating the mechanisms by which alcohol abuse damages the pancreas leading to chronic inflammation and scarring of the gland (chronic pancreatitis) and the role of scar tissue in progression of pancreatic cancer.

The internationally renowned group were the first in the world to develop a method to isolate and culture the cell type responsible for producing pancreatic fibrosis (scarring) – these cells are known as pancreatic stellate cells (PSCs). Thus, they are internationally acknowledged for their pioneering work on the role of PSCs in chronic pancreatitis and pancreatic cancer.

The group's current focus is to determine how PSCs influence scar formation in pancreatitis induced by alcohol abuse and to perform genetic studies on humans to determine why some heavy drinkers are more susceptible to developing pancreatitis than others.

In terms of pancreatic cancer, the group have shown that PSCs play a critical role in supporting cancer cell growth and spread (metastasis). They are now focussing on unravelling the cross talk that exists between PSCs and pancreatic cancer cells, so as to identify cellular pathways that can be targeted by treatment to interrupt such cross-talk and prevent/retard cancer progression.

Research Highlights

- Professor Minoti Apte was honoured by the American Pancreatic Association (APA) through the Frank Brooks Memorial Lecture. The lectureship is one of the APA's highest awards.
- Successfully collaborates with five key pancreatic cancer organisations from around the world.
- The Group is seen as the destination of choice for researchers interested in pancreatic stellate cell biology, hosting two international Research Fellows (University of Liverpool and Asian Institute of Gastroenterology) in 2012 for training in PSC isolation and culture techniques.
- Recruited a PhD students in 2012 and two Honours students due to commence in 2013
- Professor Apte was invited to five international and two national lectures to major conferences and institutions.
- Interviewed by Channel 10 News about her groups key research activities, coinciding with the official opening event of the Ingham Institute.
- Using a knockout mouse model, the group have shown that pancreatic injury secondary to chronic alcohol intake and repeated endotoxin challenge is mediated via the LPS receptor TLR4.
- Therapeutic targeting of hepatocyte growth factor (HGF) using both in vitro and in vivo approaches, leads to significant inhibition of pancreatic cancer growth and metastasis. HGF is produced predominantly by pancreatic stellate cells, while its receptor c-MET is mainly expressed by cancer cells.
- Evidence that expression of genes regulating several key cellular pathways in pancreatic stellate cells is significantly influenced by the microenvironment – i.e. differential regulation of numerous genes is observed between PSCs cultured on plastic, matrigel (basement membrane like compound) and collagen (resembling fibrotic matrix).
- Preliminary data indicating significant differences in microRNA expression between cancer associated human PSCs and normal human PSCs, suggesting potential pathways for further research.
- The group published a Chapter on their work into stellate cells and the pancreas in the first edition of the book, Recent Advances in the Pancreas.

TRANSLATIONAL CANCER RESEARCH GROUP - PSYCHO-ONCOLOGY

Group Leader: Professor Afaf Girgis



The Psycho-Oncology Research Group investigates the psychological, social and behavioural aspects of cancer, from the time of a cancer diagnosis until end of life.

The group's research programs are translational in its focus, in that its areas of research are informed by the challenges faced by those providing and receiving cancer care; applying the most stringent research methods to develop a strong evidence base to inform best practice; and actively engage with early key stakeholders and policy makers to maximise evidence-informed cancer care.

Our research addresses some of the major psychosocial dimensions of cancer, including:

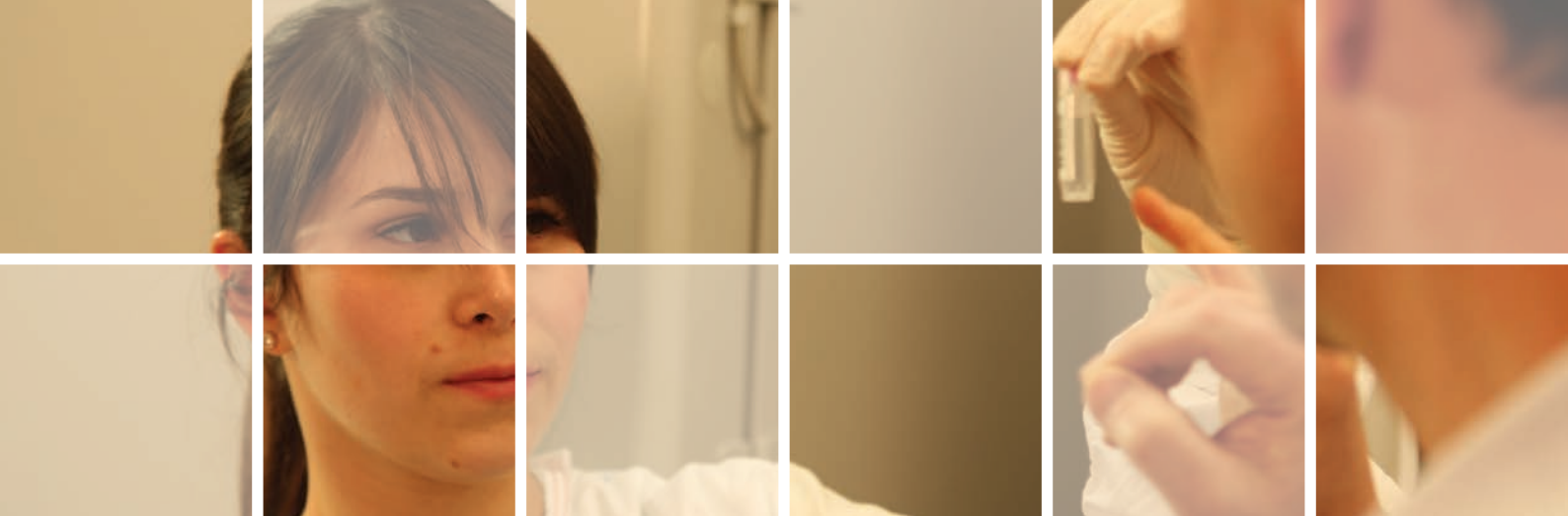
- Understanding the unmet needs and responses of patients, their families and caregivers to cancer at all stages of the disease.
- Determining the influence of the content and

process of communication between the health care team and the patient and family on coping, treatment compliance and psychosocial outcomes.

- Identifying the psychological, behavioural and social factors which may influence the disease process, including the impact of cultural, language and socioeconomic differences.
- Developing and testing strategies that can be implemented within health services to minimise the negative impact of cancer.

Research Highlights

- Professor Afaf Girgis received the prestigious Clinical Oncology Society of Australia (COSA) inaugural Psycho-Oncology Award.
- Completed several landmark projects in the field which have attracted international attention.
- Received funding to the tune of \$393K for the year.
- The group published in 39 peer-reviewed journals, 19 papers and 20 conference abstracts.
- Disseminated research findings at national and international conferences and scientific publications, with some findings translated into practice.
- Completed the development of the following Coping-Together resources to assist couples facing cancer to cope, which will be tested in a randomised controlled trial, with four year NHMRC funding:
 - Six information booklets addressing the main psychosocial challenges faced by couples after a diagnosis of cancer (e.g. making their treatment decision, self-managing symptoms, supporting each other, managing stress and worry).
 - A documentary style DVD incorporating information from health care professionals and 'couples' facing cancer.
 - An interactive website.
- Submitted eight grant applications to NHMRC, Cancer Institute NSW, BUPA and the Ian Potter Foundation.
- Presentation of papers at 17 local and international conferences.
- Invited to 6 key Psycho-Oncology presentations, symposia and workshops.



TRANSLATIONAL CANCER RESEARCH

Group Leader: Professor Paul de Souza

Led by Professor Paul de Souza, the Translational Cancer Research Unit has many interests within the broad range of cancer research, but the group's main priority is "practical cancer research" that is relevant to the patient.

2012 has proven to be an impressive year for the Ingham Institute Translational Cancer Research group as its now has over 30 active members (starting from eight lead researchers), two area health services covering approximately 16% of new patients with cancer seen in NSW, \$4.5million dollars in funding in grants or in-kind, 96 publications (from 17 contributing members), five senior staff appointed, 2 Fellows, 4 PhD students, 4 Honours students, and 2 ILP students.

Drug development, drug and activity bases screening, mechanisms of action of therapeutic agents in cancer, signal transduction, cell biology, pharmacology, pharmacokinetics, biomarkers, novel target discovery, novel therapeutics, and translation into the clinic as well as Phase I and II trials forming part of the groups interests.

The group's interests extend to identifying new targets and treatments for various types of cancer ultimately trying to get the new drugs into the clinic as soon as possible. This often involves collaborative research with oncologists, pharmacologists, drug companies and universities, depending on their expertise in assisting the group get a new treatment in Phase I Trials, which is the first type of clinical trials testing of a new drug.

Research Highlights

- Secured external funds to the tune of \$325K from the UNSW and Prostate Cancer Foundation of Australia for establishing a first-in-state Translational Cancer Therapy Centre at the Ingham Institute which will become a state wide resource.
- Established the Comprehensive Cancer Tissue Bank; collecting colorectal cancer and head and neck cancer tissues in 2012 with the aim of extending the range of types of cancers covered by the group's translational cancer research.
- Piloting CRC flagship study, including study program for biomarkers for psycho-social outcomes, tumour burden and clinical cancer research. This pilot research is studying the patient throughout their treatment journey with collection of demographic, psychosocial, haematological, biochemical and pathological data throughout the patient journey. The initial pilot study will help to inform feasibility issues and power calculations for the success of the larger colorectal cohort study and for future studies in other tumour sites.
- Nearing establishment is Ingham Institute's Phase I trials unit, which is set to be highly translational, and bridge the gap between basic science, preclinical therapeutic models, and clinical trials. Further, the development of expertise in early clinical trials will build capacity and help train researchers interested in back-translating clinical hypotheses to be tested in the laboratory.

Stream Leader:

A/Professor John Worthington



The Cardiovascular Stream encompasses the efforts of the Heart & Brain Collaboration and the Cardiology Research Centre's. Researchers within this stream are studying the causes of heart disease and how patients can be better treated through the Institute's translational research programs.

Clinical trials research forms a substantive part of the streams research activities. Many local, international and multi-centre trials are currently open to patients and facilitated by the Cardiovascular Research Centre. These trials refer to the diagnosis and management of heart disease, a common cause of death in Australia.

The Heart & Brain Collaboration studies cardiovascular disease and neurological disorders, leading a number of research projects in this area. The group is carrying out two academic cluster randomised trials, the DESPACT and STOP-STROKE in Atrial Fibrillation (AF) Studies.

Another key theme of the stream is the study of Acute Coronary Syndrome research. Patients with chest pain are usually presented to Emergency Departments. This is one of the most common categories seen in our Emergency Departments. Our dedicated team of professionals aim to investigate stroke prevention mechanisms and the effects of such disease on the heart.

Cardiovascular Research Centre

Group Leader: Professor John French

Headed by Professor John French, the Cardiovascular Research Centre's research portfolio includes two broad areas; precisely; Clinical trials and outcomes research studies in acute coronary syndromes and coronary interventions (including cardiac surgery) as well as Cardiac non-invasive imaging research. These advances have led to improvements in the group's ability to monitor patients and their treatments as well during longer term follow up.

The Acronym CIRCULATION [Cardiac Imaging Research Collaborative unit Liverpool Acute coronary Trials and Interventional Outcomes research Network] was developed to describe these 2 major research foci within the Liverpool Cardiology Department in the following areas:

Heart diseases: Are major contributors to illness, and the leading cause of death in the ethnically and culturally diverse imaging population of south western Sydney. Advances in drug treatments and procedures, such as the insertion of stents, and recent advances in techniques, has led to improvements in our ability to care for patients. It is possible to obtain highly accurate and important information on the heart status of patients for early diagnosis, and identification of the cause(s) of illness.

Heart Attacks: Determination of the optimal timing of invasive X-Rays (angiograms) after heart attack, and studying what combinations of blood thinning and clot-dissolving drugs should be used. Also which type of stent (to keep the artery open) in combination with which blood thinning drugs will be studied, especially to determine which people may be resistant to particular drugs including aspirin. Early after heart attacks evaluation of un-coordinated contraction of the heart. Early diagnosis of narrowing and cholesterol deposits in coronary arteries, the precursor to most heart attacks, using new X-Ray techniques of CT coronary angiography and stress heart ultrasound (echocardiography).

CLINICAL TRIALS INFORMATION

| FUNDING BODY | CHIEF INVESTIGATOR | TITLE OF PROJECT | DESCRIPTION |
|--|--------------------|--|-------------|
| STEMI / NSTEMI | | | |
| Eli Lilly | TAEH | Clopidogrel to Prasugrel in ACS Patients | 2010-2012 |
| Sanofi Aventis | TAO | Otamixaban v Heparin in ACS | 2012-2013 |
| Novartis | AQUARIUS | Aleskirin v Placebo IVUS Assessment of Plaque Changes | 2010-2012 |
| NIH/ The George | PRESERVE | N/Saline v Sodium Bicarb v Mucomist Preangio | 2012-2016 |
| NIH/ Mount Sinai | FREEDOM | Angiogram PCI v CABG Surgery | 2009-2013 |
| GlaxoSmithKline | SOLTICE | Drug Trial | 2010-2012 |
| The Medicines Co/ SAHMRI | Rescue PCI | Bivalirudin v Heparin + GP11b/111a | 2010-2014 |
| PCI | | | |
| Abbott Vascular | SATURN | Atorvastatin v Rosuvastatin With IVUS Assessment of Atherosclerosis | 2010-2012 |
| ACS | | | |
| Roche | ALECARDIO | Aleglitazar v Placebo With an ACS Event & T2DM | 2009-2013 |
| AstraZeneca/Eli Lilly/ MSD/ Boehringer/ Heart Foundation of Australia/The George Institute | CONCORDANCE | ACS Registry | 2009-2015 |
| Roche | TRAPID-AMI | Assessment of Suspected ACS Patients With HsTnT | 2012-2013 |
| NIH/ SAMHRI | ISCHEMIA | Non-Invasive v Invasive Ischaemia Assessment in CAD Patients | 2012-2016 |
| LIPIDS | | | |
| Novartis | CANTOS | Cardiovascular Risk Reduction Study (Reduction in Recurrent Major CV Disease Events) | 2012-2017 |
| CARDIOTHORACIC | | | |
| NIH | STICH | Heart Failure in Surgery | 2009-2015 |
| Rhythm Management | | | |
| In House | | | |
| Thrombus Research Institute UK | GARFIELD | AF Registry. | 2011-2013 |
| In House | SURF | Radial V Femoral Approach For Angiogram | 2011- 2015 |
| In House | POTS | Angio Trial | 2007-2015 |
| In House | PAINLESS | Painbuster v Placebo v Standard Care For Pain Management Post CABG | 2009-2012 |
| In House | CABG BLEEDING | Verify Now Assessment of Pre-CABG Bleeding Risk (PCI control) | 2009- 2015 |

Research Highlights

- Prof John French is co-investigator on a \$2.3 million NHMRC grant investigating measures to prevent serious adverse events for patients following angiography.
- A/ Prof Liza Thomas was awarded an NHMRC grant for studies into Heart Failure-SNAPSHOT.
- Dr Christine Allman successfully completed her Master's Degree at the University of NSW for studies assessing left ventricular function in patients undergoing cardio toxic chemotherapy.
- Dr Arnold Ng was awarded his PhD for studies into the assessment of left ventricular mechanics in coronary artery disease.
- Professor Dominic Leung was invited speaker at the World Congress of Cardiology, 18-21 April 2012, Dubai, United Arab Emirates giving highlight to asymptomatic aortic stenosis, experience in imaging for coronary intervention and how to assess severity of aortic stenosis.
- Prof Dominic Leung was also invited speaker and sessional chair at the Annual Scientific Sessions of the Cardiac Society of Australia and New Zealand, 17-19 August in Brisbane, Australia.

HEART AND BRAIN COLLABORATION

Group Leader: A/Professor John Worthington & Dr Melina Gattellari

Cardiovascular disease and neurological disorders are the core focus of the Heart and Brain Collaboration founded by Dr Melina Gattellari and Conjoint Associate Professor John Worthington. The group is leading a number of research projects. One of these is an NHMRC funded data-linkage study examining the patterns of care and outcomes for subarachnoid haemorrhage. Aneurysmal subarachnoid haemorrhage occurs in relatively young people and is often fatal and disabling accounting for the largest proportion of the Quality of Life Years lost through all forms of stroke. This study is likely to inform clinical care and health service planning for these patients.

The group is also carrying out two academic cluster randomised controlled trials, the DESPATCH and STOP-STROKE in AF studies. The DESPATCH study has been carried out in 70 General Practices in South Western Sydney. The STOP-STROKE in AF study has

been carried out with General Practitioners around Australia. Both studies are designed to evaluate better models of care and the delivery of stroke prevention for AF. The projects involve the testing of innovative interventions in general practice to improve stroke prevention in AF, the most common heart rhythm disturbance and a major cause of fatal and disabling stroke.



Research Highlights

- Published Australia's first epidemiological study of Myasthenia Gravis in the prestigious European Journal of Neurology.
- Published one of the largest studies on long-term survival in transient ischaemic attack (TIA), providing the first modern-day estimates of relative survival in this important clinical syndrome. The study was the subject of a press release by the American Heart Association, internationally syndicated in both the medical and lay press.
- Completion of data collection for the DESPATCH and STOP-STROKE in AF studies.

Stream Leader:

Professor Bin Jalaludin



Population Health, Primary Care and Health Services research aims to influence policy and practice. The Population Health, Primary Care and Health Services Research Stream (PHPCHSRS) comprises of a range of research groups that engage primarily (but not exclusively) in non-clinical research. Research groups that comprise PHPCHSRS are: Aged Care Unit, Centre for Applied Nursing Research (CANR), Centre for Health Equity Training Research and Evaluation (CHETRE), Centre for Research, Evidence Management and Surveillance (REMS), General Practice Unit (GPU) and The Simpson Centre.

The research centres listed above engage in a range of research ranging from observational and interventional research to health services research. The research centres have been very successful in obtaining competitive grants and have actively published their research. In 2012, the research centres within PHPCHSRS were involved in 37 competitively funded research projects worth \$6.85 million and published 84 scientific papers in peer-reviewed journals.

Each of the research centres within PHPCHSRS has had major accomplishments and achievements, and these are listed in the individual research centre's reports. These accomplishments and achievements have made significant contributions to population health and health care delivery in the South Western Sydney Local Health District.

AGED CARE RESEARCH UNIT

Group Leader: Dr David Conforti and Dr Chris Shanley

The Aged Care Research Unit activity is primarily focused on multidisciplinary, clinically based research into aged care syndromes, particularly the evaluation of cognition in culturally diverse populations.

The group is also interested in the evaluation and management of acutely unwell older people in the Emergency Department and inpatient settings, the long term outcomes of service provision, dementia care in CALD communities; advance care planning as well as the end-of-life care.

The Unit is further an active participant in a project with the Clinical Excellence Commission called 'Top 5' to improve the care of patients with dementia. The group is supplying outcome data on falls, complaints, diagnosis of dementia and anti-psychotic use.

Research Highlights

- Secured a \$324K grant from Alzheimer's Australia that involves initiating and leading a consortium of researchers and practitioners from across Australia.
- Active participant in ward - based quality improvement projects such as Falls Prevention and Management in Delirium that have led to improvements in elderly patient outcomes.
- Published in the Australian Journal of Primary Health information on Dementia for Culturally and Linguistically Diverse communities; sources, access and consideration of effective practice.



CENTRE FOR APPLIED NURSING RESEARCH (CANR)

Group Leader: Professor Maree Johnson

Professor Maree Johnson's group aims to undertake research relating to nursing and midwifery practice. A joint initiative of the South Western Sydney Local Health District (SWSLHD) and the University of Western Sydney (UWS), the group facilitates and supports collaborations between clinicians and academics aimed at generating research relevant to clinical practice.

The group is well known for its multidisciplinary research of relevance to nursing and midwifery and promotes an evidence - based approach to change management.

CANR has established an extensive program of nursing and midwifery research, education and postgraduate research training and supervision. Key areas of research are in patient safety and women's and children's health and the health of culturally and linguistically diverse populations. CANR staff provide supervision for five PhD students.

Research Highlights

- Collaborating with CHETRE to implement nursing initiated oral health guidelines among children and health nurses as part of the Bulundidi Gudaga study and evaluate its impact on infant outcomes of Aboriginal children aged 0-2 years.
- Collaborations with the University of Western Sydney have resulted in the inclusion of an oral health component in the new Bachelor of Midwifery program that is due to commence in 2013.

- The development and implementation of a major change in the way nurses deliver handover at the end of shift has been successfully introduced into ten hospitals across Sydney. This has the potential to reduce clinical management and other incidents for all patients.
- The development and testing of an e-learning falls education program for nurses within South Western Sydney and Sydney Local Health Districts (in collaboration with CEWD) has demonstrated improved falls prevention interventions by nurses and is for deployment from CEWD in the very near future to all hospitals.
- Pilot data from the Midwifery Initiated Oral Health Trial has found improvements in oral health using the intervention. The program also featured on Channel 10 News: Dental Awareness in August.
- Changes in the delivery of clinical handover (structured content, a minimum data set, and an electronic tool within the CERNER clinical information system, inclusion of the patient within the handover presentation) have been successfully introduced with general medical/ surgical units within South Western Sydney Local Health District (SWSLHD). This change provides improved clinical information for all nurses as well as a summary of all ward patients for the entire health team. This change has the potential to improve patient safety by reducing delays in prolonged stays due to miscommunication.



CENTRE FOR HEALTH EQUITY TRAINING RESEARCH AND EVALUATION (CHETRE)

Group Leader: Associate Professor Lynn Kemp



CHETRE's work focuses on the description and measurement of health inequalities and health equity, development and evaluation of policies, programs and other actions that aim to achieve health equity, and developing the capacity of the health system to more effectively address health equity through policy and program development.

Our work includes projects in the areas of community and primary health care service development, disadvantaged communities and populations, early childhood, Aboriginal health, unemployment, and Health Impact Assessment and healthy public policy.

CHETRE works closely with state government, including the NSW Ministry of Health, health services and local government and non-government organisations.

CHETRE's research is focused on implementation science, meaning that research programs are

structured for service, practice and policy impact. Examples include:

- The long-running Gudaga studies have influenced nursing practice with Aboriginal clients.
- The 'learning by doing' programs in Health Impact Assessment and Locational Disadvantage have influenced planning and South Western Sydney Local Health District (SWSLHD) project work.
- The MECSH program has influenced service structures and delivery in the UK, where the program is being implemented.

Research Highlights

- Two social and health intervention programs were licensed by the University of NSW. The Maternal Early Childhood Sustained Home-Visiting (MECSH) Program, including training and fidelity monitoring, was purchased by 3 sites in the UK. MECSH-UK is to be implemented with health visitors in North Essex, South Essex and Plymouth.
- An Australian multi-state sustained nurse home visiting randomised controlled trial (right@home) is based on the MECSH program.
- Published 17 manuscripts and one editorial.
- Over 30 presentations were made at international, national and local conferences.
- The Gudaga Study results were presented at the International Society for the Study of Behavioural Development 2012 Biennial Meeting- Edmonton, Alberta, Canada.
- Walk the Talk: Surviving unemployment, staying healthy and getting a job (kit) was launched on 17 April 2012.

CENTRE FOR RESEARCH, EVIDENCE MANAGEMENT & SURVEILLANCE (REMS)

Group Leader: Professor Bin Jalaludin

The Centre for Research, Evidence Management and Surveillance (REMS) was established in 2004 and has a team of epidemiologists and biostatisticians to conduct research, evaluation and surveillance in population health, promote an evidence-based approach to population health programs, and support graduate and postgraduate learning in population health and epidemiology.

Current research areas are in environmental health and air pollution epidemiology, social epidemiology, neighbourhoods and health, health services for diabetes and stroke, and in the use of geographical information systems, spatial statistics and linked data for epidemiological research.

REMS program of air pollution and climate research involves investigating the effects of outdoor air pollution on mortality and morbidity, effects of bushfires on mortality and hospital admissions, the effects of heatwaves on hospital admissions and emergency department visits and estimating the health benefits from reducing outdoor air pollution.

Our health services research focuses on patterns of care and outcomes for cerebrovascular disease and investigating best practice primary care for older Australians with diabetes, evaluating the early childhood universal developmental screening program and analysis of the NSW Child Dental Health Survey.

REMS is also continuing to expand its research capabilities in the built environment and neighbourhoods with a particular interest in equity and accessibility to healthy foods and in food security.



Research Highlights

- Collaborating with 14 other research and academic institutions from nine countries, in the United States, Europe, South America, Asia, Australia and the United Kingdom investigating the effects of ambient air pollution on pregnancy outcomes.
- Professor Jalaludin is Chief Investigator on research teams that were successful in attracting two NHMRC grants that commenced in 2012, project grant funding to the tune of \$1.5M and the Centre for Research Excellence grant worth \$2.4M over five years. He was also on research teams that were successful in attracting three other research grants to commence in 2013.
- Assessment of air pollution on children's lung health, funded by a project grant from the ARC was completed last year. The project was specifically designed to, and supported by the Environment Protection and Heritage Council to inform the current review of the national air quality standards.
- Published 15 papers in prominent Public Health Journals.



GENERAL PRACTICE UNIT

Group Leader: Professor Siaw-Teng Liaw

The Ingham Institute's General Practice Unit uses qualitative and quantitative methodologies; biostatistics and informatics research methods to conduct research in primary care and integrated care. The Unit's focus is safety, quality, health literacy, patient self-management, and prevention and management of chronic disease and multi-morbidity.

The group established an electronic Practice Based Research Network (ePBRN) of primary and secondary care services – to support the cost-effective conduct of health services research, cohort studies and clinical trials using routinely collected data from primary and secondary care settings. This research can also support health information exchange for timely clinical decisions to promote evidence-based practice by health services.

The group has used informatics methods to develop automated tools to assess data quality, identify patients with specific health problems to create patient registers, link records and data to monitor health service use and conduct cohort studies.

The group is currently funded by the HCF to use the ePBRN methodology to study factors that predispose hospital admission. The group is currently examining the safety of GP systems, social media to support patients with asthma, obesity in Primary Health Care, health of poorly performing high school students in South West Sydney and SMS supported smoking cessation.

Implicit in the group's research activities are the ethical, legal and social issues around technical and organisational strategies to improve the integrated care and health literacy particularly in the multicultural communities in South West of Sydney.

Research Highlights

- Professor Liaw was elected an International Fellow of the American College of Medical Informatics.
- The ePBRN works on ontologically rich approaches to assessing the quality of routinely collected data in electronic health records and testing/validation of current extraction tools has been recognised as useful by a number of health related organisations.
- The Unit is finalising an Agreement with the National Prescribing Service Medicines Insight to assist them with testing/ validating the extraction tools that they plan to use to extract data from 500 general practices.
- Dr Sarah Dennis is an Investigator on a Cancer Institute NSW grant titled "Towards Seamless Cancer Care: What do GP's in South West Sydney Need to Facilitate Better Integration with Cancer Services."
- Published nine papers in peer reviewed journals including the Medical Journal of Australia.



THE SIMPSON CENTRE FOR HEALTH SERVICE RESEARCH

Group Leader: Professor Ken Hillman

Headed by Professor Ken Hillman, the Simpson Centre for Health Service Research engages in three main health service areas of interest including the Medical Emergency Team Concept, Emergency Medicine Block and ED Overcrowding; and the End-of-Life Care.

Professor Hillman and his group of researchers are looking at a number of research perspectives of health service research. The Medical Emergency Team study is looking at the effectiveness of the medical emergency team (MET) on hospital outcomes as well as examining the effectiveness of the Between the Flags (BTF) program and the incremental value of a BTF over the conventional MET system. Previously, manual recording of vital signs has been shown to be variable and unreliable. The MERIT study demonstrated that the failure to accurately measure vital signs is the major contributor to the system operating in a substandard way.

The Simpson Centre is working with two North American companies, the NSW Ministry for Health, Liverpool Hospital, South Western Sydney Local Health District and the Australian Institute of Health Innovation, UNSW to pilot a trial of vital sign monitoring in two wards in Liverpool Hospital and, at the same time evaluating the results. This pilot will use wirelessly transmitted signals in the general wards. The data will be seamlessly transferred to the Cerner system which is utilised for Electronic Medical Records (eMR), decision support, medical device connectivity and clinical notifications.

The Simpson Centre is also involved and working with numerous partners including the Clinical Excellence Commission and the Australasian College of Emergency Medicine to validate the impact of the intervention of the four hour rule as well as looking at access block and overcrowding of Emergency Departments.

The elderly and the ageing population are at the height of the group, with the centre looking to establish systems to identify and appropriately care for patients at the end-of-life.

Research Highlights

- The group received more than \$2 million in competitive grant funding for its work into Emergency Department Reviews, leading the NHMRC grant into the Validation and Impact of the Four Hour Rule in the Emergency Department: A Data Linkage Study.
- Senior Research Fellow, Dr Jack Chen was promoted to Associate Professor.
- Professor Hillman was one of the co-organisers of the 7th International Conference on Rapid Response Systems and Medical Emergency Teams which was held in Sydney and had over 500 registrants from 10 different countries.
- Published eight peer review articles or in press as well as two book chapters and three invited editorials.
- Professor Hillman was invited to be one of the chief investigators on a \$12 million NHMRC grant on patient safety which will focus on Implementation Science.
- The groups Medical Emergency Team has been up taken on a national level and rolled out in all major hospitals.

Stream Leader:

A/Professor John Eastwood



Early Years research refers to health and medical studies on our most important citizens, our young. The stream's research focus is to advance the understanding of early developmental origins of health and disease.

Research targeted at addressing inequities that predispose particular children to having a poorer health status is another important focus. This is particularly important in the South West of Sydney as there are significant populations with relative socio-economic disadvantage and large migrant, refugee, and non-English speaking populations, as well as a small but significantly disadvantaged Aboriginal population. Clinicians have noted a growing increase in presentations of children from these sub-groups with health and developmental concerns.

Early Years researchers are working towards improving the outcomes of children, particularly those residing in South Western Sydney, and to use the research outcomes to deliver improved health services to these children and their families.

The overall goal of the Early Years Stream is to translate research into clinical practice. Early Years is committed to supporting clinicians to apply evidence based principles in clinical practice through conducting systematic reviews of diagnosis, treatment and prognosis. The stream fosters research that links healthcare data with research data, synthesising the evidence base into a form that illustrates to clinicians, service providers and policy makers the importance of developing strategies that maximise children's wellbeing and health outcomes.

EARLY YEARS RESEARCH GROUP

Group Leader: Associate Professor John Eastwood

The EYRG is a multidisciplinary collaboration under the leadership of A/Professor John Eastwood. It brings together perinatal, paediatric and child health clinical and community health professionals from Allied Health, Centre for Health Equity Training Research and Evaluation (CHETRE), Child and Family Nursing, Cochrane Prognosis Methods Group (CPMG), Department of Community Paediatrics, Feto-Maternal Unit, Infant, Child and Adolescent Mental Health (ICAMHS), Karitane, Neonatal Intensive Care Unit (NICU), Research Evaluation, Monitoring and Surveillance (REMS) and the Simpson Centre. The EYRG is continually expanding to include additional health professionals from other departments/discipline from both the South Western Sydney and Sydney Local Health Districts who are interested in early years' research.

Adverse events and circumstances during pregnancy and early infancy can have profound detrimental effects on the health and development of a child. The focus of the EYRG is to advance the understanding of these early developmental origins of health and disease by strengthening and facilitating collaborative research among perinatal, paediatric and community health professionals.



The EYRG commenced a collaborative Maternal and Child Health Outcomes data linkage project in late 2012. The aim of this project is to undertake epidemiological and health services research of existing routinely collected clinical data in order to explore associations between early life experiences and the health, development and welfare of infants born in the SWSLHD and SLHD, both areas of socio-economic disadvantage and vulnerability.

The aim is to ascertain how maternal vulnerabilities such as poor demographic and socioeconomic status, antenatal/postnatal depression, and/or metabolic disturbances/complications during pregnancy predict and influence poor birth outcomes and infant/child health, development and welfare vulnerabilities. It is anticipated that this large data linkage project will assist in identifying associations between early life experiences and later health outcomes. It is hoped that the outcomes of the project will lay the foundations for further research into improving child health and child health service delivery.

Research Highlights

- The group's Flagship project "Maternal and Child Health Outcomes" kicked off in late 2012. This large data linkage project will have the potential to improve the planning and delivery of effective and dedicated health services for families with young children, ultimately improving their health and developmental prognosis and outcomes.
- The Ingham Institute is the host organisation of the Longitudinal Study of Australian Children (LSAC) datasets to which interested researchers can apply for access.
- Published eight papers.

- Through the Cochrane Prognosis Methods Group, the EYRG is supporting the development of best methodological standards for conducting prognostic systematic reviews which are essential for informing diagnosis or the identification of groups at high risk of adverse outcomes.
- EYRG researchers involved in the Cochrane Prognosis Methods Group have authored two systematic reviews focusing on autism spectrum disorder diagnosis and outcomes. The Steering Committee of the Cochrane Collaboration has agreed to include exemplar systematic reviews on prognosis in the Cochrane Library. EYRG members will work with the Cochrane Prognosis Methods Group to develop three exemplar prognosis systematic reviews, each of which will relate to three main types of prognosis research questions.



Stream Leader: **Professor Iain Gosbell**

The Infectious and Inflammatory Diseases Stream, consisting of the Arthritis Research Unit, the Antibiotic Resistance and Mobile Elements Group, the Correlative Microscopy Group and the Department of Respiratory and Sleep Medicine at Liverpool Hospital had a successful research year in 2012.

Amongst other things, the Arthritis Research Unit found the management of a common condition, gout, was managed sub-optimally but in adopting a clinical guideline significantly improved the outcomes of patients treated for gout.

The Antibiotic Resistance and Mobile Elements Group, in collaboration with Australian School of Advanced Medicine, Macquarie University found that the bacteria that cause cross infection in hospitals reside in slime layers made by the bacteria in the inanimate

environment, thus resisting efforts to remove them by cleaning. This was led to subsidiary projects to explore how this comes about and what might be done to combat it.

The Correlative Microscopy Group studies chronic inflammatory conditions at the nanoscale level by combining multiple microscopy techniques and nanotechnology. This leads to improvements in the histological diagnosis of such conditions especially cancers.

The Department of Respiratory and Sleep Medicine at Liverpool Hospital continued its collaborations especially involving the important diseases of asthma and tuberculosis, and have had a successful year with grant-seeking (10 tenable grants) and research output (21 publications).

ARTHRITIS RESEARCH UNIT

Group Leader: Professor Patrick McNeil

Led by Professor Patrick McNeil, the Arthritis Research Unit (ARU) seeks to explore how common forms of arthritis and autoimmune diseases occur and seek new or improved approaches to manage our patients with these conditions.

Research spans from basic mechanisms at the cell and molecule level, to clinical research involving patients with arthritis and autoimmune diseases, to how complex organisations like hospitals can best manage the care of patients with chronic diseases such as arthritis.

Members of the group are also involved in educational research stemming from design and evaluation of UNSW's innovative new medical student education program.

Research Highlights

- Discovered that tryptase, a protein released by inflammation cells (called mast cells) mediates cartilage damage in arthritis by activating at least two matrix metalloprotease (MMP) enzymes, MMP-3 and MMP-13. If translated to patient care, drugs that inhibit tryptase could be used as a potential new treatment for patients with arthritis.
- Our studies showed that the management of a common form of arthritis, gout by non-rheumatologists is sub-optimal (Gnanenthiran et al, Internal Medicine Journal 2011;41:610-617). Our research recommended a protocol or clinical guideline to improve patient care and this was adopted by the Sydney South West Area Health Service in 2009. A post-protocol evaluation showed use of the guideline significantly improved numerous measures of patient care by non-rheumatologists (Kamalaraj et al, International Journal of Rheumatic Diseases. 2012;15:512-520).
- Participating in UNSW's medical student education program and part of the groups research into outcomes strategies, the group published two papers which demonstrated that graduating doctors from UNSW's new outcomes-based Medicine program possess high levels of clinical and generic capabilities (Scicluna et al, and McNeil et al). The high performance in generic capabilities such as teamwork, communication and ethical practice proves that these key aspects of professionalism can be successfully and explicitly learned and assessed.
- Participated in a number of successful equipment and infrastructure grant applications, with a near-miss NHMRC application receiving a Gold Start project grant from the UNSW for studies into tryptase research project.

CLINICAL TRIALS

| FUNDING BODY | CHIEF INVESTIGATOR | TITLE OF PROJECT | DESCRIPTION |
|--------------|---------------------|------------------|---|
| UCB Pharma | Surani M, O'Neill S | EMBODY Study | International Multicentre Placebo Controlled Trial of Epratuzumab (Anti-CD22 Monoclonal Antibody) in Patients with Active Systemic Lupus Erythematosus. |

ANTIBIOTIC RESISTANCE AND MOBILE ELEMENTS GROUP (ARMEG)

Group Leader: Professor Iain Gosbell & Dr Slade Jensen

Infection prevention and control is the main focus area of the Antibiotic Resistance and Mobile Elements group (ARMEG) together with molecular microbiology. Strains of methicillin-resistant Staphylococcus aureus (MRSA) are a major cause of hospital-acquired infections around the world and are an emerging cause of infections in the wider community. In an attempt to address this global healthcare issue the laboratory's research program focuses predominantly on various aspects of this important human pathogen and current research areas include:

- MRSA ST239 genomics (Liverpool Hospital): Identification of genetic factors that influence institutional level evolution and patient outcomes
- Staphylococcal multiresistance plasmids
- Community MRSA in southwest Sydney
- Contribution of Biofilms to hospital MRO reservoirs



Furthermore, the group aims to understand the mechanisms of antibiotic resistance in clinically important bacteria, such as MRSA, vancomycin-resistant enterococci and multi-resistant Gram-negative bacteria.

The group is currently employing whole genome sequencing to identify genes, mutations and novel genetic elements that contribute to the success of these bacteria in our hospitals, particularly within an outbreak setting.

Research Highlights

- Dr Slade Jensen was appointed the Microbiology Editor for the Journal of Clinical Pathology.
- First Higher degree student, A/Prof Sebastian van Hal , has been pivotal in developing the linkages with the overseas and interstate groups, and so far has published several papers in high impact factor journals concerning his research of vancomycin resistance in MRSA.
- Showed that despite cleaning hospital surfaces with disinfectants, terminal cleaning biofilms containing viable multiresistant bacteria were not removed
- Determined that MRSA ST239 strain replacement in Liverpool Hospital is driven by carriage of the mobile DNA element ACME (Arginine Catabolic Mobile Element).
- Established a partnership with the Wellcome Trust Sanger Institute (WTSI) to sequence the genome of all MRSA ST239 blood culture isolates from Liverpool Hospital (1997-2008). This project is being funded by both WTSI and UWS and aims to identify bacterial genetic factors associated with clinical outcome.
- Established a collaboration with Prof Matt Cooper and Dr Jason Steen (Institute for Molecular Bioscience, University of Queensland) to examine the sequence data generated by the WTSI partnership. In addition, this collaboration also examines mechanisms of antibiotic resistance in MRSA and important gram-negative bacilli involved in nosocomial outbreaks.
- Established collaboration with Prof Karen Vickery and Prof Anand Deva (Australian School of Advanced Medicine, Macquarie University) to examine the contribution of biofilms in ICU to spread of multiresistant bacteria.
- The biofilm paper in J HospInf stimulated a response paper, Yezli S, Otter JA. Does the Discovery of Biofilms on Dry Hospital Environmental Surfaces Change the Way We Think about Hospital Disinfection? J Hosp Infect 2012;81:292-294., suggesting that our findings need further exploration.

CORRELATIVE MICROSCOPY GROUP

Group Leader: A/Professor Murray Killingsworth

The Correlative Microscopy Group combines nanotechnology with multiple microscopy modalities to study chronic inflammatory disease at resolutions down to the nanoscale. The group's research is focused on cell characterisation, macrophage activation, angiogenesis and fibrosis associated with renal disease, retinal disease and cancer.

Correlative Microscopy is used to extract maximum information from a single routine pathology specimen using light and electron microscopy, immunocytochemistry and time-lapse imaging. We seek to identify cells with certainty, learn how they function and understand how they contribute to the disease process. Whether they are activated or dying off, signalling or communicating with neighbouring cells or if they are mobile and invasive.

The group uses fluorophore and nanoparticle probes to label cells and their surrounding matrix. Nanoparticles have dual function being able to emit light and at the same time be seen by electron microscopy. This improvement in visualisation down to the molecular level will help us to understand the behaviour of cells involved in inflammation and cancer. If we can recognise the factors that lead to changes in single cells - a fundamental level of tissue organisation - we can then look at how these events may be blocked and this may assist with controlling the disease process.

Research Highlights

- Immunocytochemical studies have identified the time period (one week) over which tissue antigenicity remains viable in routine freeze sectioned biopsy tissue. Prior to this, frozen sections were retained indefinitely for possible diagnostic use if required. However, it is now apparent that after one week the possibility of false negative staining may occur. It was also found that the incorporation of detergents in rehydration buffers produced improvement in immunostaining consistency.
- Development of the new quantum dot-based correlative microscopy method using routine electron microscopy tissue has relevance to



renal and cancer diagnosis currently undertaken in Anatomical Pathology. These probes are brighter and do not fade under examination as do conventional reagents such as FITC and so are able to be imaged far more efficiently with higher resolution.

- Demonstration of super-resolution light microscopy/electron microscopy correlation with quantum dot nanocrystals.
- Successful processing and high-resolution visualisation of freeze-fixed cells in the native state without chemical fixation.
- Obtained Biostation IM-Q time-lapse live cell imaging system with funding secured from South Western Sydney Pathology and The Ingham Institute, allowing for improved visualisation of hypoxic tumour cell with electron microscopy correlation.
- New antibody-based detection of senescent and apoptotic cells in renal fibrotic lesions.
- Somatostatinoma tumour cells do not display the same level of hormone secretory activity. Hormone production may vary from prominent to negligible in tumour cells forming glandular structures in a single specimen. At the subcellular level hormone is stored unevenly in individual secretory granules with many granules displaying no reactivity. This uneven distribution has implications for the detection of tumour cells in biopsy and surgical specimens using methods that rely on detection of somatostatin hormone.
- Published in prestigious Journal of Histochemistry and Cytochemistry of new correlative microscopy method using quantum dot nanocrystals.

DEPARTMENT OF RESPIRATORY AND SLEEP MEDICINE

Group Leader: Professor Guy Marks

Headed by Professor Guy Marks, the Department of Respiratory and Sleep Medicine is conducting clinical research in diverse fields including asthma, COPD, bronchiectasis, sleep disorders, tuberculosis and interventional pulmonology. In addition, several of our researchers are engaged in public health and epidemiological research on sleep disorders, tuberculosis, asthma and COPD. Some of the studies the group is currently running include:

- New treatments for severe asthma.
- Novel ways of reducing flare-ups in people with bronchiectasis.
- Alternative treatments to prevent tuberculosis in people who have been infected with the TB germ.
- Changes in asthma and allergy during adolescence.

Research Highlights

- Professor Guy Marks received \$2.4M over four years from the NHMC for studies into understanding and ameliorating the human health effects of exposure to air pollution: from knowledge to policy and public health practice.
- Establishment of the respiratory rigid bronchoscopy service at Liverpool Hospital.
- Established the endobronchial ultrasound unit at Liverpool Hospital.
- Tuberculosis control: from discovery to public health practice and policy was awarded \$2.4M over four years from the NHMRC.
- Published nineteen papers in peer review journals and two reports for the COAG Standing Council on Environment and Water, 2012.

CLINICAL TRIALS INFORMATION

| FUNDING BODY | CHIEF INVESTIGATOR | TITLE OF PROJECT | DESCRIPTION |
|------------------|--|--|--|
| Industry funding | Dr M Baraket Prof G. Marks | A 12-Month, Double-Blind, Placebo-Controlled, Parallel-Group Study to Evaluate the Efficacy and Safety of Reslizumab (3.0 mg/kg) in the Reduction of Clinical Asthma Exacerbations and Change in Lung Function in Patients (18-75 Years of Age) With Eosinophilic Asthma, Phase 3. | Assessing a New Treatment of Patients with a Form of Severe Asthma That Does Not Respond Well to Other Treatments. |
| NHMRC | Prof G. Marks | A Randomised Clinical Trial of 4 Months Rifampicin vs. 9 month Isoniazid for Latent TB Infection. Phase 3 Effectiveness. | Assessing a New Way of Treating Patients with Tuberculosis Infection. |
| NHMRC | Prof Peter Bye Dr Mark Elkins (at Liverpool) Dr Zinta Harrington Prof Guy Marks | Novel Interventions for the Diverse Population of Australians with Bronchiectasis. | Assessing Better Way of Preventing Flare-Ups in People with Bronchiectasis |
| NHMRC | Prof Guy Marks | Sex-Related Changes in Asthma During the Transition Through Puberty in the CAPS Birth Cohort. | Evaluating a Birth Cohort for Features of Asthma and Allergy as they Transition Through Puberty. |



INJURY



Stream Leader: **Professor Ian Harris**

The Injury Research Stream comprises the Brain Injury Rehabilitation Research Group (BIRRG) and the Whitlam Orthopaedic Research Centre (WORC), both housed at the Ingham Institute.

The Brain Injury Rehabilitation Research Group comprises two research teams: a Clinical research team and a Health Services research team. The mission of the group is ameliorate the effects of traumatic brain injury and

our specific emphasis is on intervention research that will make a practical difference in people's lives. Dr Grahame Simpson, research group leader, was co-principal investigator for a major \$1million dollar grant from the United States Department of Defence Military and Suicide Research Consortium to trial Window to Hope with brain-injured US military veterans. WtoH is a psychological program for the treatment of moderate to severe hopelessness after brain injury developed here at Liverpool Hospital by Dr Simpson.

The BIRRG also completed the largest Australian study into vocational participation after traumatic brain injury, funded by the NSW Lifetime Care and Support Authority, with the results indicating that there are poor levels of return to competitive employment after TBI across NSW. We expect to receive funding in 2013 to trial two vocational rehabilitation interventions that may improve this return to work rates. In 2012 the Group produced 14 articles in peer review journals. We also received funding to commence two new studies in the areas of investigating resilience among families supporting relatives with traumatic injury and the further psychometric development of a measure that evaluates the use of compensatory strategies for the management of cognitive and behavioural changes after brain impairment.

The Whitlam Orthopaedic Research Centre performs and supports research and education activities aimed at improving the outcomes and minimising the harms from healthcare interventions, particularly related to musculoskeletal conditions. In 2012, the Centre received grant funding from HCF for an Australia-wide study of joint replacement surgery. The project, planned for the next 3 years and the appointment of a new project officer, will investigate variations in hospital practice and the relationship with outcomes after total hip and knee replacement surgery. Another grant, received in 2012 from the Motor Accident Authority (NSW), for a project looking at opioid dependence after traumatic injury has led to the appointment of another full time research officer and is expected to run for two years.



WORC has also expanded its registry activities, with a Chair position on the Australian and New Zealand Hip Fracture Registry (ANHFR), and establishment of ACORN (the Arthroplasty Clinical Outcomes Registry, NSW). To assist the process of establishing these new registries, WORC has appointed a full time registry manager. ACORN has commenced data collection and the ANZHFR aims to be up and running in 2014.

WORC was well represented at scientific meetings in 2012, and the WORC Annual Symposium in 2012 attracted 130 participants to the event at Liverpool Hospital, further showcasing the research output from the Centre.

WORC has also continued to further its contribution to research by increasing the number of scientific publications, with 16 publications in 2012, in major journals such as The Lancet, the Medical Journal of Australia, and Clinical Orthopaedics and Related Research. WORC supervised several undergraduate researchers, 2 Masters Students and six PhD students in 2012 and plans to increase the number of doctorate students and appoint a post-doctorate researcher in 2013.

BRAIN INJURY REHABILITATION RESEARCH GROUP

Group Leader: Dr Grahame K Simpson

The Brain Injury Rehabilitation Research Group (BIRRG) portfolio has included two specific areas of research predominately; Health Service Research and Clinical Research. The Health Service Research team investigated the key aspects of clinical service delivery and outcomes for state-wide brain Injury rehabilitation programs for people with traumatic brain injury. The group's projects include the management of challenging behaviours, vocational participation and intervention project, as well as models of case management.

The Clinical research group continues its studies into investigating functional and psychosocial interventions and outcomes through systematic reviews, observational studies, psychometric development of novel health measures, small scale (Phase II) randomised controlled trials and n=1 single participant trials for people with traumatic brain injury and/or families that support them.

Research Highlights

- Successfully completed the NSW Brain Injury Rehabilitation Program Vocational Participation Project which is the largest international study of vocational outcomes for people with severe traumatic brain injury.
- Results from the Vocational Participation project were presented to the NSW Compensation and have laid the platform for a state-based Vocational Intervention Project to be funded by the NSW Compensation and runs 2013-2015.
- Published 14 articles in peer reviewed journals.
- Dr Grahame Simpson delivered at the 4th Aaron Bailey Memorial Lecture on Suicide Prevention at the Dept Psychiatry, University of Colorado Denver.
- Translated the Overt behaviour Scale (co-authored by Dr Grahame Simpson) into French for use in Canada.

CLINICAL TRIALS

| FUNDING BODY | CHIEF INVESTIGATOR | TITLE OF PROJECT | DESCRIPTION |
|--------------------------|---|---|---|
| US Department of Defence | Brenner LA Simpson GK | Window to Hope: Evaluating A Psychological Treatment For Hopelessness Among Veterans with Traumatic Brain Injury. | The Purpose of this Project is to Provide Further Evidence Regarding a Ground-Breaking Psychological Treatment for Suicide Prevention in Individuals with Moderate to Severe Traumatic Brain Injury (TBI). The Current Project Aims to adapt Window to Hope for U.S. Military Personnel / Veterans (Expert Consensus Conference, Participant Total up to 15), Implement the Intervention in a VAMC (Pilot Groups 1-4, Participant Total Up to 12), and Replicate the Results from the Original Trial in this Novel Context with a Larger Sample Size (n=70 Completed Protocols [up to 90 Recruited]). Deliverables are Expected to Include an Intervention Suitable for Both Dissemination and Larger Phase III Trials. |
| University of Wollongong | Whiting DL Deane FJ Ciarrochi J McLeod H Simpson GK | A Trial of Acceptance and Commitment Therapy to Facilitate Psychological Adjustment After Traumatic Brain Injury. | This Study is a Randomised Controlled Group Treatment Programme with Clients of the Brain Injury Rehabilitation Unit Demonstrating Clinically Significant Levels of Psychological Distress. They Will Be Randomly Allocated to Either the Treatment Group (Acceptance and Commitment Therapy) or the Control Group (Befriending Intervention) Which Run for 2 hourly Sessions for 6 Weeks with a One Month Follow Up. Measures of Acceptance, Mood and Motivation Will Be Undertaken Pre-Treatment and After the One Month Follow Up. De-Identified Data From the Outcome Measures Will Be Analysed Statistically for Changes Pre and Post Intervention. |

WHITLAM ORTHOPAEDIC RESEARCH CENTRE (WORC)

Group Leader: Professor Ian Harris

Headed by Professor Ian Harris, the WORC engages in and conducts research relevant to clinical orthopaedic conditions. Most of the research is clinically-based and includes observational studies, audits, patient and service provider surveys, systematic reviews and RCTs.

The research of WORC is steered primarily by two of the WORC Directors, Ian Harris and Justine Naylor, who undertake their own research as well as oversee projects conducted by post-graduate students, research officers assigned to specific projects, UNSW staff, ILP students and clinicians interested in research.

Research Highlights

- Published 17 articles in peer-reviewed journals.
- Initiated Australia's first clinical outcomes registry in arthroplasty, ACORN, Arthroplasty Clinical Outcomes Registry.
- Received funding to the tune of \$211K from the Motor Accidents Authority (MAA) for studies into 'Opioid Dependence in Major Orthopaedics Fractures'.
- 2nd annual WORC Symposium was attended by 160 people from across NSW.
- Completion of a large randomised controlled trial conducted by the group and Vicki Ko (PhD student) has informed rehabilitation practices across Sydney South West Local Health District concerning Total Knee Replacement.
- Publications of original research and reviews on knee arthroscopy have led to discontinuation of this procedure at Liverpool, Fairfield and Campbelltown Hospitals.

CLINICAL TRIALS

| FUNDING BODY | CHIEF INVESTIGATOR | TITLE OF PROJECT | DESCRIPTION |
|------------------|--|--|--|
| Amgen | Ian Harris | A Multi-Center, Randomised, Double-Blind, Placebo-Controlled Study to Determine the Efficacy, Safety and Tolerability of AMG785 in Adults with a Fresh Unilateral Hip Fracture, Status Post-Surgical Fixation. | A Multicentre, International Trial of a New Bone Growth Stimulant Aiming to Test its Effect on Fracture Healing. |
| Synthes | Ian Harris | Norian Drillable. | A Trial of a New Bone Substitute Consisting of Fibre Reinforced Calcium Phosphate Cement. It Is Used to Fill Bone Defects When Treating Bone Fractures and is Used in Place of Bone Graft That is Usually Taken From the Patient. |
| Internal and AOA | Ian Harris, Rajat Mittal, Justine Naylor, Sam Adie | Combined Randomised and Observational Study of Surgery for type B ankle fracture treatment. (CROSSBAT) | This Trial Compares the Outcome of Surgery to Non-Operative Treatment for Common Ankle Fractures - Type B Fractures. Opinions Differ Regarding the Best Treatment for These Common Fractures and No Previous Randomised Trial Has Been Performed to Answer the Question. We Are Close to Closing Recruitment and Will Then Be Following Patients Up for One Year After Their Injury. |
| Internal | Buhagiar M, Naylor JM, Harris IA, Kohler F | HIHO – Hospital Inpatient versus Home programme after TKR. | A RCT Comparing an Inpatient Rehabilitation Programme to a Home Programme Following TKR. |

Stream Leader: Professor Derrick Silove



Mental Health and Brain Science research programs at the Ingham Institute seek to understand issues relating to mental health as the number of patients affected in Australia is rapidly growing and becoming an imminent concern for Australian Mental Health specialists and service providers.

Statistics indicate that Mental Health is on the incline, with a vital need for better and improved models of care. For this reason, a number of groups have received large national and international funding grants to review and improve the quality of life for those affected.

The Mental Health research stream is housed within Liverpool Hospital and is a world-leader in research inquiring into the epidemiology, risk factors and adverse outcomes of mass trauma and persecution.

Research projects include refugee and asylum-seeker populations in Australia and internationally, conflict-affected populations in countries such as Timor, Vietnam, Cambodia, the Solomon Islands and Aceh [Indonesia].

The Mental Health research stream works closely with health professionals and clinicians on the front line as a means of establishing transcultural best practice in a clinical setting.

It has been particularly successful in consolidating and growing valuable services for the immigrant and refugee populations of the South West Sydney region, translating a complex vision into readily usable tools and procedures for the clinician.

The stream was involved in a number of research programs, resulting in 51 publications in prestigious scientific journals. In addition, Professor Derrick Silove was awarded the UNSW Goldstar for studies into Investigating Gender Bias In The Diagnosis Of Posttraumatic Stress Disorder Using Novel Investigative Techniques in 2012.

ACADEMIC UNIT OF CHILD PSYCHIATRY SOUTH WEST SYDNEY (AUCS)

Group Leader: Professor Valsamma Eapen

The Academic Unit of Child Psychiatry studies many facets of child developmental and psychiatric disorders including Tourette Syndrome, Autism, ADHD; Adolescent Mental Health, Psychotropic Induced Metabolic Syndrome, Perinatal Anxiety, Maternal Separation Anxiety, Attachment and Associated Genes and Oxytocin Hormone and Developmental Surveillance and Developmental Outcomes.

The groups 'Watch Me Grow' study combines qualitative and quantitative examination of the barriers and enablers for developmental surveillance and an assessment of the accuracy of the current methods of identification of developmental disorders.



Research Highlights

- Published the world first study showing effectiveness of Early Start Denver Model for preschool children with autism in a group setting in the community.
- Professor Valsa Eapen in collaboration with Associate Professor Raymond Clarke and other colleagues at Ingham Genetics Unit have developed a pathogenetic model for Tourette Syndrome.
- A health promotion and lifestyle intervention program was evaluated for weight gain and metabolic side effects of antipsychotic agents in adolescent inpatients which has been translated to clinical practice. This has now been followed up with Prof. Eapen's membership in the Youth Metabolic Steering Committee for the development of the Metabolic Screening and Treatment Algorithm for NSW.
- Findings from the Separation Anxiety study allows for the early detection starting from the perinatal period and guide attachment based intervention programs targeting these symptoms in the mother which in turn will improve the maternal and infant outcomes.
- Professor Eapen published two books in 2012, "Where There is No Child Psychiatrist" and "Essentials of Psychiatry" and co-authored three book chapters related to perinatal anxiety and depression, as well as commenting on mental health legislation in Australia and New Zealand.
- The group published 19 papers in peer-reviewed journals.

PSYCHIATRY RESEARCH AND TEACHING UNIT (PRTU)

Group Leader: Professor Derrick Silove

The Psychiatry Research and Teaching Unit (PRTU) was established in 1991 following the appointment of the Foundation Chair in Psychiatry, UNSW and the SSWAHS, in 1990. The unit currently consists of 5.8 FTE staff with competitive funding supporting a number of additional positions.

Since establishment the PRTU (and the Centre for Population Mental Health Research) has attracted over 50 collaborative research and project grants exceeding \$20m and has published over 250 publications, many in high-ranking journals such as the Lancet and JAMA.

The PRTU has been a partner on to 5 year NHMRC Program Grants (2004-; 2010-2014) involving all the leading researchers in the country in the field of traumatic stress. The centre currently holds 3 NHMRC grants (2 for 5 years) and has recently been awarded a Prestigious QE-II Fellowship, and one, five years ARC grant). The PRTU is regarded nationally and internationally as a leading research and training centre in the interrelated fields of transcultural, refugee, post-conflict, posttraumatic and disaster mental health and the mental health of developing countries.

In addition the PRTU has been involved in supporting student and registrar teaching, clinical service development, information system management and international development work.

Research Highlights

- Published 11 papers in peer-reviewed journals.
- Awarded the UNSW Goldstar grant for studies into investigating gender bias in the diagnosis of post traumatic stress disorder using novel investigative techniques.
- In partnership with the HCMC University of Medicine and Pharmacy, Centre for Family Medicine the group developed Continuing Medical Education Units for MUS that have been incorporated into the National Curriculum for Family Medicine Training Programs for implementation across all family medicine training programs implemented across 10 Medical Universities in Vietnam from 2013.
- Professor Silove co-authored the first edition of the book “Mental Health and Human Rights: vision, praxis and courage” published in the UK.

CLINICAL TRIALS

| FUNDING BODY | CHIEF INVESTIGATOR | TITLE OF PROJECT | DESCRIPTION |
|--|---|--|--|
| National Health and Medical Research Council | Steel Z, Sumathipala A, Tarantola D, Zwi AB, Liddell B. | Ethnographic Treatment, and Policy Responses to Patients Presenting for Care with Chronic Medically Unexplained Symptoms in Vietnam: “A Randomised Control Trial of Cognitive Behaviour Therapy, Structured Care and Treatment as Usual”. | There are 3 Arms to this Trial. Arm 1: Mood Enhanced Cognitive Behaviour Therapy for Medically Unexplained Symptoms. Arm 2: Structured Care. Both Interventions are Administered Using Once-Weekly 30-Minute Sessions of One-on-One Therapy with a Primary Care Physician over 4 Consultations with an Option for 2 Additional Consultations. Arm 1, Cognitive Behaviour Therapy Includes an Initial Ethnographic Illness Interview and Then Metaphor Based Cognitive Restructuring to Reduce Abnormal Illness Behaviour, Breathing Retraining for Anxiety Symptoms, and Activity Scheduling for Depression Symptoms, with Sleep Hygiene Instruction. Arm 2, Structured Care Involves an Initial Ethnographic Illness interview Followed By Time Matched Clinical Sessions With a Primary Care Physician Without the CBT Content. |

| FUNDING BODY | CHIEF INVESTIGATOR | TITLE OF PROJECT | DESCRIPTION |
|---|---|---|--|
| Research Council Linkage Project | Bryant RA; Weston R; Whyman N; Files J; Silove D; Brooks RT; Steel Z; Senior KA; Newman LK. | Randomised Controlled Trial of a Traditional and Modified Healing Program for Enhancing Social Emotional Wellbeing in Indigenous Australian Children. | There are 2 Arms to this Trial. Arm 1: Healing Program. Arm 2: Healing Program/CBT. Therapy is Administered Once-Fortnightly Over 12 Weeks in a Group Format, Augmented with 3-Once Fortnightly One-on-One Sessions with a Counsellor. Healing Program Includes Education About Traditional indigenous Knowledge and Rituals, Awareness Rising of Problems in Communities and the Historical Context in Which They Have Developed, and Traditional Practices to Address Current Problems. The Duration of the Study for any Participant Will Conclude After the 6-Month Follow-Up Assessment, Resulting in Participation Duration of 9 Months. |
| Australian Research Council Linkage Project | Bryant RA; Steel Z; Silove D. | Randomised Controlled Trial of Cognitive Behaviour Therapy and Supportive Counselling for Reduction in Posttraumatic Stress Disorder (PTSD) Symptoms in Acehese Children. | This Trial is Comparable to a Parallel Trial Being Conducted in Acehese Adults (ACTRN12610001085066). There are 2 Arms to this Trial. Arm 1: Cognitive Behaviour Therapy. Arm 2: Supportive Counselling. Therapy is Administered in Once-Weekly 60-Minute Sessions of One-on-One Therapy with a Counsellor Over 6 Weeks. Cognitive Behaviour Therapy Includes Imaginal Reliving of Trauma Memories, In Vivo Exposure that Includes Gradual Exposure to Feared Situations, and Cognitive Restructuring of the Trauma Experience. The Duration of the Study for any Participant will Conclude After the 6-Month Follow-Up Assessment, Resulting in Participation Duration of 8 Months. |
| Australian Research Council Linkage Project | Bryant RA; Steel Z; Silove D. | Randomised Controlled Trial of Cognitive Behaviour Therapy and Supportive Counselling for Reduction in Posttraumatic Stress Disorder (PTSD) Symptoms in Acehese Adults. | Cognitive Behaviour Therapy: Therapy is Administered in Once-Weekly 60-minute Telephone Calls with a Clinical Psychologist Over 5 Weeks. Cognitive Behaviour Therapy Includes Education About Post Concussive Syndrome, Imaginal Reliving of the Trauma Memories, In Vivo Exposure That Includes Gradual Exposure to Feared Situations, and Cognitive Restructuring of the Trauma Experience and the Post Concussive Syndrome Symptoms. The Duration of the Study for Any Participant Will Conclude After the 3-Month Follow-Up Assessment, Resulting in Participation Duration of a Maximum of 5 Months. |



SCHIZOPHRENIA RESEARCH UNIT

Group Leader: Professor Philip Ward

The Schizophrenia Research Unit conducts research into the causes of and better treatments for patients suffering from schizophrenia and other major mental disorders.

The Unit's primary academic partner is the School of Psychiatry, UNSW, with major collaborative links with a range of other research groups, including the Macquarie Centre for Cognitive Science, (Macquarie University), the Priority Centre for Brain & Mental Health Research (University of Newcastle), Brain and Mind Research Institute, (University of Sydney) and the Laboratory for Neuro-Imaging (University of California, Los Angeles).

A major focus for the group has been the recruitment of help-seeking young people for the 'Minds in Transition' study that aims to identify the neurocognitive correlates of transition to psychosis, supported by a 5 year NHMRC project grant.

Research Highlights

- Received funding to the tune of \$US 490,663 for studies into the evaluation of a targeted cognitive training program for the treatment of freezing of gait.
- Published eight papers in high level peer reviewed scientific journals.





GRANTS & PUBLICATIONS

RESEARCH GRANTS

CANCER

ARC. *Unified Platform for Real Time QA in Radiation Therapy on Medical LINAC and Brachytherapy Based on High Resolution Silicon Detectors (MagicPlate).* Rozenfeld, Petasecca, Guatelli, Carolan, Jackson. 2012-2013, \$200,000

ARC. *Development of Innovative Radiation Detectors and Computational Techniques for Improving Quality of Life.* Rozenfeld, Zaider, Dzurak, Jameson, Lerch, Guatelli, Kuncik, Petasecca, Reinhard. 2010-2012, \$340,000

ARC LIEF Scheme. *An Adaptable and Dedicated Linear Accelerator for Medical Radiation Research.* Keall P; Jackson M; Rozenfeld A; Barton M; Greer P; Vial P; Baldock C; Metcalfe P; Thwaites D; Kuncic Z; Holloway L. et al. 2012, \$600,000

ARC. *Communication Skills Training for Oncology Healthcare Professionals Working with Culturally and Linguistically Diverse Patients.* Meiser B, Kissane D, Girgis A, Butow P, Goldstein D, Hale S, Perry A, Aranda S, Sargeant C. 2012-2015, \$170,793.

ARDENT FP7 (CERN). Silari, Rozenfeld. 2012-2014, \$109,000

Association for International Cancer Research. *Modulating Cholesterol-Dependent Lipid Rafts and Caveolin in Prostate Cancer Therapy.* Hill M, Nelson CC, Parton RG, Lee CS. 2011-2013, £208,076.

Bruyere Continuing Care. Faculty of Medicine. *The Preventative Role of Exogenous Melatonin Administration in Patients with Advanced Cancer Who Are at High Risk of Delirium; a Feasibility Study Prior to a Larger Randomized Controlled Trial.* Lawlor, P; Bush S; Momoli, F; La Porte C, Periera J, Agar M, Currow D, Elliott H, Tierney S, Allard P, Dasgupta M. 2012, \$CAN58,761.92.

Cancer Australia, beyondblue and National Breast Cancer Foundation. *Evaluation of a Psychological and Educational Intervention for Fear of Cancer Recurrence; A Cluster Randomised Controlled Trial.* Butow P, Thewes B, Turner J, Gilchrist J, Girgis A, Sharpe L, Bell M, Beith J, Mihalopoulos C, Boyle F, Clarke S, King M, Boyes A, Hill G, Armstrong D. 2012-2015, \$496,702.

Cancer Australia + National Breast Cancer Foundation. *Quantifying the Impact of Imaging Choice for Breast Cancer Radiotherapy.* Holloway L; Delaney GP, Metcalfe P; Koh E-S; Vial P; Assoc Investigators: Lazarus E; Hargreaves B; Rosenfeld A; Collins L, Shafiq J; Keall P, Hodgkinson V; Batumalai V, Moran C. 2012-2015, \$391,596

Cancer Australia and beyondblue. *Proscan For Life: A Multimodal Supportive Care Intervention for Men With Prostate Cancer.* Chambers SK, Newton R, Girgis A, Lepore S, Mihalopoulos C, Gardiner RA, Galvao D, Occhipinti S. 2011-2013, \$598,194.

Cancer Council NSW. *A Next Generation Detector for Radiotherapy Treatment Verification With Dual Capability for Simultaneous Imaging and Dosimetry.* Vial P; Baldock C, Kuncic Z; Holloway L; Barton M. 2011-2013, \$336,125

Cancer Council NSW. Strategic Research Partnership Grant. *Genotype Guided Cancer Therapy (Genomic theragnostics).* A Biankin, S Grimmond, M Apte, D Goldstein, S Clarke, J Kench, J Samra, V GebSKI, J Wu, S Mead, L Horvath. 2011-2015, \$1,500,000.

Cancer Council of WA. *Confidence to Care: A Randomised Controlled Trial of Structured Home-Based Support and Education for Carers of People With High Grade Glioma.* Halkett GKB, Nowak A, Lobb E, Agar M, Miller L, Moorin R, Shaw T. 2012, \$99,315.

Cancer Institute NSW. *Investigation of Biomarkers For The Diagnosis and Prognosis of Common Cancers In the Community Such As Breast, Colorectal, Prostate and Head and Neck Cancers.* Lee CS. 2011-2012, \$227,921.

Cancer Institute NSW. *South West Sydney Translational Cancer Research Unit Establishment Grant.* De Souza P, Lee CS, Bokey L, Barton M, Apte M, Agar M. 2011-2014, \$1,793,333.

Cancer Institute NSW. *Chair in Radiation Oncology: Medical Physics .* Rozenfeld. 2011-2014, \$880,000

Cancer Institute NSW. *South Western Sydney Translational Cancer Research Unit.* P Dsouza, L Bokey, S Lee, M Apte, M Agar. 2011-2012, \$1,500,000.

Cancer Institute - NSW. *Improving the Quality of Life of Patients and their Primary Support Person: Developing Recommendations to Address Gaps in Cancer Information Resources.* Lambert S, Girgis A. 2012-2013, \$20,000

Cancer Institute NSW. *Towards Seamless Cancer Care: What do GPs in South West Sydney Need to Facilitate Better Integration with Cancer Services? .* Knight A, Dennis S, Girgis A. 2012-2013, \$50,000.

Cancer Institute NSW. *Feasibility Study of an Integrated, Patient-Centred Psychosocial Care Model for Patients with Urological and Head and Neck Cancers.* Girgis A, Kelly B. 2012- 2014, \$580,995.

Cancer Institute NSW. *Last Days of Life Linkage Study: Patterns of Health Services Use and Experiences of Adult New South Wales Residents in the Year Prior to Death From Illness.* Ingham J, O'Connell D, Davidson P, Girgis A, Goldsbury D, Phillips J, Pigot M, Piz M, Wilkinson A. 2011-2012, \$83,748.

Cancer Institute of NSW. *Seahorse Extracellular Flux (XF) Analyzer for the Multi-Disciplinary Sydney Cancer Research Core Facility.* Richardson DR, Boyer, M., Weninger, W., Scolyer, R.A., Halliday, G., Lee, C.S., Hambley, T., Murray, M., Lay, P., Mason, R.S., Joshua, D., Murphy, C., McLachlan, A., King, N.J.C, Dong, Q., Naresh, K., dos Remedios, C., Rendina, L., Davies, M., Assinder, S., Kovacevic, Z., Zreiqat, H., Vemulpad, S., Bao, B., Yu, Y., Bishop, A., Vanderberg, R., Zhang, D., Groundwater, P., Hawkins, C., Kalinowski, D., De Souza, P., Lane, D., Ryan, R., Hambly, B., Jansson, P., Moscato, P., Saletta F., Fraser, S., Sharland, A. 2011-2012, \$315,000

Clifford Craig Medical Research Trust. *The Potential Role of HPV in Barrett's Oesophagus and Oesophageal Adenocarcinoma.* Rajendra S, Snow E, Wang B, Robertson I, Ball M. 2008-2013, \$150,000

Coalfields Cancer Support Equipment Grant & Jane Reid HARle Memorial Research Grant Fund. *Choosing Active Surveillance For Localised Prostate Cancer: Psychological Adjustment and Quality Adjusted Life Years - Pilot study.* Carter G, Denham J, White M, Britton B, Lambert S. 2012-2013, \$24,400.

Commonwealth Department of Health and Ageing. *Improving Palliative Care for People with Advanced Dementia Living in Residential Aged Care.* Agar M, Chenoweth L, Beattie E, Mitchell G, Goodall S, Luscombe G, Luckett T, Pond D, Phillips J, Davidson P, Collier A. 2012-2015, \$1,528,295.

ESRF France. Rozenfeld, Lerch, Petasecca. 2010-2012, \$84,000

Hunter Translational Cancer Research Unit (HTCRU) Priority Research Centre for Cancer (PRC Cancer). *Systematic Review of Psychological Adjustment of Men Who Choose Active Surveillance For Localised Prostate Cancer.* Carter G, Britton B, Lambert S, White M, Denham J. 2012-2013, \$10,000.

- National Breast Cancer Foundation & Cancer Australia.** *Quantifying the Impact of Imaging Choice for Breast Cancer Radiotherapy.* Holloway L; Delaney GP, Metcalfe P; Koh E-S. 2012-2015, \$391,596
- NHMRC.** *Brm and Brg-1 Protect From Ultraviolet Radiation-Induced Skin and Ocular Damage.* Halliday G, Lyons G, Di Girolamo N, Moloney F, Lee CS. 2010-2013, \$535,500.
- NHMRC.** *Improving Radiation Therapy of Static and Moving Targets Using High Spatial Resolution Real-time Dosimeters.* Rozenfeld, Burton, Jackson, Petasecca, Lerch, Metcalfe, Tome, Carolan, Kron. 2012-2014, \$524,000
- NHMRC.** *A Novel Multipurpose Probe for In-Body Imaging and Radiation Dosimetry.* Rozenfeld, Bucci, Lerch, Jakubek, Meikle, Petasecca, Zaider. 2010-2012, \$523,000.
- NHMRC.** *X-Tream: A Realtime X-Ray Treatment Monitoring and Dosimetry System for Submillimetric Radio-surgery.* Lerch, Rozenfeld, Guatelli. 2011-2013, \$394,000
- NHMRC.** *A Hybrid Magnetic Resonance Imaging Linear Accelerator (Magnetic Resonance Imaging-Linac) for Highly Accurate Radiotherapy Cancer Treatment.* Crozier S, Keall P. 2012-2014, \$480,000
- NHMRC.** *A Multi-Centre Randomized Controlled Trial to Evaluate the Effectiveness of an Algorithmic Approach to the Dagnosis and Management of Constipation in Palliative Care.* Clark K, Talley N, Currow D, Davidson P, Agar M, Phillips J, Lam L. 2011-2013, \$ 481, 469
- NHMRC.** *Targeting Microtubules to Overcome Chemoresistance in Pancreatic Cancer.* P Phillips , M Kavallaris, J McCarroll, M Apte. 2012-2014, \$573,675.
- NHMRC.** *Olympus Microscope System.* M. Apte, P. McNeil, K, Scott. 2012, \$99,990.
- NHMRC.** *IncuCyte-FLR In Vitro Live-Cell Imaging System.* N Di Girolamo, A Lloyd, P Gunning, K Gaus, M Kavallaris, C Geczy, M Apte, N Tedla, P Phillips, J McCarroll, P Polly, D Simar, P McNeil, K Bryant, R Whan. 2012, \$160,000.
- NHMRC.** *Alcoholic Chronic Pancreatitis: Induction, Progression and Reversal.* MV Apte, JS Wilson, R Pirola .2010- 2013, \$609,500.
- NHMRC.** *Coping-Together: A Randomised Controlled Trial of a Self-Directed Coping Skills Intervention for Pa-tients with Cancer and their Partners.* Girgis A, Lambert S, Turner J, McElduff P, Kayser K, Mihalopoulos C. 2012 -2015, \$718,022.
- National Space Biomed. Research Institute, USA.** *Micro-Dosimeter Instrument for Astronauts Space Sui t(MIDN).* Pisacane, Dicello, Zaider, Rozenfeld. 2010-2012, \$1.050,000.
- Prostate Cancer Foundation Australia.** *Circulating Tumour Cells.* de Souza P. 2012, \$75,000.
- Prostate Cancer Institute, St George Hospital.** *A Translational and Pharmacokinetic Study of A Novel, Oral-ly-Active, Targeted Treatment For Hormone Refractory Prostate Cancer.* de Souza PL, Scott K, Graham G. Young P, Liauw W, Russell P. 2011-2013, \$70,000.
- Prostate Cancer of Australia.** *Translational and Pharmacokinetic Study of a Novel, Orally-Active, Targeted Treatment For Hormone Refractory Prostate Cancer.* de Souza PL, Scott K, Graham G. Young P, Liauw W, Rus-sell P. 2010-2012, \$450,000.

UNSW Major Research Equipment and Infrastructure Initiative (MREII). *Translational Circulating Tumour Cells Facility.* M Apte, P De Souza, A Biankin, S Rajendra, A Girgis, M Agar, R Epstein, D Goldstein, S Della-Fiorentina, M Kohonen-Corish, L Winston. 2012, \$250,000.

University of Sydney. *IncuCyte FLR Imaging System for Cancer Researchers at the Multi-User Bosch Molecular Biology Core Facility.* Richardson DR, Scolyer R, Simes J, Weninger W, Murphy C, Lee CS, Halliday G, Damien D, Joshua D, Qihan D, Byrne S, Naylor M, Lyons G, Assinder S, Buckland M, Yu Y, Hong A, Dixon K, Lay P, Fanfan Z, Suryo Rahmanto Y, Ho PJ, Charles K, Sharland A, Jansson P, Lai D, Bao B, Kovacevic Z, Saletta F, Lovejoy D, Hambly B, Lane Kalinowski DS, Roufagalis B, Groundwater P, Christopherson R, Gamble JR, Murray M. 2011-2012, \$144,200.

University of Technology Partnership Grant. *Strategies to Decrease Pain Through Implementing a Dual Clinical Pain Pathway: Stop Pain Path Phase 1.* Davidson P, Lockett T, Lovell M, Agar M, Clayton J and Phillips J. 2012, \$29,261.

CARDIOVASCULAR DISEASE

BUPA Foundation (Formerly the MBF Foundation) *The Stop-Stroke Trial: Supporting Treatment Decision to Optimise The Prevention and Stroke.* Gattellari M, Worthington J, Zwar N, Leung D. 2010-2012, \$97,209.

NHMRC. *Patterns of Care and Outcomes For Subarachnoid Haemorrhage: A Data Linkage Study.* Worthington JM, Gattellari M, Jalaludin B, Jaegar M, Goumas C, Sheridan M. 2011- 2013, \$125,626

NHMRC. *DESPATCH: Delivering Stroke Prevention for Atrial Fibrillation: Assisting Evidence – Based Choice In Primary Care.* Gattellari M, Worthington JM, Zwar N, Leung D, Ukoumunne O, Grimshaw J. \$561,447

NHMRC. *The PRESERVE Study: The Prevention of Serious Adverse Events Following Angiography Trial.* A. Cass A; Gallagher M; Hillis G; Brieger D; Aylward P; Bellomo R; French JK; Palevsky PM; Perkovic V; Weisbord S; Lee J. 2012-2016, \$2,300,000

NHMRC. *Heart Failure SNAPSHOT.* Thomas L. 2012-2013, 300,000.

POPULATION HEALTH, PRIMARY CARE & HEALTH SERVICE

Alzheimer's Australia. *A Consumer – Focused National Website on Advance Care Planning and its Promotion Through a Social Marketing Campaign.* Shanley C, Cartwright C, Meller A, Nay R, Beattie E, Pond D. 2012-2013, \$324,000

ARACY. *MECSH Licence and Service Agreement with ARACY.* L.Kemp, 2012-2015, \$265,000.

AusAid. *Research on Clinical Safety, Risk Management and Warning Systems.* Sun N, Chen J. 2011- 2012, \$186,497

AusAid. *Evaluation of the Healthcare System Reform in China, 2009-2011.* Dai T, Chen J. 2011-2012, \$412,697

Australian Dental Association (NSW). *Piloting of a Midwife Initiated Oral Health-Dental Service to Improve the Oral Health of Pregnant Women.* George, A., Johnson, M., Dahlen, H., Ajwani, S., Bhole, S., Blinkhorn, A., & Ellis S. 2011-2012, \$10,000.

Australian Primary Health Care Research Institute. *The Impact of a Rapid Equity Focused Health Impact Assessment (EFHIA) on Local Planning for After Hour Care to Better Meet the Needs of Vulnerable Populations.* E. Harris, F. Baum, M. Wise, J. Furler, A. Lawless P. Harris, B. Harris, S. Dennis, L. Kemp. 2012 -2013, \$149,980.

ARC. *An Ecological Study of School Transition and the Early Years of School for Aboriginal Children in an Urban Community.* L Kemp, R Grace, E Comino, L J Pulver. 2012-2014, \$357,535

ARC. *Planning and Building Healthy Communities: A Multidisciplinary Longitudinal Study of the Relationship Between the Build Environment and Human Health.* Thompson SM, Randolph W, Judd BH, Jalaludin B. 2010-2012, \$354,897..

Benevolent Society. *Carry Out Preparatory Phases of a Trial Of A Volunteer Home Visiting Program in Inner West Sydney, South West Sydney, Tasmania, East Gippsland and South East Queensland.* R.Grace, L.Kemp, J. Tredoux. 2012, \$175,000

Cancer Institute of NSW. *Towards Seamless Cancer Care: What Do GPs in South West Sydney Need to Facilitate Better Integration with Cancer Services.* Knight A, Dennis S, Girgis A, Delaney G, Vagholkar S, Pennock R. 2012, \$50,030

Cancer Institute of NSW. *Cancer Services for Aboriginal Patients.* Avery S, Teng Liaw et al. 2012, \$50,000

Department of Health WA - Represented by North Metropolitan Area Health Service. *“Learning By Doing” Support In The Development of a Health Impact Assessment for the Dental Health Service Provision Business Case.* P. Harris. 2012, \$14,950.

Landcom & Heart Foundation. *Planning and Building Healthy Communities: A Multidisciplinary Longitudinal Study of the Relationship Between the Build Environment and Human Health.* Thompson SM, Randolph W, Judd BH, Jalaludin B. 2010-2012, \$180,000..

NHMRC. *Improving Maternal and Infant Outcomes: A Multicentre Randomised Controlled Trial of Midwifery and Dental Intervention.* George, A., Johnson, M., Dahlen, H., Ajwani, S., Bhole, S., Yeo, A. Associate Investigators: Blinkhorn, A., & Ellis S, 2012-2014, \$443,510.

NHMRC. *Gudaga Project: Understanding The Health, Development and Service Use of Aboriginal Children In An Urban Environment.* E. Comino, E. Harris, L. Jackson Pulver, M. Harris, P. Smith, K. Kong. 2007 -2012 \$1,339,125.

NHMRC. *Closing The Gap: Early Childhood Sustain Home Visiting For Families Of Aboriginal Infants In An Urban Community.* L.Kemp E.Comino L. Pulver C. McMahon E.Harris, M. Harris. 2010-2014, \$2,135,875.

NHMRC. *The Gudaga Study: Describing the Health, Development, Early Education, Family Environment and Service Content of Aboriginal Children Aged Five to Nine Years in an Urban Location.* E Comino, R Grace, L. J Pulver, L Kemp, K Kong, B Jalaludin, E D Wilson. 2012-2016, \$1,525,059

NHMRC. *Investigating Best Practice Primary Care for Older Australians with Diabetes Using Record Linkage.* Comino EJ, Harris MF, Jorm LR, Haas MR, Jalaludin BB, Flack JR, Rogers K, Powell Davies G. 2010-2012, \$524,750.00.

NHMRC. *Patterns of Care and Outcomes for Subarachnoid Haemorrhage: A Data Linkage Study.* Worthington J, Gattellari M, Goumas C, Jalaludin B, Jaeger, M. 2011-2012, \$122,904.

NHMRC. *Universal Surveillance and Early Identification of Developmental Disorders.* Eapen V, Williams K, Jalaludin B, Dissanayake C, Woolfenden S. 2011-2013, \$680,598.

NHMRC. *Understanding and Ameliorating the Human Health Effects of Exposure to Air Pollution From Knowledge to Policy and Public Health Practice.* Marks G, Jalaludin B, Abramson M, Williams G, Leeder S, Morawska L, Jones A, Morgan G, Dharmage S. 2012-2016, \$2,411,828.

NHMRC. *Validation and Impact of the Four Hour Rule in the Emergency Department: A Large Data Linkage Study.* Forero R., Hillman K, Fatovich D, McCarthy S, Mountain D, Fitzgerald D, Richardson D, Sprivulis P, Middleton P. 2012 – 2014, \$1,718,864

NHMRC. *The Evaluation of a State Wide Innovative Patient Safety Improvement System on Reducing Hospital Mortality and Other Adverse Events.* Chen J, Hillman K, Flabouris A. 2012- 2014, \$724,555

NHMRC. *The Impact of Introducing Medical Emergency Team on the Reduction of Hospital Mortality and Other Adverse Events in NSW.* Chen J, Hillman K, Flabouris A. 2011-2013, \$581,827

NSW Ministry for Health. *Program On Healthy Built Environments.* Thompson S, Capon A, Randolph B, Pinnegar S, Carthey J, Bridge C, Corkery L, Mate K, Holliday S, Jalaludin B, Sainsbury P, Kurko J, Mitchell JA, Dunn S, Berryman C, Synnott E, Griffiths D, Wiggins D, Mitchell R. 2010-2014, \$1,500,000..

NSW Ministry for Health. *A Cultural Respect Program & Toolkit in General Practice.* Dahlstrom V, Filewood L, Jackson Pulver L, Wade V, Stewart J, Schutze H, Harris M, Teng Liaw. 2012, \$40,000

NSW Ministry for Health. *Capacity Building Infrastructure Grant.* Braithwaite J, Coiera E, Hillman K. 2010-2013, \$1,700,000

NSW Oral Health. *Development of a Perinatal Oral Health Program For Aboriginal Families In South-Western Sydney.* George, A; Johnson, M; Comino, E; Grace, R; Kemp, L; Knight, J; Ajwani, S; Bhole, S; Blinkhorn, A; Ellis, S. 2011-2012, \$16,410.

NSW Oral Health. *Piloting of a Midwife Initiated Oral Health-Dental Service to Improve the Oral Health of Pregnant Women.* George, A., Johnson, M., Dahlen, H., Ajwani, S., Bhole, S., Blinkhorn, A. & Ellis S. 2011-2012, \$5,095.

Reckitt Benckiser Limited. *The Effectiveness of a Fever Management Education Program For Parents With Low Health Literacy.* Alqudah, M., Johnson, M., Cowin, L. & George, A. 2011-2012, \$10,000.

South Western Sydney Local Health District (SWSLHD). *Develop a Strategic Engagement Strategy for Working with Local Government, SWSLHD and SLHD.* P. Finlay, E. Harris, 2012-2013, \$20,000.

South Western Sydney Local Health District (SWSLHD). *Support for 'Working in Locational Disadvantage Course Support' Project Teams and Annual Review.* V. Rose, J. Silk. 2012, \$22,000.

St Vincents Hospital Sydney Ltd. *Conduct Rapid HIA on the 'Health Street' project.* M Wise. 2012, \$13,090.

UK. *Provision of An Online Training Program For MECSH. Provision of Facilitator Training Material of "Learning To Communicate". Assist In the Local Adaptation and Implementation of the MECSH Program.* L. Kemp, 2012-2015, £180,000.

University of Wollongong. *Improving the Understanding of Dementia in Overseas Qualified Nurses.* Shanley C. 2011-2012, \$50,000

INFECTIOUS & INFLAMMATORY DISEASE

ARC. *The Effect of Nano and Ultrafine Particles From Traffic Emissions on Children's Health.* Morawska L, Ayoko G, Ristovski Z, Choy SL, Moore M, Williams G, Marks G, Robinson P, Woodlands J, Monk A. 2009-2013, \$774,000.

Canadian Institutes of Health Research. *A Randomized Clinical Trial Comparing Effectiveness of 4RIF and 9INH for Treatment of Latent TB Infection.* Menzies R, Schwartzman K, Pai M, Benedetti A, Yang J, Khan K, Hoepfner V, Long R, Ellwood K, Cook V, Al-Jahdali H, Memish Z, Lew WJ, Leinhardt C, Kritski A, Rolla V, Trajman A, Marks G. 2009-2015, C\$4,977,928

Corporate Funding. *Biofilms and Infection Control.* Gosbell I, Jensen S, Espedido B. 2012, \$15,000

NHMRC. *Splice Variant Tryptases.* Hunt JE, McNeil HP, Bryant K. 2010-2012, \$289,139.

NHMRC. *Sex-Related Changes in Asthma During the Transition Through Puberty in the CAPS Birth Cohort.* Marks G, Toelle B, Leeder S, Cowell C, Tovey E, Almqvist C. 2009-2013, \$783,825.

NHMRC. *CCRE in Interdisciplinary Sleep Health.* Grunstein R, Anderson C, Lui P, Cistulli P, Glozier N, Robinson P, Armour C, Marks G. 2009-2013, \$2,500,000.

NHMRC. *A Randomized Clinical Trial Comparing Effectiveness of 4RIF and 9INH for Treatment of Latent TB Infection.* Marks G, Menzies R, Seale P. 2010-2014, \$445,625.

NHMRC. *A New Direction for TB In Highly Endemic Countries: An RCT of Active Case Finding.* Marks G, Britton W, Sy DN, Nhung NV, Wood J. 2010- 2014, \$1,316,210

NHMRC. *Exploring the Role of Respiratory Virus Infections in Childhood Asthma Exacerbations.* Tovey E, Marks G, Oliver B, Rawlinson W, Reddel H, Smith W. 2011 - 2013, \$575,775.

NHMRC. *Practitioner Fellowship.* Marks G. \$102,893 over five years.

NHMRC. *Understanding and Ameliorating the Human Health Effects of Exposure to Air Pollution: From Knowledge to Policy and Public Health Practice.* Marks G, Jalaludin B, Abramson M, Williams G, Leeder S, Morawska L, Jones A, Morgan G. 2012 - 2016, \$2,411,828

NHMRC. *Tuberculosis Control: From Discovery to Public Health Practice and Policy.* Britton W, Marais B, Marks G, Sintchenko V, Graham S, Triccas J, Saunders B, Kerridge I, Bennett B, Gillbert GL. 2012 - 2016, \$2,492,535

UNSW Gold Star. *Mast Cell Tryptase-Mediated Matrix Metalloproteinase Activation: Role In Arthritis and Cancer.* McNeil HP, Bryant K. 2012, \$40,000.

UNSW. *IncuCyte-FLR in Vitro Live Cell Imaging System.* Girolamo, Lloyd, Gunning, Gaus, Kavallaris, Geczy, Apte, Tedla, Phillips, Joshua, Polly, Simar, McNeil, Bryant, Whan. 2012, \$160,600.

UNSW. Research Support. Barton, Apte, McNeil, Kaplan. 2012, \$98,830.

UNSW. *Olympus Microscope System.* Apte, McNeil, Scott. 2012, \$99,990.

INJURY

Avondale College/ Australasian Research Institute / BIRRG. *Testing a predictive model of resilience among family caregivers supporting relatives with acquired neurological disability.* Anderson M, Simpson GK. 2012-2014, \$60,000

Liverpool Cancer Therapy Centre / BIRRG. *Field Testing and Validation of the Strategy Use Measure.* E-S Koh, Simpson GK. 2012-2013, \$65,000

Military and Suicide Research Consortium, US Department of Defence. *Window to Hope: Pilot Study of an Active Control Problem Solving Therapy for Suicide Prevention (PST-SP) Among Veterans with Moderate to Severe Traumatic Brain Injury.* Brenner L, Simpson GK. 2012-2014, \$112,469

Motor Accidents Authority (MAA). *Opioid Dependence in Major Orthopaedic Fractures.* Harris IA, Naylor JM, Jalaludin B. 2012 – 2014, \$211,913.

MENTAL HEALTH & BRAIN SCIENCE

ARC. *Enhancing Mental Health in Aboriginal Children.* Bryant RA; Weston R; Whyman N; Files J; Silove D; Brooks RT; Steel Z; Senior KA; Newman LK. 2009-2012, \$1,021,140

ARC. *Separation Anxiety in Pregnancy: Associations with Oxytocin Release, Attachment Styles and Mother-Infant Interactions.* Valsamma Eapen, Derrick Silove, Bryanne E Barnett, Mark R Dadds, Jane R Phillips, Tania Trapolini. 2011-2013, \$232,767.

ARC. *Understanding Anger and its Consequences Amongst Women in Conflict-Effectuated Timor Leste: Implications for Enhancing Sustainable Development.* Silove D, Zwi A, Thorpe R. 2009-2013, \$634,220

ARC. *Building Resilience in Aceh.* Bryant RA; Steel Z; Silove D. Linkage Grant, \$630,000 over three years.

ARC. *Examination of the Cognitive and Biological Circuitry Underlying Social-Cognitive Training in First-Episode Psychosis.* A. Guastella, R. Langdon, E. M. Scott, P. B. Ward, S. L. Naismith, M. A. Redoblado Hodge. 2011-2013, \$294,292.

Commonwealth Government (FaHCSIA). *Child and Family Outcomes: Autism Specific Early Learning & Care Centre.* Valsamma Eapen. 2010 – 2015, \$400,000.

Michael J Fox Foundation for Parkinson's Research. *Evaluating a Targeted Cognitive Training Program for the Treatment of Freezing of Gait.* Simon JG Lewis, S. Naismith, P. B. Ward, 2012-2013, \$US490,663.

NHMRC. *Universal Surveillance and Early Identification of Developmental Disorders.* Valsamma Eapen; Katrina Williams, Bin Jalaludin, Cheryl Dissanayake, Susan Woolfenden. 2011-2013, \$890,598.

NHMRC. *Post-Traumatic Mental Health: Advancing Understanding of Diagnosis, Treatment and Mechanisms.* Bryant R, Silove D, McFarlane A, Creamer M. 2010-2014, \$7,060,000

NHMRC. *Impact of Maternal Mental Health On Early Childhood Development In Post-Conflict Timor Leste; Defining Key Points For Prevention And Intervention.* Derrick Silove, Susan Rees, Tamar Mendelson, Wietse Tol, Zachary Steel, Anthony Zwi. 2012, \$40,000.

NHMRC. *Ethnographic, Treatment, and Policy Responses to Patients Presenting for Care With Chronic Medically Unexplained Symptoms in Vietnam: “A Randomised Control Trial of Cognitive Behaviour Therapy, Structured Care and Treatment as Usual”.* Steel Z, Sumathipala A, Tarantola D, Zwi AB, Liddell B. 2011-2014, \$471,278.00

NHMRC. *Impaired Anticipation Of Sensory Events In Schizophrenia.* J. Todd, U. Schall, P. Michie, P. B. Ward. 2011-2013, \$300,032.

NHMRC. *The Effects of Oxytocin on Social Cognition in Schizophrenia.* A. Guastella, R. Langdon, M.A. Redoblado Hodge, P. B. Ward, E. Scott. 2010-2012, \$182,500.

NHMRC. *Neurocognitive Correlates of Transition From Ultra-High Risk Mental State to Schizophrenia.* U Schall, P. T. Michie, H. Stain, Ward PB, R. Langdon, J. Todd, P. Rasser, V. Carr and T. Weickert. 2009-2013, \$1,505,750.

UNSW Goldstar. *Investigating Gender Bias In The Diagnosis Of Posttraumatic Stress Disorder Using Novel Investigative Techniques.* Slade T, Silove D et al. 2012, \$40,000

PUBLICATIONS

CANCER

CANCER PATHOLOGY & CELL BIOLOGY

Bennett NC, Hooper JD, Lambie D, Lee CS, Yang T, Vesey DA, *Samaratunga H, Johnson DW, Gobe GC.* *Evidence for Steroidogenic Potential in Human Prostate Cell Lines and Tissues.* American Journal of Pathology, 2012, 181, 3, 1078-87.

Hong AM, Martin A, Armstrong BK, Lee CS, Jones D, Chatfield MD, Zhang M, Harnett G, Clark J, Elliott M, Milross C, Smee R, Corry J, Liu C, Porceddu S, Vaska K, Veness M, Morgan G, Fogarty G, Veivers D, Rees G, Rose B. *Human Papillomavirus Modifies the Prognostic Significance of T Stage and Possibly N Stage in Tonsillar Cancer.* Annals of Oncology, 2012, 24, 1, 215-9.

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OUR FINANCIALS

INGHAM INSTITUTE STATEMENT OF FINANCIAL POSITION 2012

ASSETS

Current Assets

| | |
|-----------------------------|-------------------|
| Cash & Cash Equivalents | 13,713,357 |
| Receivables | 4,041,771 |
| Other Assets | 3,126,193 |
| Total Current Assets | 20,881,321 |

Non-current Assets

| | |
|---------------------------------|-------------------|
| Property, Plant & Equipment | 38,385,641 |
| Financial Assets | 9,689,316 |
| Total Non-current Assets | 48,074,957 |
| Total Assets | 68,956,278 |

LIABILITIES

Current Liabilities

| | |
|----------------------------------|------------------|
| Payables | 1,384,394 |
| Employee Benefits | 25,377 |
| Deferred Revenue | 1,451,510 |
| Total Current Liabilities | 2,861,281 |

| | |
|----------------------------|------------------|
| Current Liabilities | 2,861,281 |
|----------------------------|------------------|

| | |
|-------------------|-------------------|
| NET ASSETS | 66,094,997 |
|-------------------|-------------------|



OUR COMMUNITY

Your support is crucial.

Together we can make a difference.

Donate to the Ingham Institute where your contribution will directly support critical medical research to improve the health of all Australians.



SUPPORT RESEARCH & CREATE HOPE

Like everything, a medical research facility cannot operate and achieve breakthroughs without support and funds and we need public donations to continue our important work and drive the Institute forward.

We need the community's help to spread the word and bolster public support so that we continue to make a difference in our local community. We need people to tell their friends and colleagues about the great work that the Ingham Institute is doing so that we can continue to create health outcomes for the South West and the wider Australian public.

Donations can be made via the Ingham Institute's website www.inghaminstitute.org.au or by phoning 02 8738 - 9000.

You can also help by becoming a distribution outlet for the Ingham Institute's bi-monthly Newsletter, a high-quality publication that contains the latest news and research achievements of the Institute.

Businesses and individuals can also participate in a variety of sponsorship and partnership programs, including:

NAMING RIGHTS

The Ingham Institute has facilitated a naming rights program to give corporates, businesses and philanthropic individuals the opportunity to lay their stake in the ground and become part of the Ingham Institute's new research precinct by having a premium area in the new building named after them. These exclusive high-traffic areas like Clinical Trials, the Main Laboratory and a selection of Meeting and Seminar Rooms, with the funds allocated to support further research at the Institute.

CLINICAL TRIALS

Clinical trials are going to be a big focus for the Institute, with the trials focusing developing new treatments for key disease areas impacting the community, including Cancer. Corporates and individuals can help by sponsoring these trials and having their name aligned with the creation of new breakthrough treatments and potential cures.



SCHOLARSHIPS AND FELLOWSHIPS

Our next generation are the lifeblood of medical research, and the Ingham Institute has a strong commitment to foster the development of young medical researchers coming up the ranks to encourage the broader thinking and new insights that are needed to support research.

Individuals and corporates can help Australia's next generation of medical research talent by supporting Scholarships and Fellowships for students to help them grow and establish successful careers at the Ingham Institute.

FUNDRAISE FOR THE INGHAM INSTITUTE

There are many different and fun ways you can fundraise for the Ingham Institute to help us make Australia a healthier place. We encourage individuals, community groups, organisations and companies to support the Ingham Institute's vital research by hosting external events or activities to raise funds for our medical research programs.

It is easy to turn a basic event into a fundraiser. A team building sausage sizzle or even a movie premiere night can turn into a fundraising event to raise money for critical research.

There are so many different ways you can fundraise for the Ingham Institute. You can organise your own event or participate in an existing event that raises vital funds to support the Ingham Institute to deliver better treatment options and outcomes, improving the health and wellbeing of the Australian community. Creativity is your only limit!

Some great Fundraising ideas for you to consider:

- Karaoke Event
- Trivia Night
- Golf Day
- Workplace Giving
- Race Day
- Morning Tea
- Movie Premiere
- Mufti Day
- Golf / Sports Day

The Ingham Institute is committed to making your fundraising event a success. In fact, we can help you fundraise by providing:

- Promotion of your event on our website.
- Promotion of your event on Facebook and social networking sites.
- Marketing and promotional collateral.
- A Media Release template to help get your event in the news.



VOLUNTEERING

At the Ingham Institute we are very appreciative of individual's time and commitment. Your generous donation will allow the Ingham Institute to successfully run events and raise awareness of our important medical research programs.

Most of the roles involved include administrative or event related tasks. Some of the activities that Volunteers have assisted with the Institute include:

- Office work including data entry.
- Organising mail outs.
- Packing show bags and Media Material.
- Event Assistance such as Showcases and Seminars.

IN MEMORY

In honour of losing a loved one who has passed, you can request mourners to make a gift to the Ingham Institute in their memory. In lieu of flowers, mourners can commemorate the absence of a loved one by making a donation to a worthwhile cause.

Your gift to the Ingham Institute will improve the health and wellbeing of all Australians by creating hope through our medical research programs and drive Australia towards a happy and healthier place.

If you would like to set up a memorial giving for a funeral or wake, please call Tracey Roberts on 8738- 9000 to discuss.

IN CELEBRATION

Add distinctive meaning to your special occasion by asking guests to donate to the Ingham Institute in place of giving gifts

This donation is a great idea for Christmas, Weddings, Mother's Day, Father's Day and Birthdays where together you can honour someone special in your life that has been affected by cancer, disease or injury.

By simply asking someone to donate to the Ingham Institute, you are partnering with a world class medical research facility which facilitates cutting edge research into the following streams of research: cancer, early years or childhood diseases, cardiovascular disease, infectious/inflammatory disease, community/population health, injury and mental health.

Encouraging donations can be simple as inserting the following phrase into your invitations:

'In place of gifts, I/we would be most appreciative if you could donate to the'
Ingham Institute for Applied Medical Research
PO Box 3151, Liverpool Westfields NSW 2170, www.inghaminstitute.org.au, 02 8738 9000.

INCLUDE US IN YOUR WILL

A gift in your Will is a great way to support the Ingham Institute to conduct medical research into critical disease areas which one day will improve the health and wellbeing of all Australians.

There are different types of ways in which you can elect the Ingham Institute in your Will and these include:

- **Residuary Bequest:** a percentage of your estate.
- **Pecuniary Bequest:** a specific monetary amount.
- **Specific Bequest:** specific item of value such as car, jewellery or artwork.

CORPORATE ENGAGEMENT

The Ingham Institute welcomes the support of the business community, whether you're a small or large business entity.

At the Ingham Institute we understand the importance of engaging with the business community. To facilitate and maintain our world class research centre, support from the corporate community is vital.

We strive to create a mutually beneficial relationship for all our corporate partners. In fact, we regard them as much more than partners, we refer to them as our friends. As a result of partnering with the Ingham Institute, you will become a friend of the Institute and have your business name on our Friends of the Institute wall. Further, each and every friend is widely recognised through a number of marketing, branding and media opportunities.

Why support the Ingham Institute?

- Be part of a landmark research facility in the heart of the South West of Sydney.
- Lay your stake in Australia's first high tech cancer therapy technology, the MRI-Linac Accelerator (MRI-Linac).
- Partners with two universities, the University of New South Wales, University of Western Sydney and the South Western Sydney Local Health District.
- Home to next generation medical graduates trained in our high- tech Clinical Skills & Simulation Centre.
- Leading the way in translational research outcomes focused on imminent and prevalent diseases.
- Is at the forefront of medical breakthroughs that travel from the bench to the bedside and right through to the community to improve public health.
- Founded by prominent Australian business philanthropist Bob Ingham (AO).



Ways in which you can support the Ingham Institute

- Purchase equipment.
- Naming rights to a laboratory.
- Naming rights to a level in our state of the art research facility.
- Scholarships and Fellowships Sponsorship.
- Clinical Trials Sponsorship.

WORKPLACE GIVING

By taking part in Ingham Institute Workplace Giving programme, you will become part of a landmark medical research facility dedicated to researching health and medical conditions prevalent in the South West Sydney. Your donation will change and improve the lives of so many people living with and affected with disease while you go about your daily work.

Deductions are made through your payroll account so it is probably likely you won't notice the difference to your pay, but with your ongoing support through the Workplace Giving, together we can improve the health and wellbeing of all Australians.

Your regular gift allows the Ingham Institute to study critical disease areas such as cancer, cardiovascular disease and mental health issues affecting so many Australians.

BENEFITS OF WORKPLACE GIVING

For Employees: workplace giving enables affordable giving, through a transparent and trustworthy program, with no costly fundraising. Employees are able to make donations in an efficient and tax-effective manner, eliminating the need to collect receipts or wait until the end of the year to claim a tax refund.

For Ingham Institute: workplace giving provides long term, stable funding for core programs. This funding has little or no administrative cost - there are no receipts and no cost to attract donors with targeted communications.

For employers: workplace giving can provide a low cost, administratively simple way to create community/business partnerships and build employee morale, by mobilising significant funding and volunteer involvement.

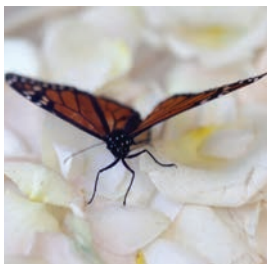
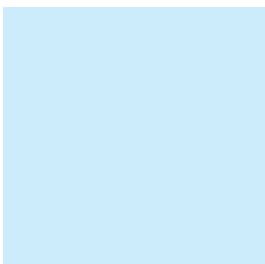
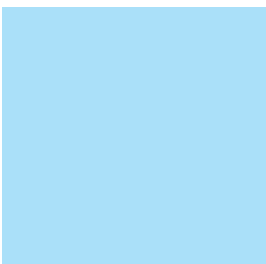
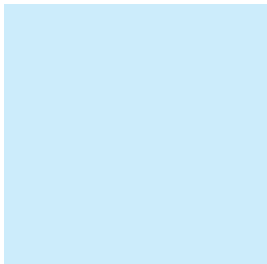
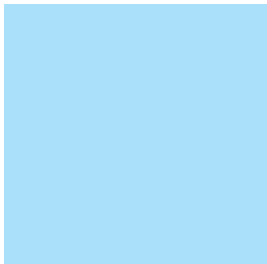
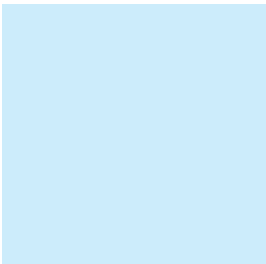
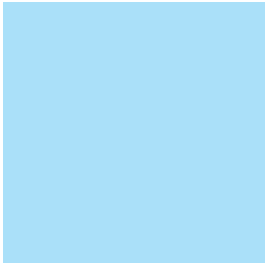
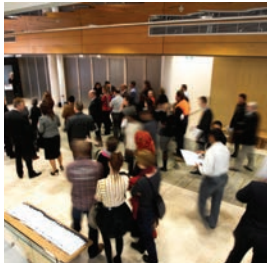
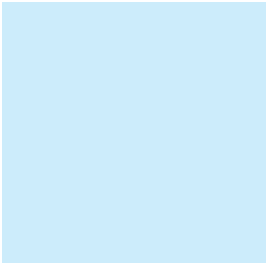
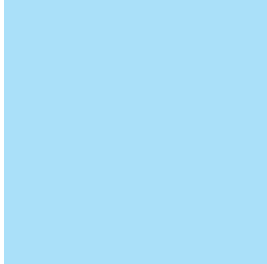
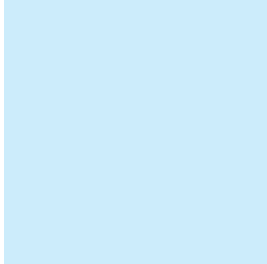
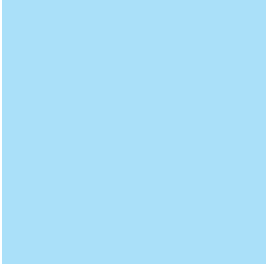
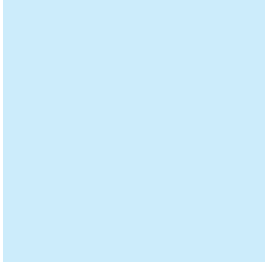
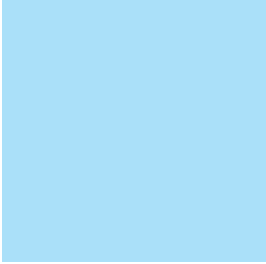
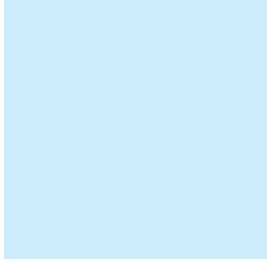
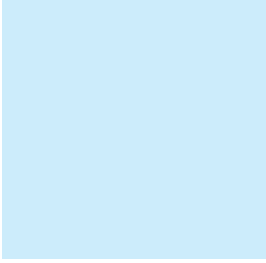
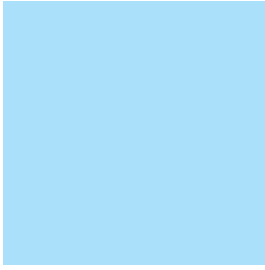
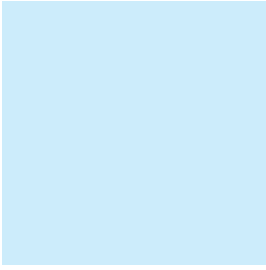
For further information about the various ways that you or your business can partner with the Ingham Institute and help us in our mission to create hope through health research for all Australians, contact Tracey Roberts the Ingham Institute's Community Relations Manager on 02 8738 9000 or tracey.roberts2@sswahs.nsw.gov.au

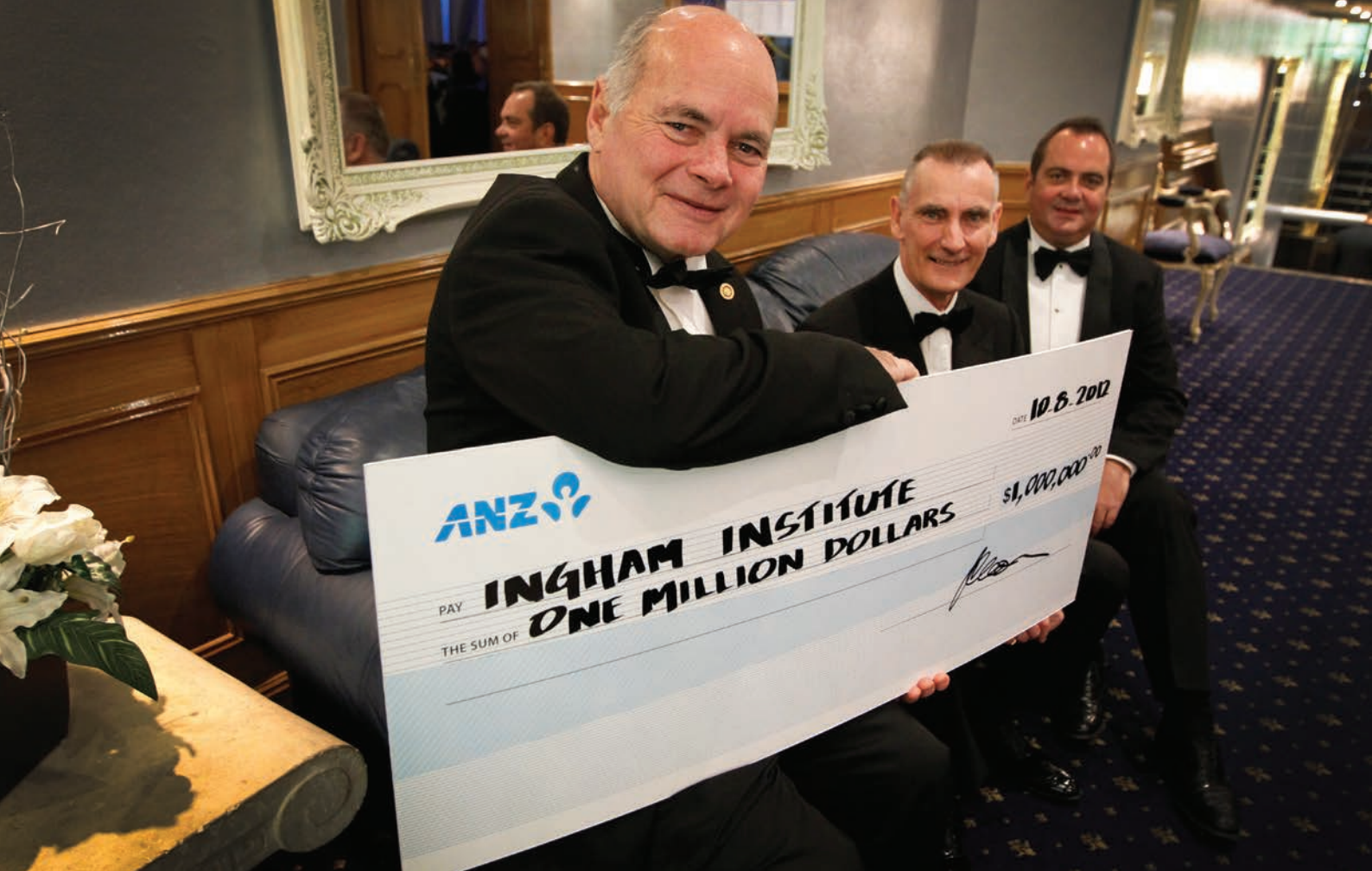


GALLERY OF EVENTS 2012

The Ingham Institute hosted many events
in 2012 that we are proud of.

Here is a snapshot of our most
memorable celebrations





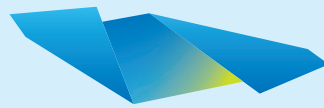
THANK YOU TO OUR MAJOR SPONSORS

- Mr Bob Ingham (AO), Ingham Enterprises
- Lady (Mary) Fairfax (AC,OBE)

THANK YOU TO OUR MAJOR PARTNERS

- South Western Sydney Local Health District (SWSLHD)
- The University of New South Wales (UNSW)
- The University of Western Sydney (UWS)
- NSW Office for Health and Medical Research
- Cancer Institute NSW

Donation Form



Ingham Institute
Applied Medical Research

Your donation will help support the life changing work of Ingham Institute doctors and scientists.

How to donate

Call us on (02) 8738 9000 from Monday to Friday

OR Return this coupon to the Ingham Institute at PO Box 3151 Westfield Liverpool NSW 2170

OR Fax us on (02) 02 9602 3221

(The Ingham Institute is a registered charity and your donation of over \$2 is tax deductible).

Payment Options

Cheque / Money Order
(made payable to Ingham Institute)

Please debit my credit card:

Visa Mastercard Amex

Please accept my donation of:

\$20 \$50 \$100 \$250

Other \$ _____

My donation is:

To support vital medical research

In support of _____

In memory of _____

I enclose my cheque for \$ _____
payable to the Ingham Institute

- - -

CVV (Card Verification Value):

Expiry Date ____ / ____ / ____

Name on the card _____

Signature _____

Please send my donation receipt to:

Name: _____

Address: _____

Email: _____

Phone: _____

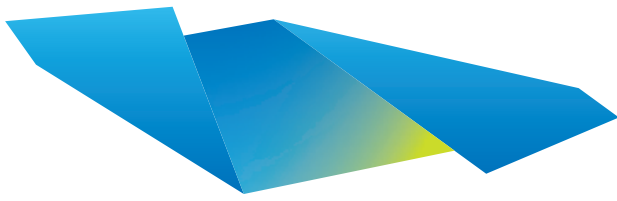
Please contact me about including the Ingham Institute in my will.

Please send me a brochure on becoming a Research Partner so I can make regular monthly donations to the Ingham Institute.

I would like to organise or participate in a fund raising event to support the Ingham Institute, please contact me about how I can help.

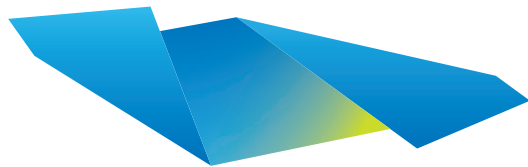
I would like to arrange a tour of the Ingham Institute's facilities.





Ingham Institute

Applied Medical Research



Ingham Institute

Applied Medical Research

SUPPORT RESEARCH. CREATE HOPE.



Health
South Western Sydney
Local Health District



UNSW
AUSTRALIA

