



COSA NEWS **PRESIDENT'S REPORT**



Professor Bogda Koczvara, President, COSA

New Year, New COSA

As I commence my term as the COSA President, I would like to reflect on the strengths of our organisation that come from its unique characteristics. I cannot think of any other cancer organisation that is so broadly multidisciplinary and so visionary in its scope. Of course there are other organisations where the different types of oncologists are equally members, but how many do you know where the role of psychologists, social workers, pharmacists and primary care providers is considered just as fundamental in the provision of cancer care? COSA leads the way in not only supporting multidisciplinary care in cancer, but in defining it with the necessary breadth and by demonstrating multidisciplinary care in cancer in its day to day activities.

The underlying principle of how COSA operates is that of multidisciplinary collaboration in everything we do - in the groups that assemble, in the projects that we take on, and in the policies and submissions that we issue on behalf of the organisation. Last year COSA led the way in enabling collaborative development in priority areas of cancer care including adolescents and young adults (AYA), geriatric oncology, nutrition, and cancer therapeutics. COSA is leading three national projects to improve management and care in the AYA area: developing an AYA

Cancer Network, producing AYA cancer clinical practice guidelines and protocols, increasing AYA cancer clinical research and participation of AYAs with cancer in clinical trials. During the last Annual Scientific Meeting (ASM) in Melbourne strategic meetings were held to address future areas of collaborative work in priority areas including supportive care and survivorship care. In the last 3 months COSA has contributed its members' expertise to reviews of Medical Services Advisory Committee (MSAC) and Therapeutic Goods Administration (TGA) as well as the National Cancer Expert Reference Group. The multidisciplinary guidelines development has been progressed further with development of neuroendocrine tumour (NETs) guidelines and agreement to establish a national NETs database.

COSA & Cancer Cooperative Trials Groups

While the enabling grant supporting enhancing collaboration of Cooperative Trials Groups has now been completed, COSA is committed to continuing its role as a facilitator and enabler of ongoing national cancer research collaboration. In November 2010, at a meeting of COSA and Cooperative group representatives, it was decided that the collaboration will continue to work towards increased efficiency of research collaboration, joint strategic planning and consumer involvement. The collaboration will continue to support the Umbrella Clinical Trials Insurance Scheme, a national Clinical Trial Research Agreement for Cooperative Trial Groups (CTRA CTG) template and the joint educational opportunities, mainly through partnership with the Association of Clinical & Regulatory Scientists (ARCS) to share and build upon the strengths and efficiencies of each of these organisations. The strategies to enhance translational research were the subject of a very successful Translational Research workshop after the COSA ASM to identify barriers to translational research and strategies to overcome them.

COSA Collaborations

COSA recognises that we cannot do it alone and addressing key challenges of cancer care often requires forging successful partnerships with those outside of our organisation. One such partnership of great value to COSA is that with consumers which we have successfully fostered for many years. In February 2011 COSA supported a meeting of consumers to facilitate greater consumer engagement in research and we are contributing to the national project on creating the National Framework for Consumer Involvement in Cancer Control, led by Cancer Australia. In November 2010 we explored greater engagement with the ANZ Head and Neck Society which will allow for greater collaboration in the area of head and neck cancer, one of the cancers with worst outcomes in Australia today.

COSA ASM 2010

It is of course at our Annual Scientific Meeting that the multidisciplinary nature of COSA and its many partnerships truly come to light. The 2010 ASM was a leading cancer event, delivered with flair by Eva Segelov. The 2010 ASM held in Melbourne was an example of a premier cancer scientific meeting highlighting the multidisciplinary membership and the power of effective collaboration. The meeting was held jointly with the ANZ Breast Cancer Trials Group and attracted a record number of attendees. The Theme “Cancer and Beyond” offered opportunities to explore emerging issues in cancer care including survivorship care (the meeting was an opportunity to commence development of a national survivorship collaborative).

The ASM facilitated collaborations with other cancer organisations as many held their meetings while at the COSA ASM, including the ANZ Breast Cancer Trials Group, the new breast surgeons’ organisation – BreastSurgANZ, the Sino Australian Surgical Oncology Conference and the Multinational Association of Supportive Care in Cancer (MASCC). The meeting once again delivered a record number of registrations, scientific presentations and satellite meetings and many “firsts for COSA” including the Presidential lecture delivered by Professor Donald Metcalf, and the multidisciplinary trainee workshop “Everything you need to know about breast cancer”. The innovative ways of delivering education were explored including spaced education offering members online learning opportunities post ASM – be sure to watch the COSA website for when the modules go live.

COSA ASM 2011

Of course we know, that one other quality of COSA is that we always want to do better, so the plans for an even better ASM in Perth from 15 – 17th November are already underway. Nik Zeps and his capable team have already mapped up a few “firsts in Perth” so expect some exciting surprises. The theme of the meeting will be “Partnerships against cancer – bridging gaps, breaking barriers”. The meeting will focus on colorectal

cancer and liver metastasis, urological malignancies and engagement with primary care.

The verve with which we can celebrate the meeting of 2010 and plan for 2011 reflects the optimism and forward planning of the COSA community - and it is these two qualities that we will need for the future. 2011 has seen Australia face challenges never encountered before in so many parts of the country simultaneously. As I heard of my colleagues planning for evacuation of the flooded hospitals in Queensland, I also heard stories of patients who were not able to make it for their scheduled cancer treatments as there was no transport, or in some cases, no home to go back to. In these dire circumstances we need to ask ourselves, how can we as a cancer community best support our patients and our colleagues? How can we be more responsive? How can we be useful not just on the national level, but also locally? It is sometimes the comments that we do not want to hear that generate the most reflection and I was left deep in thought the other day when I was quizzed by a GP of what COSA really was about, as her knowledge of COSA was quite limited. I hope that the ASM in 2011 will be a way of reaching out to those who may not know about COSA and create links with other colleagues in the cancer field who can contribute their expertise and benefit from joining the COSA community.

COSA in 2011 and Beyond

There are many challenges ahead and COSA needs to be able to respond to them. With the increasing cancer burden, limited cancer workforce and remaining barriers to access cancer care for our patients, we need to have a strong voice that can advocate for our patients and for the highest standards of care that we can deliver. To do so, we need to ensure that our members are engaged in COSA activities and are aware of all that goes on within the organisation. This year COSA will invest its energies in ensuring that communication with its members is robust and multifaceted, and ensure that you all know what goes on, and know how to be involved. Please get involved, we need you!

We need to ensure that our strategy is best supported by the governance delivered at the Council level and by the capable executive team. This year we welcome the new COSA Executive Officer, Marie Malica, who comes to COSA with a breadth of expertise in health care and research in cancer in government and not for profit sector, and a passion for the COSA mission. I hope that many of you will have a chance to meet Marie in person over the coming months.

In closing, I would like to acknowledge the COSA Council who have placed their trust in me, and thank the outgoing COSA President Bruce Mann, who has left COSA in such excellent shape, the very hard-working Executive team and the outgoing Executive Officer Marg McJannett, whose 7 year dedication to COSA has left an indelible impression.

COSA's strengths lie most of all in the diverse and capable membership of over 1400. I am humbled by that power and committed to working with all of you on advancing COSA's objectives.

Professor Bogda Koczwara
COSA President
 March 2011



2010 Outstanding Service Certificate recipients:
 Prof Stephen Ackland, Dr Jane Turner, Ms Margaret McJannett, Prof Bruce Mann, A/Prof Eva Segelov and Prof David Goldstein



2010 Council Members

COSA 2010 ASM Convenor's Report

The Annual Scientific Meeting of the Clinical Oncological Society of Australia has become an unmissable event on the calendar of Australian professionals involved in all aspects of cancer care, as evidenced by record attendance in Melbourne in November, at the fancy new (and large!) Convention Centre. Almost 2000 people participated in the various pre- and post-meeting symposia and workshops, as well as the main scientific program centered on the theme "Cancer and Beyond".

Innovations in 2010 included the inaugural trainee workshop "Everything you need to know about breast cancer", where the COSA philosophy of multidisciplinary care was reinforced using the model of multidisciplinary education, an innovation of our COSA President Bruce Mann. Trainees from medical, radiation, surgical oncology as well as nursing and allied colleagues had a packed program of lectures,

multidisciplinary clinics and Meet the Expert sessions. A spaced education research program was attached to this event.

COSA has gained greatly in the past few years from partnering with relevant organizations during the meeting. Combining the 2010 meeting with the ANZ Breast Cancer Trials Group was highly successful, as were the partnerships with MASCC and SASO.

Highlights of the main meeting included such varied activities as the well recognized Australian author Helen Garner reading from her novel "The Spare Room" in the "Focus on Carers" session; the launch of the Australian Neuroendocrine Tumour guidelines; the discussion on 'survivorship' issues of sexuality, workforce, nutrition and 'starting over'; the sessions dedicated to cancer pain, mental health and cancer, safety in cancer care delivery- just to pick out a few.

Our international Faculty was of the highest quality, and despite many suffering long trips due to the A380 aeroplane crisis, their contribution was exceptional, from the singing and dancing breast surgeon Mark Kissin, to the practical and reassuring Palliative Care specialist Sara Booth, the fascinating and challenging Isabel White and the authority and charm of the breast cancer experts Edith Perez, Anne Partridge, Mark Robson and Rowan Cheblowski. The many other international guests were equally as impressive and greatly valued by the audience. As the author of this report and the conference convenor, may I indulge and say that my favourite plenary talk was that of our Supportive Care guest Matt Loscalzo, discussing how we should value the resilience of patients and families and celebrate their achievements and coping skills rather than solely focusing on unmet needs and burdens.

Our national speakers proved that Australian research and clinical practice is on par with world's best. The quality of the invited presentations was matched by that submitted through the abstract process. The COSA ASM is now recognized as a significant meeting in which the presentation of new data and major research projects is competitively assessed. Both the oral and poster sessions were of a very high standard, and the multitude of prize winners (with thanks to our award sponsors) recognized work of major importance across all fields.



Is it all in the genes? Cancer in 2010 ASM plenary speakers: seated L to R Rowan Chlebowski; Mark Robson; Christos Sotiriou and Geoff Lindeman

The conference dinner was a time to relax after long days of learning and discussion, and enjoy entertainment from our COSA's got talent competitors, as well as the 2010 Tom Reeve Oration, delivered by John Forbes. The inaugural Presidential lecture gave the audience a chance to hear from one of Australia's most prominent and pioneering translational researchers, Professor Donald Metcalf. The final event of the conference, the "Hot Topic" debate, chaired by media personality Adam Spencer, pitched prevention against treatment in a hilarious yet thought provoking session.

My thanks as convenor go to the organising committee and to all those who contributed and attended, as well as our record number of corporate sponsors. I particularly would like to acknowledge the unwavering support of Marg McJannett and Bruce Mann. The 2011 ASM is on track to continue to deliver excellence in a forum that is comprehensive, stimulating, varied and seamlessly integrated across our multiple disciplines - everything that COSA stands for as it grows from strength to strength.

Eva Segelov
2010 ASM Convenor

COSA ASM 2011 Guidelines for Abstract Submissions

Online Abstract Submission

Abstract submission is online at www.cosa2011.org.

You are able to cut and paste your abstract into the online system. The link used for submission will first ask you to load your personal details on your "dashboard". This is the same site for registration and accommodation if required, and is an enduring page that will last for future meetings – if you registered for the 2010 ASM &/or submitted an abstract, your details should still be in the system and can be updated if necessary. You should keep all emails sent to you from this page. Once you begin your abstract submission, a number of specific background questions will be asked. The reviewers can see your answer to these questions. Once you have made your submission, you can return and edit it up until the closing date for submissions, Monday 1 August 2011.

1. Abstracts for the 2011 COSA ASM are invited to be submitted under one of the following categories:

- Basic and Translational Research
- Clinical Science
- Education and Professional Development
- Epidemiology
- Health Services
- Service Provision (poster only)
- Supportive Care

- Trials in Progress (poster only)
- Tumour Stream: Colorectal cancer
- Tumour Stream: Urological cancer
- Primary Care

Note: the tumour streams vary from year to year. The Service Provision Category is for non scientific abstracts. They do not need to follow the normal abstract format and are only considered for poster submission and are still eligible for poster awards.

2. Maximum 300 words in length including headings. Abstracts should be structured under the headings Aims, Methods, Results, Conclusions. The titles must be concise, with only the first word starting with a capital letter.
3. Reports of completed studies are preferred and will be given preference in selecting oral presentations, especially over abstracts which do not report results but indicate that they will be reported at the meeting or mere descriptions of trial methodology. Results of research will be given preference over descriptions of services for oral presentations.
4. Abstracts reporting quantitative studies should contain the planned accrual target and the actual number of patients recruited, levels of significance and confidence intervals of results. Abstracts of qualitative research should indicate how they chose their sample size (e.g. data saturation) and the methodology of analysis.
5. Abstracts will be "blinded" to the reviewers. They will not be able to see the authoring or organisation information, so submitters must not assume that there will be knowledge of the previous work of a group or strength of a research group or researcher.
6. Most of the submitted abstracts will be allocated posters as there will only be a limited number of "best of the best" for oral presentations. The best posters will be selected for specific poster presentation sessions with a discussant. There will be significant awards for the best poster presentations and posters, as well as for the best oral presentations.
7. Images are not accepted in abstracts.
8. Abstracts close Monday 1 August 2011.

Good Abstract – Bad Abstract

Please take the time to go to the COSA ASM website (www.cosa2011.org) to review examples of a good and bad abstract.

Many prizes will be awarded for best oral and poster presentations, ranging in value from \$500 to \$5000.

"BEST OF THE BEST" AWARDS

\$5000 is awarded for the Doreen Akkerman Award for the best Supportive Care oral presentation.

\$2000 is awarded to the best oral presentation and poster in each of the "Best of the Best" categories.

\$500 prizes are awarded in each category below:

- Most novel research presented by poster
- Best communication of results by poster
- Best poster by a young researcher

We also acknowledge Cancer Council Victoria for their support for the Doreen Akkerman Award.

We acknowledge Roche for their ongoing support in providing an unrestricted grant for the Best of the Best prizes.



Recipients of Best of the Best Oral & Poster Awards



Recipient of the inaugural Doreen Akkerman Award for Supportive Care

2010 Best of the Best recipients

Oral Presentations:

- Paul Wood - Basic and Translational Research
- Kevin Comlossy - Educational and Professional Development
- Annabel Pollard - Supportive Care
- Darshit Thaker - Health Services
- Lesley Stafford - Breast/Gynae Oncology
- Suzanne Moore - Epidemiology
- Jon Emery - Clinical Science

Poster Presentations:

- Baerin Houghton - Basic Clinical Science I
- Lisa Beatty - Epidemiology and Health Services
- Patricia Livingston - Supportive Care
- Yvonne Yeung - Basic and Clinical Science II

Doreen Akkerman Award for the Outstanding Presentation on Supportive Care:

- Steven Kao

Most novel research presented by poster:

- Delphine Denoyer

Best communication of results by poster:

- Michael Grace

Best poster by a young researcher:

- Tiffany Somers-Edgar

Call for Prostate Cancer Grant

COSA is pleased to call for applications for the 2011 Advancing Care for Prostate Patients Grant up to the value of \$40,000 (ex GST)



Clinical
Oncological
Society of
Australia



Applications are invited from:

- Nursing or allied health professionals
- Financial members of COSA

Visit the COSA website

www.cosa.org.au for application guidelines. Applications close Friday **13 May 2011**.

THE TOM REEVE ORATION AWARD FOR OUTSTANDING CONTRIBUTIONS TO CANCER CARE

The Tom Reeve Award, offered by COSA, formally recognises a national leader who has made a significant contribution over a relatively long period towards cancer care through research, clinical leadership and/or community service.

Nominations are open for the 2011 Tom Reeve Oration Award for Outstanding Contributions to Cancer Care.

Nominations must be made by a COSA member with support from a Council Chair.

Each nomination should include:

- An explanation of the nominee's work in the area of cancer control or research
- An evaluation of the accomplishments of the nominee
- Letters of reference from two individuals from outside the nominees' institution (where applicable). These letters should contain a critical appraisal of the nominee's work

The successful nominee will be presented with a Gold Marryalyan at the COSA Annual Scientific Meeting (November) at which he/she will deliver an address highlighting appropriate aspects of their area of professional interest.



Professor Bruce Mann presenting Professor John Forbes the 2010 Tom Reeve Award

Nominations and supporting documentation should be sent to cosa@cancer.org.au by Friday 19 August 2011.

GROUP REPORTS

ANZCHOG group

(ANZ Children's Haematology & Oncology Group)

ANZCHOG has had a promising start to trial activity in 2011 with their early phase trials group, Australian Children's Cancer Trials (ACCT), opening a Phase I/II trial for relapsed/refractory neuroblastoma. This study will open at New Zealand as well as Australian sites. Recruitment for their Phase I study for relapsed/refractory solid and CNS tumours is continuing. New international collaboration in early phase trials is also underway. This is a high priority for ACCT in 2011. ANZCHOG will continue to develop a research agenda across multi-disciplinary groups, an activity that was a focus in 2010.

A number of workshops and symposiums are planned for the year, with the first being a 2 day workshop to be held by the Psycho-oncology Group in April. ACCT has plans for a mid year symposium and also to host an international meeting of early phase collaborative groups later in the year. Educational workshops are scheduled for radiation oncology, nursing, junior oncologists and trainees, and bone marrow transplant clinicians

as part of the satellite programs scheduled during the 43rd Congress of the International Society of Paediatric Oncology (SIOP) to be held in Auckland in October. The ANZCHOG Annual Scientific Meeting will be held in conjunction with the SIOP conference this year and will provide ANZCHOG with an excellent opportunity to contribute to the international scientific program.

ANZCHOG has worked closely with the Child Health Division of the RACP and the Adult Oncology SAC to develop a new draft curriculum for Advanced Training in Paediatric Haematology-Oncology. This will be available online through the RACP website in the next month.

Peter Downie, Chair

Email: peter.downie@rch.org.au

Cancer Biology group

The inevitable quiet of the festive season and subsequent grant writing period means that there has not been a great deal of activity post ASM for the Cancer Biology group. We ran a successful translational research workshop post ASM on November the 16th which was attended by Cancer Cooperative Trials Groups, senior representatives of cancer funding agencies and advocacy groups, researchers, pathologists, biobanking representatives

and consumers. A report of the workshop is accessible at <http://www.cosa.org.au/members-area/publications/reports.html>. In short, it is clear that accessing biospecimens from cancer trials is important but there remain significant barriers to effectively rolling this out, both in terms of infrastructure and resources. Whilst standards around protocols and ethical compliance are all seen as surmountable, the current funding climate is unlikely to provide a resolution to the resources issue in the short to medium term. In the meantime COSA will maintain its advocacy role and will be building a web resource to provide information to those wishing to find out which trials have been banking samples, and who can assist with doing the collections through links to relevant sites. We hope this will be up in the second half of this year.

We'd like to remind COSA members to update their profiles to include the cancer biology group if they wish to receive further information about our activities. We intend to run parallel translational research sessions at this year's ASM and will let you know the program as soon as it is available.

Nik Zeps, Chair

Email: nik.zeps@sjog.org.au

Cancer Nurses Society of Australia

The CNSA is looking forward to another busy and successful year in 2011. On the 25th and 26th of February, the CNSA National Executive Committee met to develop the CNSA's Strategic Plan for 2011-2013. Building on our collaboration with COSA will be high on our agenda.

2010 saw considerable activity across many of CNSA's core functions. The Chairs of the Regional Groups contributed an incredible amount of energy to promote the CNSA and engage nurses across the country in our vision and mission. There continues to be a steady growth in the membership of the breast and radiation oncology specialist interest groups (SIG), and plans are underway to formalise a new gynae-oncology SIG lead by Pauline Tanner and Judy Eddy from WA. To find out more, please contact Pauline on: Pauline.Tanner@health.wa.gov.au or Judy on: Judith_Eddy@health.qld.gov.au.

2010 saw a substantial rise in the number of survey invitations sent out to CNSA members, reinforcing our role as the peak professional body for nurses working with people affected by cancer across Australia. Members of CNSA have also been involved in responding to calls for review and input into several national policy documents, most recently, the CoNNO National Nurse Credentialing Framework document.

Throughout 2011, CNSA will continue to develop new collaborations with other key nursing bodies, strengthening our membership and enhancing CNSA's capacity to support nurses caring for people with

cancer, irrespective of the health care setting within which they work. Essential to this is a strengthening of CNSA's activities across many of COSA's Groups. I am also pleased to announce that the CNSA has signed up for Global Network Membership (GNM) of the Union International for Cancer Control (UICC) as part of our membership of the ISNCC, building on our commitment from last year's Winter Congress in Perth to develop our national and international contribution to global cancer control initiatives.

And finally, CNSA Winter Congress is almost upon us again. The NEC and Local Organising Committee look forward to another successful meeting at the Sydney Convention and Exhibition Centre on July 21-23rd, 2011. For more information log on to the CNSA or congress website: <http://cnsa.org.au> <http://www.dconferences.com.au/cnsa2011>

Mei Krishnasamy, Chair

Email: meinir.krishnasamy@petermac.org

Queen's Honours List

COSA congratulates the following members:

Michael Friedlander AM
Charles Teo AM
Ian Olver AM

Clinical Professional Day Funding for COSA professional groups

2011 Call for Applications

Entering its third year as a successful initiative, COSA invites applications from its constituent professional groups to apply for Clinical Professional Day funding. The grants are up to \$7000 (+GST) to conduct "professional day" meetings or educational sessions. If your group was not a recipient in 2010 we encourage you to apply for a grant in 2011.

The aim is to hold professional days on Monday 14 November 2011, immediately prior to COSA's Annual Scientific Meeting (ASM) in Perth 15-17 November 2011. Due to demand, some professional days may be held during or immediately after the ASM (program and space allowing). Depending on the circumstances, grants may also be allocated to support professional days at other times/places in the year. Please refer to the website for further information and application forms.

www.cosa.org.au

COSA Travel Grants

COSA is happy to announce a number of Travel Grants to members to attend the Annual Scientific Meeting in Perth this November. Also, the trainee travel grants which aim to assist Oncology Trainee's in Medical, Surgical or Radiation to attend the annual meeting will be offered again for this year.

COSA-Ipsen Travel Award



Ipsen will continue its sponsorship in 2011 for the COSA Ipsen travel grant. The three recipients of the travel grant will have their name and state published in the Marryalyan and also in the Ipsen Affinity newsletter that goes to health care professionals within Australia.

Please refer to the COSA website for further information on all travel grants www.cosa.org.au

Cancer Pharmacists group

Welcome to 2011, and the second year of this committee. This year we welcome Jude Lees to the CPG committee with the other members being Maria Larizza, Dan McKavanagh, Dan Mellor and Ben Stevenson.

Welcome to all our new members and thanks to those ongoing members for your continued support of the CPG and COSA. Our group membership is now at 114 pharmacists (a new record). Please continue to encourage other pharmacists to join, especially now that membership renewal is due – don't forget to renew. Encourage new pharmacists working in cancer to join COSA, and remind those old pharmacists that haven't yet joined COSA of the benefits membership brings! The benefits of membership are numerous, and membership costs are relatively cheap. The CPG is involved in numerous aspects of COSA, and we are also moving forward with our own standards of practice. Other member benefits include access to the Asia Pacific Journal of Clinical Oncology, access to the CPG discussion forum on the website, reduced registration at COSA events (the Annual meeting, CPG seminars), access to Cancer Forum (the official journal of COSA and Cancer Council Australia), opportunity to join and participate in COSA's multidisciplinary interest groups, and even a 10% discount at Cancer Council stores!

ASM 2010

The COSA ASM 2010 was held on November 9th-11th at the Melbourne Convention Centre. The ASM was the biggest yet. The CPG assisted in the organisation of 2 sessions: a new therapeutics session (which included discussion on shared follow-up for early breast cancer, new technologies in radiotherapy, ALK inhibitors, oncogenes in melanoma and PARP inhibitors); and a safety in cancer care delivery session. Abstracts for presentations are available in the Asia Pacific Journal of Clinical Oncology. The CPG AGM was held on Wednesday 10th. A draft copy of the minutes was sent

to all members. Should anyone not have received these minutes, please contact me and I will forward a copy.

ASM 2011 - Perth November 15th- 17th

Planning for the COSA Annual Scientific Meeting in Perth is underway, so start organising your abstracts now. We have 3 CPG representatives assisting in the planning of this meeting – Debbie Bajrovic, Michael Cain and Phil Roberts. Keep an eye out on the COSA web page for further information. We hope to see as many of you in Perth for this event.

The CPG course 'Clinical Skills for Cancer Pharmacy Practitioners' Brisbane 2011

The 2 day course is designed to assist pharmacists in developing their clinical skills in cancer pharmacy practice. The course combines both lectures and interactive workshops to assist practitioners in developing their skills in providing cancer treatment to patients.

Our third course was successfully held on the weekend of 21st and 22nd August 2010, with the 4th course held in February this year. The course content is continually being updated following feedback from previous courses. The courses have been a great success, fully booked with attendees limited to 48 to allow better workshop interaction. If you or your staff would like to register your interest in attending the next course please email me at the address at the end of this report.

In addition, we recently asked members and previous attendees for their feedback regarding the development of an advanced level course. The committee is considering such a course for late 2011. Watch the COSA website for further information.

I would like to thank all the speakers for their hard work for each seminar - Christine Carrington, Lesley Dawson, Jude Lees, Dan McKavanagh (and for his tireless efforts in organising the event), Dan Mellor, Geeta Sandhu, Ben Stevenson, and Jim Siderov (that's me).

CPG committee work

The CPG is often asked to respond to requests from the COSA Council. Some of the work we have been involved in includes:

■ South Australian Cytotoxic safe handling guidelines

Ben Stevenson represented COSA and the CPG on the working group responsible for the preparation of these guidelines. The CPG was also asked to respond to the consultative draft, and completed the 5 page reply in February 2011.

■ Oncology medication safety self assessment

COSA and the CPG have been asked through the Clinical Excellence Commission to comment on the oncology medication safety self assessment tool being developed through ISMP and ISOPP. This will be progressed in the near future.

■ TGA call for submissions to review transparency

The CPG were asked by COSA Council to submit comments on the “Review to improve transparency of the Therapeutic Goods Administration (TGA)”. The CPG’s response will be submitted together with MOGA for a final joint submission to the TGA.

■ CPG Working parties

After the 2010 CPG AGM, we hope to progress several topics through 2011. These are:

- Utilise the pharmacy component of the current “COSA Guidelines on prescribing, supply & administration of cancer chemotherapy” as a base and expand the content. This would also include issue regarding competency and accreditation of pharmacists, as well as other KPI or benchmarking issues.
- Prepare a position statement on the preparation of monoclonal antibodies.

We hope to have further information before the next Marryalyan.

Committee for 2012 and beyond

The term of every committee at COSA is 2 years. This year marks the second year for this committee and, as such, a call for nominations will be sought in June. Members are encouraged to consider joining the CPG committee. More information will be forthcoming as we get closer to the call for nominations.

Jim Siderov, Chair

Email: jim.siderov@austin.org.au

Clinical Research Professionals group

COSA ASM 2010

We had yet another successful combined CRPG and the Enabling Project workshop held on Monday 8 November immediately prior to the COSA ASM, with thirty one clinical research professionals in attendance. The topics were:

Risk Management in Clinical Trials

Dr Teresa Schafer, Partner, Piper Alderman Lawyers, provided valuable and thought provoking information concerning Clinical Trial Agreements, Legal & Regulatory Considerations, Insurance & Indemnity, Compensation for Injury and Protection of Information.

Teresa included three workshops “Who’s At Fault?, Risk Minimisation and Insurance and Indemnity” to address liability issues in clinical trials. Although the acronyms used in the clinical trial scenarios were very amusing, the described events were terrifying and real.

Molecular Pathology

Dr Cliff Meldrum, Head, Molecular Pathology, Peter

MacCallum Cancer Centre introduced the audience to this fast growing emerging discipline of molecular pathology. It included how predictive markers enable personalised medicine and how molecular pathology is used in clinical diagnostics. This presentation was very appropriate and timely with the increase in targeted therapy trials.

Clinical Research Professionals Workload Planning

Marian Leischke, Senior Research Nurse, Melbourne Health presented “Workforce planning for Clinical Trials”. Although this was a very entertaining and interactive presentation, Marian had us thinking about the seriousness of the problem. The sharing of her experience and the various workload planning tools developed by VCOG Clinical Research Professionals Group was invaluable.

Please let me know if you would like further information on any of the above.

COSA ASM 2011

Planning has commenced for the 38th Annual Scientific Meeting to be held at the Perth Convention Exhibition Centre, 15 – 17 November 2011. The CRPG representative on the planning committee is Dr Jo Youd, Clinical Trial Manager, St John of God Subiaco. Although planning is well underway, Jo has advised there is still time (limited) to suggest a topic for a session. If anyone in the CRPG group has any suggestions please contact Jo urgently at Joanne.Youd@sjog.org.au

The CRPG hope to offer a workshop in conjunction with this year’s ASM dependent on interest and ability for the group to source funding.

Sandie Grierson, Chair

Email: Sandie.Grierson@smu.org.au

Familial Cancer group

The Annual Scientific Meeting of COSA marked the end of Assoc Professor Lara Lipton’s term as Chair of the COSA Familial Cancer group. I have taken on the role of Chair and the FCG Executive will comprise of Nicholas Pachter (representative on the COSA ASM planning committee 2011), Nicola Poplawski and Finlay Macrae. Lara has kindly agreed to remain on the Executive so that we don’t lose her experience and knowledge of working within COSA. I would like to take the opportunity to thank Lara for all her time and effort she gave as Chair and the advice and support she has given me in taking on this role.

Specific plans for 2011 include organising the familial cancer component of the 2011 COSA meeting as well as the familial cancer clinic’s Professional Development day at the Familial Cancer: Research & Practice 2011 meeting in August. One area of immediate focus is our relationship with the Human Genetics Society of Australia which no longer has a formal Familial Cancer

group. Professor Julie McGaughan is the current president of the HGSA and we will be in touch before the next COSA Council meeting in March to start a discussion. Any comments from the COSA FCG about developing our relationship with HGSA are welcome.

More generally during the next few years I hope we can widen the engagement of the COSA FCG membership in setting an agenda for familial cancer starting with regular email updates on current issues in both the clinical and research arena. Hopefully this will result in greater dialogue within the profession, helping raise the profile of familial cancer with other clinical disciplines and facilitate research across centres with the ultimate important improvement in outcomes for our patients and their families.

To give a flavour of what I hope we can include in our future updates in Marryalyan, I have included a summary of the current prostate cancer screening trial in men with BRCA gene mutations. Those of you who attended the meeting we had at the Mantra meeting last year will know that the future of IMPACT in Australia was uncertain as we needed to secure ongoing funding. I am pleased to be able to say that we were awarded a project grant from Cancer Australia, with the Cancer Council Tasmania, for a further 3 years funding for this project. We were also awarded a Multistate Cancer Council grant for IMPACT in the same funding round, but we elected for Cancer Australia as that gives us a full 3 years of funding and it will be easier to administer with reports back to a single funding body. Now that we have this funding we can continue recruitment and expand out to include men living in regional areas who have been unable to participate until now due to the difficulty attending a metropolitan centre on an annual basis.

IMPACT study - Identification of Men with a Genetic predisposition to Prostate Cancer: Targeted screening in BRCA1/2 mutation carriers and controls.

The IMPACT study is an international study led by The Institute of Cancer Research (ICR) and The Royal Marsden NHS Foundation Trust, UK, to determine whether PSA screening of men with a known BRCA1 or BRCA2 mutation would lead to earlier diagnosis of prostate cancers. The study will ultimately screen 1,700 men annually for at least five years. Up to January 2011, 1099 men from 40 centres across 14 countries had been recruited (BRCA1=385, 35%; BRCA2=354, 32%; Controls=348, 32%, Untested=12, 1%) with the overall aim to enrol 850 BRCA mutation carriers and 850 controls (men who test negative for their family BRCA mutation). Australia's contribution makes up 23% of the international cohort, having recruited 248 of these men from 10 centres in Victoria, NSW, SA and WA, QLD and Tasmania. The outstanding recruitment in Australia is a testament to the collaborative environment that exists within the Australian Familial Cancer community as well as the enthusiasm of men from BRCA mutation families to participate in research.

Four publications have arisen already from this study but of most immediate clinical interest are the

preliminary results from the first 300 men enrolled in the study published in the *British Journal of Urology International* 2011 Jan;107(1):28-39. Mutation carriers were more likely to have prostate cancer than non-carriers, 3.9% diagnosis rate, compared 2.1% diagnosis rate. The predictive value of the test – the number of cancers detected relative to the number of biopsies conducted – was 48%, whereas such tests in the general population tend to have a lower value of 24%. PSA testing is controversial for the general population because it does not differentiate between men with aggressive prostate cancer and those who would never experience symptoms and require treatment, and it can also return elevated results in men who do not have prostate cancer. There are therefore concerns that widespread PSA testing may lead to overdiagnosis, unnecessary therapy and side-effects for some men. In this study, the majority (78%) of mutation carriers had intermediate or high-risk disease which needs treatment, compared with 35 per cent of men diagnosed in a major population-wide screening study reported in 2009 (*N Engl J Med*. 2009 Mar 26; 360(13):1320-8).

These preliminary results add to the increasing evidence that BRCA mutation carriers develop more aggressive disease and suggest that PSA screening is reasonably accurate at predicting potentially aggressive prostate cancer among men at higher risk of the disease due to a genetic predisposition.

Gillian Mitchell, Chair

Email: gillian.mitchell@petermac.org

Gynaecology group

2010 was a very successful year. Given that it is our 10th anniversary it was appropriate that our patient accrual into clinical trials reached an all time high. 27 centres put 125 patients into studies and importantly a third of these centres were non-metropolitan. This reflects I think an increasing recognition of the value of our rural centres and hopefully we can continue to support them in the future. Currently we have 11 trials either recruiting or in follow-up and 2011 will see ICON 8, ICON 6, Outback and Paragon commencing. Funding the latter two studies is an issue and grant applications to NHMRC either have been made or will be made again in 2011.

It is very encouraging to see so many new concepts being entered for our Annual Scientific Meeting on the Gold Coast. We are going to be considering 8 new concepts at the Research Advisory Committee and hopefully at least one or two of these will see the light of day and become an International Trial similar to Outback and Symptom Benefit.

ANZGOG has been recognised for its leadership with Julie Martin taking up the Chair of the Harmonisation Committee and we congratulate her in this new position.

2010 also saw our continued reliance on and support for our consumer and community meetings. Three

meetings were held during the year, two in Melbourne and one in Sydney and all were extremely well attended, well organised and had excellent feedback. We had originally planned to have a meeting in Brisbane in 2011 but because of the floods this has been put on hold. A meeting has been mooted for Perth during COSA in November.

Funding for ICON 6 and Symptom Benefit was achieved in the NHMRC 2010 round but unfortunately Outback was not funded and a re-application will be made with the inclusion of a number of International core Investigators to add a bit of power to the application.

Portec 3 will require ongoing funding and we do need to increase our accrual into the study to demonstrate that it is going to be a success.

2011 should also see new leadership in ANZGOG. I am currently the Chair of the Intergroup and this position will continue until October 2012.

2011 looks an exciting year with the new studies coming on board; we should aim perhaps to get our patient accrual numbers over 150 this year. This is an achievable target but I recognise that it only can be reached due to the extraordinary hard work and commitment of so many of our members.

Michael Quinn, Chair

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Neuro-Oncology group

This represents a combined report from the immediate past COSA Neuro-Oncology Chair Dr Elizabeth Hovey and the newly elected Chair Dr Eng-Siew Koh.

The committee (chaired by Dr Michael Rodriguez) working with the Royal College of Pathologists of Australasia (RCPA) has now completed the final version of "Central Nervous System Tumours Structured Reporting Protocol" for anatomical pathologists, with contributions from a number of COSA Neuro-Oncology members. This document was released for public consultation in December, and is currently waiting endorsement by the RCPA Council in March. After endorsement, the protocol will be published with the other protocols, together with the guide and form on the RCPA site www.rcpa.edu.au/Publications/StructuredReporting/cancerprotocols.htm.

The Australian Cancer Network working party (chaired by Professor Michael Barton) has now completed development of a set of Consumer Guidelines to match the "Clinical Practice Guidelines for the management of adult gliomas: astrocytomas and oligodendrogliomas" which were successfully launched in late 2009 at the COSA ASM. The final stage of editing is almost complete and the aim is to have the documents published by mid-year if not sooner.

COSA Neuro-Oncology members were contacted in September 2010 to submit their current list of neuro-oncology trials and study contact details in an effort to facilitate knowledge of which studies are activated and recruiting at which sites around Australia. This list includes both cooperative trials (via COGNO) and also pharmaceutical company initiated studies and investigator-initiated (sponsored) studies. This will help optimise clinical trial opportunities for neuro-oncology patients around Australia. Members are encouraged to submit trial listings if not already done by the end of February, 2011.

AGOG (Australian Genomics and Clinical Outcomes of Glioma) continuing to expand its activities in Western Australia and NSW, with plans for recruitment being discussed in other states. Prof Anna Nowak (WA) and Dr Kerrie McDonald (NSW) continue to lead an active group of chief and associate investigators. AGOG collects tissue, blood, demographic information and clinical outcome information and will be looking at potential genetic signatures and predictive and prognostic biomarkers in glioma patients. There are current plans to conduct a range of successful studies using AGOG data. A process is now in place to allow clinicians and/or researchers wishing to access AGOG samples and data to submit their expressions of interest. See the AGOG website (www.agog.org.au) for more details.

We continue to have a close working relationship with COGNO (Cooperative Trials Group for Neuro-Oncology). The first international collaboration is represented by CATNON, a Phase III study looking at the role of the EORTC (concurrent chemo-radiation protocol proven in Glioblastoma) in the setting of anaplastic astrocytoma (in patients who do not have the 1p19q co-deletion). There are currently five activated sites recruiting around Australia with a further five to ten sites due to open later in 2011. Prof Anna Nowak is the Australian PI of the study. Another national phase II randomised study called CABARET (Dr Kathryn Field PI, Royal Melbourne Hospital) addresses the use of carboplatin and bevacizumab (versus bevacizumab alone) in the setting of recurrent glioma. The CABARET study is now actively recruiting in NSW with other national sites to follow later in 2011. In other COGNO activity, Dr Meera Agar and her team are shortly opening a pilot version of a steroid-sparing protocol in recurrent and end-stage glioma.

COGNO held their 3rd Annual Scientific Meeting alongside the Neurosurgical Society of Australasia (NSA) ASM in Coolum from 2nd – 3rd October 2010. The NSA ASM commenced on 30th September with overlap sessions with COGNO on Saturday 2nd October and a COGNO satellite meeting on 3rd October. Dr Lindy Jeffree was the 2010 COGNO ASM Convenor and we thank her and the organising committee for their efforts in executing a most successful meeting. A dynamic international panel including European neuro-oncologist Professor Michael Weller, USA neuro-oncologist James Vredenburgh and USA neurosurgeon Linda Liao led the strong program covering topics such

as: "How will we be treating high grade gliomas in 2015?", clinical trials – updates, integrating biomarkers, the roles of nursing and allied health, and aspects of health economics.

The COSA Neuro-Oncology group's AGM was also held during the COGNO ASM on 2nd October, during which elections for the new Chair and Deputy Chair were held. Dr Eng-Siew Koh, a Radiation Oncologist at Liverpool Hospital was elected Chair for the next two year term, and Dr Kate Drummond, Neurosurgeon from Royal Melbourne Hospital, was re-elected as Deputy Chair. A review of 2009/10 activities was outlined by Dr Hovey as well as proposed items for ongoing development and advocacy including developing the growing national network of Neuro-Oncology nursing care coordinators, and opportunities in 2011 for national consumer and clinician advocacy regarding brain tumours.

The 2011 COGNO ASM will be held in Sydney from August 5th-7th, alongside the Macquarie Neurosurgery conference. Mark your diaries now!

On behalf of all COSA Neuro-Oncology members, we take the opportunity to express sincere thanks and appreciation to Dr Elizabeth Hovey, immediate past Chair and a key driving force, for her tremendous dedication, hard work and commitment to building the profile and reach of this COSA sub-group marked by many highlights and achievements during her two term (four year) tenure.

Please contact Dr Koh (eng-siew.koh@sswahs.nsw.gov.au) if you would like to be involved in the COSA Neuro-Oncology group Executive for 2011, or have suggestions regarding any aspect of COSA Neuro-Oncology.

Elizabeth Hovey, Neuro-Oncology Group immediate past Chair,
Kate Drummond, Deputy Chair
Eng Siew Koh, Chair
Email: eng-siew.koh@sswahs.nsw.gov.au

Psycho-Oncology group

Thank you to Jane Turner:

As the incoming Chair of OzPOS, I would like to acknowledge the wonderful work of Jane Turner during her term as Chair. Jane managed the incorporation of OzPOS as a company limited by guarantee to facilitate our member of the International Psycho-Oncology Society (IPOS). Jane was also instrumental in the success of the first two Professional Days run in conjunction with the COSA ASM. Jane, we thank you for your dedication, energy and tireless efforts to support all of us by making OzPOS stronger.

Professional Day 2010:

The second OZPOS and PoCoG Psycho-oncology Professional day was held on Monday 8 November 2010

at the Melbourne Convention and Exhibition Centre, as a satellite event to the Clinical Oncological Society of Australia's (COSA) 37th Annual Scientific Meeting (ASM). The focus of the second Psycho-oncology Professional day was aspects of survivorship care and complex clinical cases in psycho-oncology.

The Professional Day was jointly funded by COSA and PoCoG. PoCoG received funding for this event from the Australian Government through Cancer Australia. I would like to thank the POCoG Executive Office team for all of their hard work in making this such a valuable day for OzPOS members.

120 individuals registered through ASN conferences in conjunction with their registration for the COSA ASM and 105 attended the Psycho-oncology Professional Day. The attendees were predominantly Australian psychosocial researchers and clinicians, nurses, social workers, oncologists, health professionals and others with an interest in psycho-oncology.

The program comprised a plenary session, three research sessions, three workshop sessions and a panel discussion session. The discussion panel was chaired by the international guest A/Prof. Matthew J. Loscalzo whose participation in the Professional Day was generously sponsored by COSA.

The professional day overall was very highly regarded with over 97% of participants rating it as either very good or excellent. Most respondents thought that it was important to have an opportunity to present research outside of the COSA ASM, attend clinical skills workshops, perhaps highlighting the lack of such opportunities in general.

The second OZPOS and PoCoG Psycho-oncology Professional Day was once again successful in providing a dedicated forum for the excellent psycho-oncology research being conducted in Australia and creating an opportunity for researchers and clinicians to interact and exchange ideas. The event successfully engaged junior researchers by giving them an opportunity to present and receive feedback about their work and establish more formal links with clinicians and researchers. The event also gave them the opportunity of being involved in the planning of the scientific program and taking on roles of session chairs.

COSA ASM:

The COSA ASM 2010 "Cancer and Beyond" was again a highly successful meeting. There were some fantastic psycho-social presentations during the plenary sessions and the best of the best sessions. Highlights for me were Matt Loscalzo discussing strengths-based patient-centered partnerships in cancer care, along with hearing of Isabel White's work in sexuality and sexual rehabilitation after cancer. Many thanks to the program committee for another excellent meeting.

OzPOS Executive - Invitation to members:

As I step into this role I am conscious that we have a diverse membership and professional issues to match. To ensure that OzPOS is addressing the needs of members I would ask you to please get in touch with me about issues that concern you. In order to support OzPOS and allow it to flourish I propose that we establish an Executive Committee of between three and five OzPOS members. As a researcher it is particularly important to me to have people working clinically represented to ensure we are abreast of the issues for clinicians. If you have any views about this or are interested in volunteering please contact me, it will be an adventure for us all!

Please do contact me about any issues pertinent to the work of OzPOS.

Haryana Dhillon, Chair

Email: haryana.dhillon@sydney.edu.au

Continuing Professional Development - Spaced Education Pilot

An exciting new COSA initiative will be to pilot a Spaced Education program (a new and evidence based online learning program developed recently at Harvard). We received fabulous feedback about the ASM survivorship plenary "Beyond Cancer", and will be offering the slides and video footage from this session. Online training modules which assess key points and learning objectives will also be available for selected presentations. We would like to acknowledge the Workforce Education and Development Group at the University of Sydney for their contribution to this project.

Radiation Oncology group

Dear Members,

I hope you had a safe new year. For those of us in Queensland the year started a bit wet.

As part of COSA overseas Developing Nations Mentoring Program for mid-career professionals from the Asia-Pacific region the Faculty of Radiation Oncology was approached for financial support. Pleasingly, the faculty has agreed to support this programme and have pledged \$10,000-12,000/year for 2 years.

The Faculty's endorsement is valid for two (2) years, after which the program commitment by the Faculty will be assessed. FRO have stipulated that the resulting FRO-sponsored Fellowship position be reserved for a radiation oncologist. COSA will administer the funds and co-ordinate the programme.

These mentorships are now available and I encourage Radiation Oncology Centres to consider becoming involved.

In other news, Australian cancer patients and others requiring radiotherapy will have increased safeguards to their treatment with the launch of the Australian Clinical Dosimetry Service (ACDS). The Parliamentary Secretary for Health, Catherine King, launched the \$2.875 million centre operated by the Australian Radiation Protection and Nuclear Safety Agency (ARPANSA), at its Yallambie Melbourne premises. ARPANSA will operate the ACDS for an initial period of three years, under a Memorandum of Understanding with the Department of Health and Ageing.

The ACDS will be led by Dr Ivan Williams, a medical physicist who was recently the Acting Head of Physics at St Luke's Hospital in Dublin, Ireland.

The service will help to maintain the quality of radiotherapy in Australia, and provide a national approach to radiation measurements, making radiotherapy more consistent across the country and safer for patients

**Sandro Porceddu, Chair
COSA President Elect**

Email: sandro_porceddu@health.qld.gov.au

Regional & Rural group

Welcome to another year and another opportunity to promote the case for improvements to rural and regional cancer care delivery.

Unfortunately I was away late last year and missed out on attending the ASM in Melbourne. I do believe that rural and regional issues are important to discuss at such an important meeting. I would ask all of the rural and regional members to think about topics for presentation at this year's meeting in Perth. As a platform for showcasing all aspects of cancer care delivery the ASM is too important an event to pass up. Could any major issues for discussion be flagged to the COSA Executive or please feel free to contact me.

The next priority for the year will be following up on the Regional Cancer Centres of Excellence program. By now the money should have all been allocated. It remains difficult to know whether all these commitments have been honoured as yet. It is also important to think about the sustainability of the projects announced. I would ask for a summary of how each of the successful centres are progressing and an idea of any sticking points. Those regional centres that may have ongoing issues relating to access and gaps in service provision it would be useful to register these with me. A forum should then be established to deal with these in a united way. Unfortunately a lot of other economic agenda items have the potential to push a lot of these initiatives out of the limelight.

Other agenda items worth considering by the group are:

- Tele-health initiatives for remote access clinics
- Patient travel and accommodation schemes and the need for national equity

- Access to new diagnostic tools such as PET
- Maintenance of Pathology services in regional areas
- What benefit will local health networks provide?
- Will Medicare locals improve primary care's ability to address prevention and earlier diagnosis?
- Will national registration make it easier to provide outreach services particularly in border areas?

I would like to try and make this a productive year for the group. I know how busy and strapped for time we all are so utilising forum groups and emailing any issues will make it easier to push a united front regarding Rural and Regional affairs. So please feel free to contact me. I will also be looking for a successor to the Chair role at the end of the year. If you are interested let me know.

Adam Boyce, Chair

Email: drboyce@bigpond.net.au

Urologic Oncology group

Profound apologies that the demented chair of the Urologic Oncology group inexplicably failed to provide an update for the October 2010 Marryalyan. Much of the activity in late 2010 focussed on the ASM. The final day of the main meeting saw an interesting and well-attended symposium on "Prostate Cancer – From PSA Testing to Castrate Resistance." We were very fortunate to have some great speakers in this session. Lisa Horvath spoke on plasma biomarkers in castrate resistant prostate cancer. Paul Mainwaring presented some exciting data on new treatment strategies in castrate-resistant prostate cancer. David Smith presented data on sexual function five years after diagnosis of localised prostate cancer from the NSW Prostate Cancer Care and Outcomes Study. Ana Micsenescu discussed anxiety relating to regular PSA testing for disease management. The session concluded with a vigorous and entertaining "mini-debate" between Mark Frydenberg and Dallas English. Other activities in the ASM relating to our group included poster and oral presentations, and a breakfast session on practical management of toxicities related to targeted therapies. All of these activities showcased the breadth and quality of basic, translational and clinical research in all types of genitourinary cancers in Australia.

The Group AGM was held on Thursday 11 November 2010. The three incumbents of the executive positions (Ian Davis, Scott Williams and Shomik Sengupta) were re-elected unopposed. The executive will continue to meet and discuss issues relevant to the group and we would be pleased to hear from you about how we can best meet our objectives:

1. To provide an inclusive forum for cross-discipline communication between health care professionals involved in the care of patients with urological cancers, synergising but not competing with other groups.
2. To act as a national body in order to facilitate clinical and basic research in urological cancers in Australia.

3. To develop cooperative and complementary laboratory research programs in urological cancer, including development and maintenance of tissue bank resources.
4. To facilitate success in multicentre research grant applications.
5. To develop common data sets for collection of clinical information from patients with urological cancer, with a view to development and integration of national databases.
6. To provide a key point of contact for industry and other sponsors of clinical trials.
7. To promote public awareness of urological malignancies.
8. To be a source of expert advice to government, industry and other bodies.
9. To participate in COSA activities including contributing to the Annual Scientific Meeting.

Our very fruitful collaboration with sanofi-aventis continued in 2010 with the "Advancing Care for Prostate Patients Research Grants." The successful applicant for 2010 from a very high quality field was Dr Sylvie Lambert of the Cancer Council NSW and the University of Newcastle, for her project entitled, "Coping-Together: A feasibility study of a self-directed supportive care intervention to enhance the illness adjustment of couples affected by prostate cancer." This project addressed the aims of the scheme extremely well and we look forward to the outcomes of the work to be presented at the 2011 ASM. Congratulations to Dr Lambert and to all the other applicants who are performing such interesting and valuable work, and many thanks to sanofi-aventis for continuing to support this initiative.

The Urologic Oncology group works very closely with the ANZUP Cancer Trials Group (www.anzup.org.au). ANZUP held its Annual Scientific Meeting on Friday 20 November 2010 following the main COSA ASM. This included an open meeting of the ANZUP Scientific Advisory Committee. The activities of current and pending clinical trials were discussed in detail. In a free flowing and creative afternoon session, several ideas for new collaborative research projects and clinical trials were proposed and some of these are now already well advanced in terms of feasibility and resourcing. In 2011 ANZUP plans to hold a longer ASM allowing more time for presentation of research by its members. If you are interested in being involved in and steering research in genitourinary cancers, COSA and ANZUP encourage you to join both groups and to participate.

An announcement at the ASM that simultaneously broke the hearts of the COSA members and caused elation to the ANZUP members (an odd sensation for many of us) was that Marg McJannett had resigned from COSA to take up the position of ANZUP Executive Officer. Marg will be a wonderful boost for ANZUP and will continue to work closely with COSA and other key organisations.

In 2011 it gets even more interesting. Urologic cancers will be one of the main themes of this year's COSA ASM in Perth on 15-17 November 2011. We have identified some exciting international speakers and we plan to intersperse our activities throughout the ASM program, linking wherever possible to other groups' interests also. Perth is a fantastic location for the ASM so put it in your diaries now and make sure you come for the whole meeting because it will be an interesting and exciting week. Think of it not so much as a long trip; think of it as one of the few conferences you can get to from Australia's east coast and have a favourable shift in time zone so you won't fall asleep during the sessions. Add to that the wonderful location and a social program second to none, and you would be crazy to miss it.

The Urologic Oncology group wishes to continue to grow its eclectic membership and become even more inclusive, so if you are not a member and want to be, or you know of someone who should be, please feel very welcome to participate. We particularly encourage trainees on all disciplines to come along and be part of this very successful and valuable initiative.

Please do not hesitate to contact me if you want further information about the COSA Urologic Oncology group or ANZUP or you would like to participate more actively.

Ian Davis, Chair
Email: ian.davis@ludwig.edu.au

OTHER REPORTS

Cancer Voices Australia

1. CVA AGM

The 2010 AGM was held in Melbourne with Ian Roos OAM re-elected Chair. Its Board comprises elected representatives namely:

Anne Kay CVV
Julie Marker CVSA
Tony Addiscott CVWA
Leonie Young CVNSW
Kathy Smith CVNSW

Ian remains a member of COSA Council.

2. Annual MOGA Meeting

CVA attended the Annual MOGA meeting along with representatives from COSA, PBAC, DoHA, MA, BCNA, and CCA where all parties were given an update of latest developments regarding new and targeted therapies. (Note: - CVA and BCNA only consumer groups invited)

3. Clinical Trials Action Group

CVA met with Chief Medical Officer regarding the release of this report – almost 12 months since draft submitted. This matter was further discussed at a meeting with the Parliamentary Secretary for Health on

February 4th. It is anticipated that this report will be released later this month.

4. Launch of National Dosimetry Centre

In 2005, in conjunction with the CINSW there was a meeting convened in Sydney comprising DoHA, scientists, Rad oncs, Radiation therapists, to develop – a set of National RT Standards, and a National Dosimetry centre. The drivers were Prof Tomas Kron, Peter Mac and John Stubbs (now CVA Executive Officer).

On Friday 4th February the national centre was officially opened by the Minister and a set of national RT standards will be released.

In essence CVA believes that this will prevent the issues of incorrect dosage to patients and that there will never be a repeat of RAH, or Coffs Harbour!!

This is an excellent example of partnership between consumers and a totally different medical group – achieved without fanfare but will have a real impact on people affected by cancer.

5. Health and Hospitals Funding

CVA's EO, was invited as a consumer representative to be a member of a panel assessing the tenders for the latest round of funding - \$1.8B in total.

These included, Rural and Regional Cancer Centres (Round 2), e-health, workforce, and research. CVA is seen as totally independent as we do not have a link to a particular cancer and can therefore offer unbiased comments/decisions.

6. ANROTAT – The Assessment of New Radiation Oncology Treatment and Therapies

This is a confidential trial overseen by TROG and funded by DoHA to compare the dosimetry of treatment plans prepared using the new technologies against those prepared using the conventional standard approaches as a surrogate for effectiveness and safety.

CVA has been asked (and subject to appropriate confidentiality agreements) to review the protocol and patient information packages for the trial and for the Chair to be a member of the Steering Committee.

7. CVA and Oths v. Myriad

MB Lawyers submitted a large list of topics to Myriad and as at the time of this report, the parties have an Agreed Statement of Facts.

The next steps will be to take evidence from expert witnesses and for each party to provide full facts by 4 March 2011, amendments to be reviewed by 1 April 2011, with the full documentation to be argued before the Court to be on the public record by 26 April 2011.

Court date set down for Sept 2011

8. **Private Member's Bill – Gene Patenting**

Senator Bill Heffernan and others have introduced a private members' bill on this matter. CCA and Luigi Palombi are meeting regularly on this matter with MPs.

CVA must remain neutral at this time.

9. **CeHA – Consumers e-Health Alliance**

CVA through its state CVs have established links with over a dozen consumer organisations; have managed to get appointed to the national E-health committees using CVA as the flagship.

10. **painaustralia**

Both the chair and the EO have been involved in the development of this new organisation following on from the successful Pain Summit held in Canberra last March. A final teleconference was held recently which discussed potential Board members, official launch and other matters prior to incorporation.

John Stubbs, Executive Officer

Email: john.stubbs@cancer.org.au

COSA INTEREST GROUP UPDATES

AYA Interest group

AYA Cancer Network

COSA is implementing three of the Youth Cancer Networks Program national projects, intended to improve management and care of adolescents and young adults (AYAs) with cancer by:

1. developing an AYA Cancer Network
2. producing AYA cancer clinical practice guidance and protocols
3. increasing AYA cancer clinical research and participation of AYAs with cancer in clinical trials.

These projects are funded by the Australian Government's Youth Cancer Networks Program, administered by CanTeen.

COSA's AYA Cancer Steering Group met by teleconference on 22 February to review project progress and plans for 2011. Associate Professor David Thomas has stepped down from the role of Chair of the Steering Group to increase his focus on clinical research. Paediatric oncologist and long-serving Steering Group member Dr Wayne Nicholls is the new Chair. Our thanks to David for his dedicated and enthusiastic leadership of the Steering Group since its formation in 2008, and willingness to continue contributing as a member of the group.

AYA Cancer Workshop 2010

COSA's fourth annual AYA Cancer Workshop was held on Friday 12 November in Melbourne, bringing together more than 40 participants and key stakeholders in the YCNP.

Participants heard brief updates about the YCNP (from CanTeen) and the objectives and progress of each of the five jurisdictional and seven national projects. This enabled participants to identify what other project partners are doing well and/or differently and the common issues they are facing.

This was followed by discussion about common challenges and recommended strategies to address them, kindly and adeptly facilitated by Sue Sinclair (now General Manager of the National Breast and Ovarian Cancer Centre and former Director of Cancer Services and Education, Cancer Institute NSW).

Participants highlighted several opportunities for collaboration and/or national coordination and recommended strategies to:

- improve inter-project communication and knowledge sharing
- increase awareness of YCNP initiatives, via national and state/territory program launches
- ensure program branding is effective and integrated in cancer services
- more effectively engage Adult Oncologists
- coordinate advocacy and strategies to secure sustainability of new services and programs
- share referral pathways and learnings about models
- implement the AYA cancer minimum data set
- 'grow the network' – to reduce the current heavy burden on a few key players
- manage opportunities to build on the work to date.

COSA is convening another workshop in May to enable project managers and AYA health professionals to 'workshop' some of these key challenges/issues and develop strategies to address them.

A full report of the workshop is on the COSA website: <http://www.cosa.org.au/groups/aya/publications.html>

Clinical practice guidance and protocols

The final draft of COSA's guidance for health professionals about fertility preservation for AYAs diagnosed with cancer is nearly finalised. Our thanks to the expert working group members, led by Dr Kate Stern, who have developed the content of this important guidance. We will invite all AYA Cancer Network members and other interested stakeholders to comment on the guidance when it is posted on COSA's Wiki in the coming weeks.

An expert working group has been formed to develop guidance about developmental and psychosocial

issues for AYAs diagnosed with cancer, with the assistance of AYA psychologist Dr Susan Palmer. The multidisciplinary group – which includes an AYA oncologist, psychologists, a social worker, clinical nurse consultants, a cancer care coordinator and an AYA education and vocation coordinator – met in Melbourne in February to confirm the scope and content of the guidance.

COSA has invited representatives of GPs and other stakeholders to form a working group to develop the third planned guidance, aimed at reducing diagnosis delays and enhancing referral of AYA patients with suspected cancer.

If you are interested in contributing to or reviewing these guidances please email cosa@cancer.org.au.

Supporting clinical research and increasing trials participation

COSA has been consulting with the cooperative clinical trials groups (CCTGs) through the AYA Cancer Research Working Group and the COSA & CCTGs Executive Officers Network to gather data about trials open to AYA patients and current participation rates. Detailed information on trials with AYA patients has been obtained from several of the longer-established CCTGs (ALLG, ANZBCTG, ANZCHOG, ANZGCTG). Further work is underway to obtain data on trials in other tumour streams that have AYA participants.

COSA will facilitate links between CRAs and jurisdictional project staff who are working to increase trial participation, so they can share data and strategies – via a teleconference early in 2011, and then at the workshop in May.

If you would like to join the AYA Cancer Network, and receive information about the 2011 AYA Cancer Workshop and other YCNP projects, please email cosa@cancer.org.au

David Thomas, Chair

Biobanking Interest group

There is a nationally recognised imperative to support efficient and timely access to biospecimens for cancer clinical trials and research. There remain however, significant barriers to accessing biospecimens in terms of infrastructure, resources and funding. As a short term action, COSA intends to centralise the information for Clinical Trials Groups and researchers on the new COSA website, via links to existing databases and posting key resources. Information will include names of the trials groups and key contacts, an inventory of trials with biospecimens, sample consent forms, SOPs and fact sheets. We hope this will be up in the second half of this year and prove a useful resource for COSA members.

Nik Zeps, Chair

Cancer Care Coordination Interest group

The CCC Interest group hosted a breakfast workshop at the 2010 ASM in Melbourne attended by around 40 delegates. The workshop included presentations from each of the CCC working groups (Education and Conference – Lead by Douglas Bellamy; Communications and Networking – Lead by Jacinta Elks; Research and Evaluation – Lead by Patsy Yates) to update on activities of the group, as well as a presentation from Violet Platt providing a national overview of progress with cancer care coordination services. Workshop participants provided feedback on activities of the groups, and noted the importance of further promotion and advocacy in relation to cancer care coordination services. This feedback is being considered by each of the three CCC working groups, and a list of priority actions is being prepared to guide the Interest Group's work over the next 12 months. These activities will focus on: (1) developing a database or resources and improving communication between members of the interest group; (2) hosting a conference prior to the 2011 ASM in Perth; (3) undertaking a review of existing outcomes measures for cancer care coordination.

Patsy Yates, Chair

Complementary Therapies Interest group

The COSA CAMs interest group held a Concept Development Workshop on Friday 12 November, post-ASM. After a hectic ASM meeting it was surprising to see so many people still bright-eyed and very enthusiastic about discussing complementary and integrative therapy research.

The aim of the workshop was to discuss a number of CAM concept proposals to contribute to their evolution into research protocols. Four examples of complete or ongoing randomised controlled trials were presented: The Prayer study, Medical Qi Gong to improve fatigue and quality of life, ginkgo biloba to prevent cognitive impairment during chemotherapy and a physical activity intervention in people with incurable lung cancer. Presentation of these projects provided an excellent background about the development of CAM research and some of the challenges involved in starting, completing and reporting a study.

There was keenness amongst the attendees for COSA to support a workshop for novice researchers on how to undertake a research project in complementary therapies.

Bogda Koczvara, Chair

Developing Nations Interest group

The Developing Nations Session held at the COSA's ASM in November 2011 was well attended and

provided an informative and sometimes entertaining snapshot of the positive and not so positive experiences for medical oncologists working in developing nations.

This year the interest group is keen to see a pilot mentoring program take place. The supporting institution to be chosen from the excellent proposals put forward by COSA members in the second half of 2010. The mentoring program aims to host a short term fellowship for mid career specialists. Alongside this pilot program COSA is currently seeking the support from oncology societies in the Asia Pacific Region. For COSA members there will be the opportunity to:

- showcase the value of short term mentoring program to the Asia Pacific Region
- promote their institution as a leading centre of excellence in the region
- meet with fellows from the Asia Pacific Region
- establish long term relationships and networks
- engage in potential collaborative research/projects

The proposals have currently gone back to the COSA Executive for matching with appropriate international partners.

For further information please contact kathy.ansell@cancer.org.au (COSA Project Coordinator).

Matthew Links, Chair

Geriatrics Oncology Interest group

COSA's ASM in November 2010 provided an excellent platform to showcase the work undertaken by the COSA interest group members. The multicentre audit of Australian medical oncology practice documented the rate of geriatric assessment in patients aged over 70 years presenting to a medical oncology unit. It highlights the need for further education on the value of performing routine geriatric assessment in elderly patients.

With such positive feedback it is an opportune time for the interest group to establish a more formal structure to progress research, further promotion and advocacy in relation to geriatric oncology. In January this year a new Executive was formed with key representation from professional groups. The Executive members are:

- **Dr Christopher Steer (Chair); Medical Oncologist;** Border Oncology, Wodonga
- **Professor Jane Phillips; Palliative Nursing** University Notre Dame Darlinghurst
- **Dr Lakshmi Venkateswaran; Geriatric Oncologist** Westmead Hospital, Westmead
- **Professor Robert Prowse (Co-Chair); Geriatrician** Royal Adelaide Hospital
- **Ms Janette Prouse; Geriatric Oncology Nurse** Royal Adelaide Hospital

- **Dr Kheng Soo; Geriatric Oncology Trainee** Box Hill Hospital, Melbourne
- **Professor Bruce Mann; Breast Surgeon** Royal Women's Hospital, Parkville
- **Dr Nimit Singhal; Medical Oncologist** Royal Adelaide Hospital

Christopher Steer, Chair

NETs Interest group

There have been exciting developments on the two NETs projects since the October edition of the Marryalyan.

NETs Guidelines:

At the COSA Annual Scientific Meeting in November 2010, Dr Yu Jo Chua formally announced the release of the consensus guidelines for gastroenteropancreatic neuroendocrine tumours (GEP NETs). These guidelines which are the culmination of 2 years work by the very dedicated working group and COSA, aim to raise awareness of the increasing multidisciplinary management options for patients with this uncommon group of diseases.

The NETs guidelines are now posted on a public wiki platform: (http://wiki.cancer.org.au/australia/COSA:NETs_guidelines). A public consultation process started in February and will run until 30 June 2011. We encourage you and your colleagues to visit the site and appreciate constructive comments using the discussion forum. The guidelines will be revised by the working party at the end of the consultation period to incorporate the feedback.

NETs Registry:

The goal of establishing a national NETs database moved a step closer with the signing of an agreement between COSA and Ipsen, who are supporting the registry, in November 2010. The NETs Scientific Advisory Committee (SAC) and COSA will oversee the data entry and administration aspects of the registry. Ipsen will not have direct access to the data collected nor any representation on the SAC. Plans are currently being made by the SAC and COSA for rolling-out the database to interested sites by mid 2011.

This new database will facilitate the collection of retrospective and prospective data on patients with neuroendocrine tumours in Australia. Greater understanding of the trends in diagnosis and treatment of NETs, as well as the evaluation of long term outcomes will help optimise the clinical care for patients with these rare tumours.

For further information or to express your interest in joining the NETs interest group, please contact rhonda.cousins@cancer.org.au (COSA Project Coordinator).

Yu Jo Chua, Chair

COSA ASM 2012 *Diarise now!* 13 – 15 NOVEMBER 2012

We are pleased to announce the 2012 ASM will be held in Adelaide from 13 to 15 November, at the Adelaide Convention Centre.

Please join the COSA Council in welcoming the 2012 ASM convenor, Dr Nimit Singhal. Dr Singhal is a Staff Specialist in Medical Oncology at the Royal Adelaide Hospital, with interests in clinical trials and cancer in the elderly. Whilst the theme for the 2012 ASM is yet to be decided, we look forward to building on the work of Eva Segelov and Nik Zeps to bring another exciting program.



Oncology Journalism Award Luminous Award Australia 2011

*Enlightened, Intelligent and Inspiring
Cancer Reporting*

The Luminous Award Australia recognises outstanding journalism in the field of oncology. Hosted by the Clinical Oncological Society of Australia, the Luminous Award Australia honours journalists who serve their readers/viewers by providing responsible, accurate and timely information on advances in cancer prevention, research, treatment and patient support.

The Luminous Award Australia offers a cash prize of AU\$5,000 in each of two categories – print & broadcast

The Luminous Award is proudly supported by Eli Lilly Australia.

Nominations for the Luminous Awards Australia 2011 program will open in June 2011, with applications closing 31 July 2011. More information about the program is available at www.cosa.org.au.

The Living with Cancer Education Program

Facilitator training courses 2011

The Living with Cancer Education Program (LWCEP) is delivered by health professionals for people with cancer, their family and friends.

The two day facilitator training course for oncology health professionals includes information on a range of issues people face when living with cancer as well as group facilitation skills, adult learning techniques and program promotion.

For course dates and details, please visit the Cancer Council Victoria website, www.cancervic.org.au

For further details contact: **Michele Meachen & Sue Hegarty** – LWCEP Program Managers

Phone: 03 9635 5312 or 13 11 20

Email: lwcep@cancervic.org.au

Specialist Certificate In Clinical Research (Oncology)

Course Overview

Clinical research in oncology is an enormous field that integrates the efforts of a broad multi-disciplinary team; including medical, nursing, allied health, laboratory and other professionals. The Specialist Certificate in Clinical Research (Oncology) has been designed to bring together this multi-disciplinary group to give them a better understanding of all types of research conducted in oncology as well as provide an understanding of the essential components and features of successful research activities and research careers.

Students will gain an understanding of the breadth of research in oncology and the range of career opportunities. They will be presented with some of the ethical and legal considerations relevant to clinical research in oncology. They will learn of the many different outcomes assessed by oncology clinical trials, including how and why these might differ from other disciplines. Students will gain an appreciation of how to develop a research proposal /study protocol and will develop skills in critically appraising presentations and publications concerning oncology research. Students will also be exposed to many of the current active areas of research in clinical oncology research.

For further information please visit

www.mccp.unimelb.edu.au/oncology

or contact: **Lee Goodson,**

T: +61 3 9810 3388 F: +61 3 9810 3149

E: oncology@mccp.unimelb.edu.au

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COSA's 38th Annual Scientific Meeting

*'Partnerships against
cancer – bridging gaps,
breaking barriers'*

November 15-17th 2011
Perth Convention & Exhibition Centre

COSA ASM is the premier gathering of cancer health professionals in our region. The 2010 Melbourne meeting attracted over 1500 delegates including clinicians and researchers representing medical and radiation oncologists, cancer surgeons, nurses, pharmacists, and allied health workers. The theme for the 2011 conference, to be held in the Perth Convention and Exhibition Centre, *"Partnerships against cancer - bridging gaps, breaking barriers"* highlights the opportunities and challenges facing cancer health care today and in the future. This year's scientific program will focus on urological, prostate and colorectal cancers. The role of primary care in cancer will be complemented by high quality scientific oral and poster presentations and an exhibition promoting the latest in cancer pharmaceuticals, medical, diagnostic and therapeutic equipment and developments in supportive care and cancer education. The social events, traditionally highly regarded by our multidisciplinary delegates, will offer an opportunity to renew friendships and establish new professional connections. A first for COSA, we are planning a special event for all attendees - watch out for details coming soon.

We look forward to welcoming you to COSA's 38th ASM in Perth.

Nik Zeps
2011 Convenor



**Registration
and Abstract
Submission**
OPENS 1 APR 2011
Abstract Submission
CLOSES 1 AUG 2011
Early Bird Registration
CLOSES 5 SEP 2011

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