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DECEMBER 2013

COSA NEWS



Sandro V Porceddu, President - COSA



President's Report

COSA really did come of age in 2013 with the 40th ASM held in Adelaide focussing on geriatric oncology. The program was of a very high standard, kicking off with some excellent talks in the opening plenary. The meeting culminated in the Presidential Lecture on Thursday afternoon by Professor Ian Maddocks, a renowned palliative care physician and the 2013 Senior Australian of the Year. He synthesised the geriatric oncology theme to deliver a captivating lecture. His message was clear - listen to the elderly and engage with the aged. I'd like to take the opportunity to thank Nimit Singhal and his Committee for their efforts in pulling together an excellent program.

COSA continues to be viewed as the peak multidisciplinary cancer organisation with ongoing representation on the National Cancer Expert Reference Group hosted by DoHA, the Cancer Australia Intercollegiate Advisory Group and the Cancer Council Australia Board. More recently COSA was invited to join the Genomic Cancer Clinical Trials Initiative Scientific Steering

With the introduction of the new Affiliated Organisation membership category it's been pleasing to see a number of new organisations which share similar objectives to COSA connect with us. We welcome the Australian and New Zealand Head and Neck Cancer Society, Australasian Metastasis Research Society, Faculty of Radiation Oncology, and the Royal College of Pathologists Australasia, all now having a seat at COSA Council.

With the implementation of the new governance structure, COSA Council can now concentrate on being the main forum for discussion of ideas and collaborations across the COSA membership and Affiliated Organisations.

The new Board has held three meetings since it was first established in July 2013. The Board is now responsible for strategy (on advice from Council and members), operations and

finances. The Board is currently preparing a new strategic plan and will also prepare a detailed financial plan to support the strategy going forward. The Board agreed on the main strategic goals being advocacy, research, education and sustainability of the organisation; actions and KPIs are being drafted to support the implementation of these goals. Once the Board has finalised the first draft, the strategic plan will be circulated for comment and input.

Some of the highlights of 2013 include:

- Submission to the Senate Inquiry into the Supply of Chemotherapy Drugs such as Docetaxel
- Submission to the Independent Hospital Pricing Authority on standard costs for clinical trials in collaboration with the Cancer Cooperative Trials Groups
- Response to the NHMRC discussion paper on proposed revisions to consent for research
- Joint submission with Cancer Council Australia to the NHMRC Public Consultation on Complementary and Alternative Medicine Resource for Clinicians
- Finalisation of the Complementary and Integrative Therapies Group position statement on "Use of CAMs by Cancer Patients"
- New position statements are in draft including: the Cancer Pharmacists Group "handling of monoclonal antibodies" and the Familial Cancer Group's "SNP testing for personalised breast cancer risk reduction"

As always I remain keen to hear from the membership on your ideas for how COSA can help improve cancer care and control.

I wish you all a safe and restful festive season.

Sandro V Porceddu President - COSA





Once again it's been another busy here in the COSA office. After nearly three years in the role I've come to the realisation that there isn't really a down time at COSA. Many people might think that everything revolves around the ASM, and while we all do spend a lot of time working on the ASM there is a great deal happening outside the conference too.

Now that our new governance structure is in place, time has been freed up for projects such as preparing a new strategic plan. Sandro also mentioned it in his report, and we are delighted to have made a lot of progress already. The Board held a strategy workshop in September which saw us agree on our core principles and overarching goals. COSA has proven to be a highly successful society so the strategic plan will not present anything radically new, rather document a way forward to ensure we build on our success and sustain the organisation into the next 40 years. It's also important that we can measure our success, so we will include agreed and measureable performance indicators, which in turn we will report back to the membership on.



COSA ASM

As you'll read in quite a few reports in this issue, the ASM in Adelaide was a hit - I'm sure the members who attended will agree. For me personally it was an exciting conference to work on. It was my third ASM but the first as a COSA only event - in 2011 COSA partnered with ANZUP and in 2012 with IPOS. While both partnerships were very successful and exciting events to plan, having 2013 as a COSA only ASM was also very valuable. Of course in 2014 we are planning an exciting collaboration with the UICC World Cancer Congress - hopefully the back to back events will attract new delegates to both meetings.

The Executive Officer doesn't often get much time to sit in on the sessions but I managed to take time out for some this year. Highlights of the 2013 ASM program for me were the opening plenary which truly set the scene and Professor Maddocks's Presidential Lecture which really captured the conference themes. The conference dinner was another personal highlight – it was great to see so many of you dressed up in 70s gear to help celebrate COSA's 40th birthday.

COSA staff changes

 Rhonda DeSouza is having another baby and will take maternity leave in January 2014 (we wish Rhonda and her family all the very best)

- We look forward to welcoming Hayley Griffin back from maternity leave in February 2014
- Chantal Gebbie, who has been filling in for Hayley, will stay on as Rhonda's maternity leave replacement. It's great that we can keep Chantal on here as she has gained so much COSA corporate knowledge in her 12 months with us
- Jessica Harris has returned from maternity leave working one day a week on COSA communications
- Fran is planning to return from maternity leave in May 2014
- Kate, Rachael and I are holding down the fort too

Thank you

Thank you to the COSA staff and members for your continued support throughout 2013.

I've enjoyed working with the new Board and COSA Council and am filled with enthusiasm for the year ahead.

Best wishes for the Festive Season

Marie Malica
Executive Officer





COSA ASM 2013

Convenor's Report

I am delighted to present this report wrapping up the highlight on the COSA calendar– the COSA Annual Scientific Meeting held in Adelaide, 12-14 November 2013.

On behalf of organising committee, presenters and COSA Council, we couldn't be more proud of the conference we delivered!

The COSA Program Committee aimed to build upon the legacy of previous meetings and provide a forum for our broad range of disciplines to come together to hear from opinion leaders about key issues in cancer management as well as to engage with one another maintaining a multidisciplinary theme.

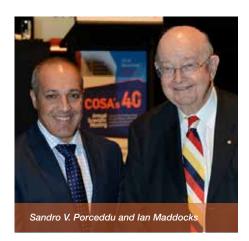
This year COSA's scientific program focussed on Geriatric Oncology and Gl cancers. The first day was dedicated to geriatric oncology. Wednesday morning highlighted Upper Gl cancers and the afternoon was devoted to Hepatopancreatic- biliary cancers. Colorectal cancers were discussed on Thursday morning. The program was supported by 10 international and 41 local speakers.

Following a warm indigenous Welcome to Country and the official opening by the Governor of South Australia, His Excellency Rear Admiral Kevin Scarce AC CSR RANR, the first plenary session "The burden of cancer in the elderly" set the scene for the emerging field of Geriatric Oncology. The session was chaired by the husband-wife team of Dr Robert Prowse and Prof Dorothy Keefe. Dr David Roder. Dr Harvey Cohen and ex Health Minister for SA, Mr John Hill contributed to the session. In the second plenary session, evidence based management of three malignancies in the elderly - brain, ovarian, lymphoma - and anaemia was presented.

The third plenary titled "Changing face of oesophageal cancer: Moving towards individualised care" highlighted the rapidly moving field of Upper GI cancers.

In the fourth plenary session, three challenging cases with hepatocellular cancer, cholangiocarcinoma and pancreatic cancer were presented. The fifth plenary on Thursday morning looked at some of the conundrums in colorectal cancers.

Other highlights of the meeting included sessions on cognition, exercise and sexuality in cancer patients.



The COSA Presidential Lecture was delivered by Prof Ian Maddocks, Senior Australian of the Year 2013. He shared his perspective as a palliative care physician and how the three specialties of palliative care, geriatric oncology and aged care could come together to help older cancer patients.

The closing debate titled "Older you are less you get" provided a humorous but pertinent view on care, challenges and resource constraints faced by the elderly on a day to day basis.

The social program was another highlight, this year being COSA's 40th birthday. The



Conference Dinner had a 70's theme. The cake was cut by four ex-COSA presidents and Prof Ian Frazer delivered the Tom Reeve Oration.

Overall, the scientific content of the meeting was the major success and the program appealed to different specialities and multidisciplinary COSA members.

I'd like to take this opportunity to thank the many people whose hard work and diligence made a meeting like this come together so successfully: the COSA Program Committee, COSA staff, our sponsors and exhibitors, and our conference organisers ASN Events. Each made a unique contribution to make this an enjoyable and successful conference.

Nimit Singal 2013 ASM Convenor



Advanced Trainees Weekend

The COSA trainees' weekend ran prior to the main meeting with this year's theme being Upper GI and hepato-pancreatic and biliary cancers. The workshop was very well attended with trainees from Medical and Radiation Oncology, Surgical, Nursing and Allied Health specialities.

The first day was dedicated to Upper Gl cancers and topics included histology, staging and management. Some of the controversies in oesophageal and gastric cancers were highlighted.

The second day looked at the HPB tumours. Various local treatment modalities like ablation and SIR spheres were discussed along with surgical, radiation and medical management.

The program provided the opportunity for trainees to present seminal papers which were subsequently discussed by a panel of experts.

The Trainees Weekend is a great COSA initiative that provides an excellent forum to look at a particular disease in great detail.

Tim Bright, John Chen and Nimit Singhal, Workshop Co-Convenors



International Speaker Profiles

For those not fortunate enough to attend this year's Meeting, or those wanting to know a little more about the experiences of our international guests, COSA took 5 minutes to speak with Associate Professor Thomas Aloia, from the University of Texas M.D. Anderson Cancer Center, Associate Professor Alexandre Chan, from National University of Singapore and National Cancer Centre Singapore, and Associate Professor Janine Overcash from the James Cancer Center, Solove Research Institute and Ohio State University, USA.



Thomas Aloia

Dr. Aloia received his medical degree from the University of California – Los Angeles Geffen School of Medicine. His postgraduate training included a general and thoracic surgery residency at Duke University Medical Center and fellowships in Surgical Oncology at MD Anderson and Hepatobiliary/ Liver Transplantation at the Paul Brousse Hospital in Paris, France. He has recently completed a Certificate in Healthcare Management at the Rice University (Jones) Business School.

Dr. Aloia's clinical expertise is in hepatobiliary surgery, gastrointestinal

surgical oncology, minimally invasive surgery and liver transplantation surgery. He is an ad hoc reviewer for multiple medical and surgical journals and serves on the editorial board of The Journal of Oncology Practice and the Annals of Surgical Oncology. He has published multiple manuscripts related to his areas of research interests including advanced liver imaging techniques, chemotherapyinduced liver injury, and the medical economics of cancer surgery.

At MD Anderson, he has focused his administrative efforts in the areas of patient safety, quality, and functional outcomes including his role as the ACS NSQIP Surgeon Champion and as the co-chair of the Division of Surgery Surgical Safety Committee.

Recently, Dr. Aloia was appointed as Program Director, Department of Surgical Oncology Hepatopancreaticobiliary Surgery Fellowship Program and Associate Medical Director of the Gastrointestinal Disease Center at MD Anderson.

Was this your first time to Adelaide? Second visit...I was there with my family for the College of Surgeons meeting 3 years ago

Was this your first COSA conference? Yes

What was your overall impression of the conference?

Terrific meeting and content.

Highlights of the meeting?

The interdisciplinary interactions with all members of the "cancer team" MD and non-MD

Any other comments?

The focus on quality and outcomes was exceptional. Also the strong social media presence, it's key to engaging membership.



Alexandre Chan



Dr Alexandre Chan is a tenured Associate Professor with the Department of Pharmacy at National University of Singapore and an Associate Consultant Clinical Pharmacist at National Cancer Centre Singapore. He is also a Co-Director of the Oncology Pharmacy Residency at National University of Singapore and he is a Board Member of the Multinational Association of Cancer in Supportive Care. He is currently certified by the US Board of Pharmaceutical Specialties as Board Certified Pharmacotherapy Specialist and Board Certified Oncology Pharmacist.

Dr Chan's clinical and research portfolio includes oncology supportive care (in lymphoma and breast cancer patients), anticancer drug-drug interactions and associated toxicities, and pharmacoepidemiology. He has published over 70 full-length peer-reviewed manuscripts in various medical and pharmacy journals, including Journal of Clinical Oncology, Lancet Oncology, Annals of Oncology, Pharmacoepidemiology and Drug Safety, Supportive Care in Cancer, Clinical Therapeutics and Annals of Pharmacotherapy.

Dr Chan has received numerous grants and awards for his research, and has delivered lectures at numerous regional and international oncology and pharmacy conferences.

Was this your first time to Adelaide?

Yes, it was my first trip to Adelaide

Was this your first COSA conference? Yes, it was my first COSA conference

What was your overall impression of the conference?

It was an excellent conference. It demonstrates the multi-faceted nature of cancer care, with the involvement of experts in different domains including medicine, nursing, pharmacy and allied health. This unique aspect was certainly an eye opener for me.

Highlights of the meeting?

I really liked one of the plenary sessions that discussed management of GI cancers using a case-based approach, which involved a multidisciplinary expert panel to discuss the different dimensions of patient care. More importantly, the discussion centred on a patient's case, and considered some important aspects (that are usually neglected) such as breaking bad news, palliative care and survivorship care.



Janine Overcash

Janine Overcash is currently the Director of Nursing Research at the James Cancer Center and Solove Research Institute and Clinical Associate Professor at The Ohio State University, College of Nursing. Dr. Overcash is a geriatric nurse practitioner specializing in the care of the older cancer patient. She has assisted in the design and management of one of the first geriatric

oncology programs located at the H.
Lee Moffitt Cancer Center and Research
Institute in Tampa, Florida. Dr. Overcash
has authored over 35 peer reviewed
journal articles in the area of geriatric
assessment. A book entitled, The Older
Cancer Patient: A Guide for Nurses and
Related Professionals by Janine Overcash
and Lodovico Balducci highlights principles
of care of the older person with cancer and
received book of the year award by the
American Journal of Nursing.

Dr. Overcash has completed a post doctorate with the John A. Hartford Building Academic Geriatric Nursing Capacity Program. Dr. Overcash participated in the Geriatric Nurse Educational Consortium sponsored by the American Academy of Colleges of Nursing (AACN) and the John A. Hartford Foundation which instructed over 500 faculty from all over the United States.

Dr. Overcash is currently interested in maintaining functional status of older women undergoing chemotherapy. Other research interests include understanding falls, performance status and independence in older cancer patients.

Was this your first time to Adelaide?

I was first in Adelaide in 1999 when I attended a geriatric conference. I love coming to Australia. I always seem to make new friends and enjoy myself. I love the bike trails, the wine country and the town. Adelaide is truly a great place!

Was this your first COSA conference?

I have never attended a COSA conference. I enjoyed the organised and well-run presentations. I think the topics were relevant and interesting. I was so impressed on the extent to which nursing was represented and discussed, as well as the attention given to geriatric oncology. Nurses are a vital part of the cancer care team and especially when caring for the older person. Conducting geriatric assessment, playing a part in the development of medical and nursing interventions, and patient and family education are all roles of the nurse which

were discussed at the COSA conference. Continued conversations and planning among physicians, nurses and other healthcare professionals are so important and COSA creates a perfect venue for interdisciplinary discourse.

What was your overall impression of the conference?

I think the COSA conference was one of the best conferences I have attended in a long while. I think this because of the wonderful people I got to meet. I truly enjoyed all of my interactions and hope to keep in touch. To my new friends, thank you for the opportunity to come to such a beautiful place and meet such wonderful people!

Highlights of the meeting?

I think some general highlights consisted of discussions associated with healthcare documentation, caring for those who live in rural areas, palliative care and end-of-life. I am also impressed with some of the databases used to store patient information that were discussed and presented in the vendor gallery.

Cheers to the people who shared their thoughts and stories and laughter. I will never forget my 2013 trip to Adelaide!

COSA Consumer Forum

'What matters more: my genes, my age, my cancer, my choices?' This was the provocative title of the Consumer Forum held prior to the COSA 2013 ASM in Adelaide on Sunday 10th November, 1-4pm.

Consumers, carers, along with local and international health professional speakers pondered this question through short sessions on 'Cancer and your genes', 'Looking after older people with cancer' and 'Exercise and cancer'.

The Consumer Forum is now a standard feature of each COSA Meeting. COSA EO Marie Malica works with local consumer advocacy groups and Cancer Councils to develop the event. Cancer Voices SA (CVSA) took a leading role in planning and presenting the 2013 Consumer Forum, with help from Cancer Council SA and Stephanie Miller, Executive Director of Health Consumers Alliance of South Australia.

COSA President Sandro Porceddu opened the event with acknowledgement to the traditional owners of the Adelaide area, the Kaurna people. He welcomed all visitors from near and far (about 50 attendees), and noted the importance of consumers' engagement in cancer care.



Julie Marker, co-facilitator and Deputy Chair of Cancer Voices SA, thanked Associate Professor Porceddu and COSA for the opportunity the Consumer Forum provides for information to be heard directly from worldwide cancer experts. Julie went on to describe the important and diverse roles of consumers in advocating for better cancer treatment and care with examples from Cancer Voices SA activities. 'Good systems not Good Luck!', 'patients can help' and 'get active' were key messages. Tribute was paid to the leadership of Ashleigh Moore OAM since CVSA was launched at the COSA Forum in 2007 in Adelaide.



Cancer and your genes

Community interest in cancer risk and genes has been sparked by media around Angelina Jolie and her decision to have a radical double mastectomy to reduce her cancer risk, based on her family history and genetic test results.

Local genetics expert Dr Nicola Poplawski explained how genetic spelling errors or faults can accrue with age, like 'genetic rust'. This analogy and 'basic genetics 101' set the scene for Dr Vanessa Blair to detail a type of hereditary cancer (Hereditary Diffuse Gastric Cancer) found in New Zealand.

Chris Christensen described her personal journey of discovering she had a rare peritoneal cancer (a silent cancer she wants to make noisier); then new





implications and uncertainties for herself and her family after finding she has a BRCA1 genetic mutation.

Speakers were asked for 2-3 'take home 'tips' (key points for action, information or practical advice) for the audience to take away. Tips from this session:

- · Cancer risk increases with age
- Family genetic risk accounts for only about 5% of cancers
- Patients want good information to make informed choices

Looking after older people with cancer

Doctors tend not to use age alone to define an 'older person', said Dr Nimit Singhal, local cancer specialist and COSA Conference convenor. 'Functional age' is highly individualised, including age in years eg 60, 65, 70+yrs but also considering other significant medical conditions, social networks supporting a patient, goals of cancer treatment and the toxicity of treatment options.

Tips for anyone with cancer aged 70+ were:

- · Ask for a cancer coordinator
- Tell your Doctors your treatment goals, preferences and wishes
- Be aware that finances and family are the most common causes of distress

A 'carer's perspective' was provided by Melissa Cadzow, who looked after her widowed dad for 2 years after he was diagnosed with lung cancer in his 70s. Melissa juggled competing priorities with 2 small children and work. As a carer she felt stressed about 'doing the right thing' and challenges of finding information and sorting problems. Not realising consequences of referrals and specialist practicing rights at different locations

proved to be a major barrier to 'patient centred' continuity of care for someone with existing comorbidities.

An interview with an older person about their experience and insights of cancer diagnosed in their later years unfortunately had to be cancelled as 2 speakers and 2 back-up speakers for this session were not able to attend 'on the day'.



Exercise and cancer

Dr Lee Jones presented compelling research evidence of benefits from exercise for enhancing recovery after cancer. Think of exercise as a treatment for cancer. While more studies are needed to work out the correct 'dose' and type of exercise treatment, current adult physical activity recommendations are safe and suitable before, during and after cancer treatment. Animal studies have shown that tumours grew 30% slower in mice that were exercising

Exercise can also mitigate against the loss in fitness caused by cancer treatments. Lung cancer patients who were physically fitter had less treatment complications. This was shown from an exercise program for 70+ year olds in the 4 weeks prior to surgery, which resulted in 20% improvement in fitness.

Loss in fitness during 12 weeks of chemotherapy is equivalent to the decline usually seen from 10 years of ageing! A study of sedentary women after breast cancer treatment found a double whammy if starting off unfit with the impact of therapy, leaving them of similar fitness to women 20 years older.

Take away tips:

- Your exercise prescription: 3 days per week of moderate (brisk walking) continuously for 20 minutes or accumulating 30 minutes per day, 5 days per week
- Mostly it's 'excuses' not 'barriers' i.e. no one to walk with, too cold/too hot.

It was clear that there is no simple answer to our question 'What matters more: genes, age, cancer, choices?' They all matter, they all have an impact and information is needed to make informed choices.

The value of the COSA Consumer Forum for people affected by cancer was confirmed by the positive feedback from the audience. Thank you COSA.

Julie Marker Cancer Voices SA

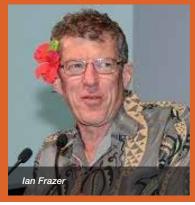




Tom Reeve Award for Outstanding Contributions to Cancer Care

Professor Ian Frazer was announced as the 2013 recipient of the Tom Reeve Award for Outstanding Contributions to Cancer Care at the conference dinner held on the Wednesday evening of the ASM.

With typical humour, Professor Frazer arrived in a Hawaiian shirt straight off a plane from Fiji! He delivered an entertaining and poignant oration and also shared details of his current research in melanoma. Congratulations once again!





COSA Best of the Best Awards

Best of the Best Oral Poster Best of the Best Oral **Presentation Awards**

Health services - Agnes Vitry Use and Cost of Chemotherapy in Australia between 2000 and 2011 - abs#145

Research cancer treatments - Dannie Zarate

Colorectal cancer surgery rates in indigenous versus nonindigenous patients - abs#150

Supporting Cancer Patients - Phyllis Butow Caring for women with ovarian cancer in the last year of their life: Impact on the caregiver - abss#151

Cancer side effects and symptoms -Victoria-Mae Rasmussen Stress and burnout, work engagement and meaningful work in psychosocial health professionals working in Oncology abs#158

Presentation Awards

Basic and translational - Victoria Grav Development and Early Outcomes of the Find Cancer Early Community Education Campaign in Regional Western Australia abs#18

Gastro-intestinal cancers - Joanne Shaw Family CONNECT: A randomised controlled trial to improve psychosocial outcomes for cancer carers - abs#46

Clinical research - Robert Andtbacka OPTiM: a randomised phase 3 trial of talimogene laherparepvec (T-VEC) vs subcutaneous (SC) granulocytemacrophage colony-stimulating factor (GM-CSF) for the treatment of unresected stage IIIB/C and IV melanoma - abs#48

Education - Alana Fisher The Effect of Biased Health Information and Consumer Attitudes on Anticipated Whole Genome Screening Uptake - abs#77

Epidemiology - Satyamurthy Anuradha Survival of Australian women with Epithelial Ovarian Cancer – a Population-based Study abs#71

Geriatric Oncology - Raghav Murali-Ganesh Effect of Age on Quality of Life Changes During Head and Neck Cancer Treatment abs#99

Supportive care – Janette Vardy Longitudinal, Prospective Study Evaluating Fatigue and Quality of Life in Colorectal Cancer (CRC) Patients - abs#107

Health services - Danette Langbecker Findings from a Systematic Review on Cancer Care Coordinators - abs#132

COSA acknowledges the Adelaide Convention Bureau, Government of South Australia and Adelaide Convention Centre for their support of these Awards in 2013.









COSA 2013 Travel Grant Recipients

The following COSA members received travel grants to attend either the 2013 COSA ASM or the COSA Advanced Trainees Weekend.

COSA Travel Awards

Anne Booms

Alison Buete

Ivana Durcinoska

Merran Findlay

Priscilla Gates

Tina Griffiths

Jordana McLoone

Brent O'Carrigan

Matthew Soeberg

Cindy Tan

Marilyn Wendt

COSA Trainee Travel Awards

Pawan Bajaj

Dan Brungs

Brett Doble

Chi-Yin Kao

Peey-Sei Kok

James Kuo

Alastair Kwok

Peter Lau

Megan Lyle

Kate McBride

David Mizrahi

Vinayak Nagaraja

Sagun Parakh

Fiona Runacres

Carolina Sandler

Annette Tognela

COSA/IPSEN Travel Grants

Catriona Parker

Kim Hobbs

COSA acknowledges IPSEN for their continued support through educational

grants in 2013.



WINSTON CHURCHILL MEMORIAL TRUST REWARDING AUSTRALIANS STRIVING FOR EXCELLENCE

2014 Churchill Fellowships

Sponsored Churchill Fellowships for Award Nationally in 2014

Bob and June Prickett – A topic which will benefit the health of Australians

Dr Dorothea Sandars – Medical / veterinary parasitology or Parkinson's Disease, or advances in medicine in general

Dr Dorothea Sandars and Irene Lee – Enhancement of the delivery of palliative care

Dr Lena Elizabeth McEwan and Dame Joyce Daws – A project in the field of surgery, including surgical nursing

Leslie (Les) J. Fleming - Oncology and cancer research

Vincent Fairfax Family Foundation – Australians in their advancing years

Sponsored Churchill Fellowships for Award Regionally in 2014

James Love QLD - In any field

Jack Brockhoff Foundation VIC – Health or community welfare for the benefit of Victorians, especially children

Closing date: 19 February 2014.

For further information and application forms please visit www.churchilltrust.com.au or contact the National Office, freecall 1800 777 231 or phone 02 6247 8333.







Luminous Award Winners

Norman Swan from Tonic TV and Michael Slezak from New Scientist are the winners of the Clinical Oncology Society of Australia's Luminous Awards for 2013.

"Norman and Michael's entries impressed the judging panel. They are both well-crafted examples of high-quality journalism that explore new and interesting cancer developments and research," commented John Stubbs, Chair of the Luminous Awards Australia judging panel.

Norman Swan, took out the broadcast category with a piece titled *Ovarian Cancer*. The segment explored new techniques being deployed to reduce ovarian cancer risk as a part of a research project being conducted by the University of British Columbia in Vancouver.

"Norman's impressive report focused on a new initiative which researchers believe could reduce the incidence of ovarian cancer by 50%. The segment provided both clinicians and consumers with access to innovative international research which could have a significant impact on ovarian cancer incidence," said John Stubbs.

Michael's entry, Fighting Cancer Darwin's Way, focused on the 'Darwinian Perspective' and the surprising genomic diversity within individual tumours.

"Michael reported on a patient who, according to researchers, is the most studied cancer patient in history. Michael's article is a great achievement, using this one patient example as a way to present scientific complexities and research advances to his audience in a clear,

accurate and balanced way," said John Stubbs.

Daniel Williams, who took out the first prize in the print category in 2011, was named runner up this year for his article, *One pill to rule them all*. He examined the role of aspirin and its potential to reduce cancer risk for Men's Health Magazine.

Peggy Giakoumelos was runner up in the broadcast category for her SBS radio segment, *Play tackles cancer taboo*, which reported on a series of plays developed to tackle cancer awareness in Macedonian, Greek and Arabic speaking communities, funded by the Cancer Institute of NSW.

The Luminous Award Australia is hosted by COSA in partnership with Eli Lilly Australia.







SAVE 2-4 December 2014

THE

Melbourne Convention and Exhibition Centre **Melbourne**, **Australia**

Convened byAssociate
Professor
Mei Krishnasamy

DATE



Themes for COSA's 41st ASM will include:

cancer survivorship, supportive care and palliative care / lung cancer / metastases

For more information please visit:

www.cosa.org.au

or call us on **(02) 8063 4100**

the COSA Annual Scientific Meeting in 2014 will be held in conjunction with the UICC World Cancer Congress.





COSA ASM 2013 in pictures...







Bruce Mann and Helen Zorbas



Fran Boyle, Harvey Jay Cohen, Dorothy Keefe and Robert Prowse



John Zalcberg, Chris Karapetis and Nick Pavlakis





Delegates exhibition hall

















Prof Maddocks, Mrs Singal and Mrs Maddocks











Cancer Council Australia Report

COSA and Cancer Council Australia continue to share a strong relationship facilitated by our co-location. Although we will now need a new Memorandum of Understanding which awaited COSA's restructuring as a Company Limited by Guarantee, we continue to have a reciprocally beneficial relationship.

CCA provides office facilities and financial services and the COSA membership becomes the Medical and Scientific Committee for CCA when multidisciplinary treatment expertise is required as background to media responses, in joint advocacy initiatives and in providing reviewers for CCA's Priority Driven Research Grants with Cancer Australia.

Many COSA members over the years have volunteered their time to sit on clinical guidelines committees to produce clinical practice guidelines, initially under the ACN (Australian Cancer Network) and now the CCA Guidelines Group and the wiki based guidelines project.

The joint advocacy initiatives most recently have focussed on research funding and availability of medicines. CCA provides the media support for the COSA ASM including vetting the abstracts for their media potential. The COSA EO attends many CCA Executive meetings and we have reciprocal membership on each other's Boards. In a new initiative CCA has formed Consumers Can, a group of

consumers who can provide expertise to our planning and this will be shared with COSA, with the COSA EO sitting on the committee.

It has been a year of structural change and both groups will have a strategic planning process ahead.

Ian Olver COSA Board Member and CEO, Cancer Council Australia



COSA Group Reports

AYA Group

The focus of the group over the past few years has been delivering projects funded by the Federal Government under the Youth Cancer Networks Program and administered by CanTeen as part of the Youth Cancer Fund. A Steering Committee including lead clinicians from each state, chaired by Dr Wayne Nicholls, guided this work.

The Steering Committee was responsible for developing three projects to help improve cancer services and care for adolescents and young adults throughout Australia. These projects were the establishment of an AYA Cancer Network, development of three AYA Clinical Practice Guidances which were published on Cancer Council Australia's Wiki platform, the development of AYA specific treatment protocols on eviQ in partnership with Cancer Institute NSW, and an AYA Clinical

Research project which aimed to develop support for clinical research and increased clinical trial participation by AYAs.

The funding for these projects is now complete. However, promotion of the clinical practice guidances in AYA cancer management in the areas of fertility preservation, psychosocial management and early detection continue to health professionals and relevant organisations across Australia. The AYA-PK Study and the ALL6 trial established as part of the AYA Clinical Research project also continue to recruit patients in several sites in Australia.

In December 2012, COSA performed a survey to evaluate the success of the AYA Cancer Network. The results indicate that the Network was successful in the key areas of enabling communication between

stakeholders to maximise exchange of knowledge and learning and to encourage sharing of best practice in AYA cancer care. The results of the survey also indicate that awareness of the AYA Cancer Guidances produced by COSA was good and that the information is being accessed.

This year the group has formalised its structure back within COSA by establishing membership and Terms of Reference for an AYA Executive Committee. The AYA Executive Committee has representation from each state, including paediatric oncologists, a medical oncologist, a radiation oncologist, social work and nursing. An adult haematologist has also recently joined the Committee. Dr Wayne Nicholls is the Chair of the Executive Committee and Dr Lisa Orme is the Deputy Chair.

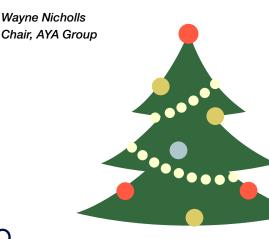


The Executive Committee held a strategic planning day in Melbourne on the 6th of September to discuss future priorities and develop an agenda for ongoing activities for the next 5 years. During this meeting the Executive Committee were able to identify several key areas of focus for the activities of the COSA AYA group:

- In the area of AYA guidances and protocols, the COSA AYA Group plan to update and review the existing guidances and develop 2 or 3 more guidances with funding.
- The COSA AYA group intend to influence the agenda and programmes for conferences as well as the broader education framework. The COSA AYA Executive Committee are committed to working with ANZCHOG to develop an AYA component for the upcoming
- ANZCHOG ASM. The COSA AYA
 Executive Committee plan to hold a
 workshop/professional development day
 in conjunction with the World Cancer
 Congress AYA Symposium in 2014. The
 COSA AYA Executive Committee also
 see an ideal opportunity to facilitate the
 development of the agenda and program
 for the CanTeen conference in 2015
 possibly as a scientific advisory/program
 committee.
- 3. The COSA AYA Group intend to identify and formulate research priorities with a workshop to begin work on this planned for the first quarter of next year. This workshop will be used to discuss current research, look at what the results are and then discuss what the next steps will be. This research strategy will then form part of the COSA AYA group's advocacy platform for research.

The AYA Executive Committee will now have several planning teleconferences prior to the workshop next year and will begin work on a draft research agenda with a plan for one and five years.

If you would like more information about any of the above or if you would like to join the AYA Cancer Network, and receive information about COSA AYA activities, please email cosa@cancer.org.au



Cancer Care Coordination Group

In July, the Cancer Care Coordination Professional Development Group held a pre-conference workshop at the CNSA Winter Congress. The purpose of the workshop was to introduce the key concepts and development of the position paper on the role of the cancer care coordinator. Approximately 90 delegates registered for the workshop with representation from a wide range of settings and disciplines. The feedback, discussion points and questions raised from the day regarding the position paper were noted and the project team and Executive will consider these within the next phase of development.

The Professional Development Group has finalised the program outline for the Cancer Care Coordination Conference Constructing Cancer Care Across the Continuum being held in Sydney on 4th and 5th March 2014. You can view the program via the website http://cosaccc2014.org/. Early bird registration closes on 13th December 2013. Professor Jessica Corner, Dean

of the Faculty of Health Sciences at
University of Southampton in the United
Kingdom is the invited international
speaker for the meeting and other
national speakers will be announced
as positions are confirmed. The latest
updates about the conference are
available via twitter by following

@COSA_CCCC_2014 https://twitter.com/COSA_CCCC_2014

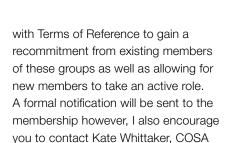
Jacinta Elks who led the development of the position paper group to date, chaired the Communication and Networking Group and was a member of the Executive, has resigned from these positions within the Cancer Care Coordination Group. She has been a vital part of providing information and networking opportunities to the membership by leading the Communication and Networking Group in coordinating the National Contacts Database and The Coordinator e-newsletter over the years, and her commitment to establishing of a position paper on the role of the cancer care coordinator in the first half of this

year led to the development of the comprehensive first draft. The project team met recently and will commence the second phase of development in early 2014. The dedication and hard work displayed from everyone on this project team demonstrates the need for a clear statement to advocate for the continued recognition of these important roles in improving patient outcomes.

In December an annual update of the National Contacts Database will occur. All members and database contacts will be prompted to review their details, inform COSA of any changes if necessary and/or provide the Cancer Care Coordination Group with information about any projects, research and interests in which you are currently involved.

In early 2014, the Executive will review the Cancer Care Coordination Group's two year strategic plan as implemented in August 2012. The Executive will identify activities to progress in 2014 and formalise the sub group memberships





Patsy Yates

Chair, Cancer Care Coordination Group

Project Officer, to express your interest.

Cancer Pharmacists Group



The second half of 2013 has been busy for the CPG. Our big effort was working towards our pre-COSA Advanced Practice Day held on Monday November 11th prior to the main COSA ASM. The committee continued to work on projects including a CPD assessment, which we hope to have complete in the first quarter of 2014.

ASM – 2013, Adelaide

Pre-COSA Advanced Practice Day Monday 11th November 2013

As an alternative to the Advanced Oncology/Haematology Seminars that have previously been run by CPG an Advanced Practice Day was held. Around 40 pharmacists attended this day, we were lucky to have our international speaker, Dr Alex Chan, available and he participated in a great session on Advanced Pharmacy Practice Frameworks (Oncology) sharing his experience of the Singapore model for professional development of oncology pharmacists. Sue Kirsa (SHPA) and Krissy Carrington

gave perspective from the SHPA and previous work in Queensland. We hope to build on this work with co-operation with the SHPA in their project on these frameworks.

Completing the day were a number of presentations on advanced practice topics. The CPG thank all the speakers for sharing their experience so willingly and thanks to COSA for supporting this day. Thanks goes to Jude Lees for her tireless work in organising the exciting program and the task of co-ordinating the speakers and their many commitments.

CPG Annual General Meeting Tuesday 12th November

The CPG AGM was held during the main COSA ASM and was well attended by CPG members. Dan Mellor (Chair) and Jude Lees (Deputy Chair) both stepped down from their positions, with Gail Rowan and Dan McKavanagh being announced as Chair and Deputy Chair respectively.

COSA ASM

The CPG was well represented in the ASM this year with Jim Siderov, Ben Stevenson and Krissy Carrington all presenting and/ or chairing in the main program. We were fortunate to be able to host Dr Alexandre Chan from Singapore as an international speaker within the main ASM. Alex, with his experience and knowledge in cancer care (especially in the elder patient), made a great contribution to the program. Many other CPG members had abstracts accepted as posters and Best of the Best oral presentations. Congratulations to all.

CPG "Clinical Skills for Cancer Pharmacists" Course – Brisbane 2014

The CPG will be again be running our highly successful and sought after foundation course in mid 2014.

We are pleased to be able to offer this course designed to help pharmacists new to cancer practice to develop their knowledge and skills again. We hope to be able to provide details on dates for this course early in 2014.

The CPG committee wish to acknowledge the work of both Dan Mellor and Jude Lees during their time on the committee. Jude has represented cancer pharmacists' interests and championed our development for many years and has helped raise the profile of our group both within COSA as well as the pharmacy and oncology arenas in Australia.

Over his time on the committee and as Chair Dan has been involved not only at group level but at organisational level, supporting the ongoing interests of cancer clinicians as a whole and cancer pharmacists specifically. Dan and Jude leave the CPG in a great position. Thanks!

Gail Rowan Chair, CPG Gail.rowan@petermac.org

Clinical Trials Research Professionals Group

Chair: Hema Rajandran, Sir Charles Gairdner Hospital Cancer Centre; Medical Oncology Clinical Trials Unit, Western Australia

Executive Committee: Sally Dean,
Calvary Mater, Newcastle (Secretary); Jill
Davison, Peter MacCallum Cancer Centre,
Melbourne; Valerie Jakrot, Melanoma
Institute, Sydney; Dianne Lindsay
ANZBCTG, Newcastle; Anne Woollett,
Barwon Health, Melbourne

It was only a few months ago when I was claiming mid-year was upon us and it was



hard to believe the time flying by and here we are in December... the tinsel is staring me in the face everywhere I turn and the December Marryalyan update is due!

It has been an extremely busy and rewarding few months for the CTRPG. In the July Marryalyan, the CTRPG shared some exciting news with the successful grant application and plans that were underway for a Professional Development Workshop to be held in the week of the 40th COSA ASM in Adelaide. I am pleased to be able to report that this was a very successful and educational day for all of the attendees.

The workshop was facilitated by the CTRPG and Eleanor Allan from Caledonian Clinical Training. Eleanor has extensive experience in the design and delivery of interactive training for clinical research personnel and has specialised in training and quality assurance since 1997.

The full day interactive workshop focused on Clinical Trials Management, Quality Practices and GCP for all Clinical Trials Professionals. The morning session focused on GCP with a good overview of the regulatory and legal requirements in Australia. All participants interacted with each other to brainstorm ideas and learn from various case studies throughout the morning. This was a great start to the day and laid a solid foundation for the afternoon session which focused on Quality Practices in clinical trials.

The workshop had a fair number of attendees from various clinical trials sites across Australia. The diversity of participants made for an interesting day with various experiences, case studies and ideas exchanged throughout the afternoon. Participants were encouraged to get involved in role play and to discuss challenges faced daily in their practice and Eleanor provided excellent insight into coping strategies and management skills.

The CTRPG has received positive feedback following this Professional Development day and are pleased to have been able to serve our members in the area of Professional Development. We are hoping to hear more on how best to serve our members and provide further opportunities in the area of professional development in the New Year.

We encourage feedback and queries from on how we can best provide to you as a support group. Ideas for further CPD days are encouraged. Or perhaps you would like to know more about how to become a member? We encourage you to get in touch with the Group members and open up a forum for discussion on the way forward for the group.

Thank you again to all of our members for your attendance at the workshop and support throughout the year. I have certainly enjoyed my first term as Chair with the support of the Executive Committee. Wishing you all the very best over the festive season and have a Happy and safe New Year.

Merry Christmas.

Hema Rajandran, Chair Email: Hema.Rajandran@health.wa.gov.au

Complementary and Integrative Therapies Group

The CITG has completed the online survey of oncology related research activity in complementary and integrative therapies in Australia that was a poster presentation at the COSA 2013 ASM

(email: pkatris@cancerwa.asn.au for a copy).

This indicated that 15 studies were conducted, or were planned to be conducted during the period 2012-2014. Usage surveys were most common and a variety of different interventions were being tested and the majority had no external funding.

Most of the studies were not clinical trials (62.5%) whilst the remainder (37.5%) reported being registered on clinical trials registry sites such (ANZCTR or ClinicalTrials.gov). No scientific or laboratory based studies were reported. Five studies reported to have been funded over the 2012-14 period had a combined total of AUD \$1,611,232.

The CITIG cannot be confident that the survey has captured all research projects. Hence, it has recently begun a progressive dialogue with the National Institute of Complementary Medicine to expand the survey distribution to a wider group of Australian researchers who may be undertaking research into oncology applications. It is hoped that this may gather more studies of a laboratory or experimental nature that were obviously lacking in the current study. The CITG also has plans to form a wider national network of research interested groups and individuals in this emerging field of oncology.

Upon receipt of the COSA Position statement on the use of complementary and alternative medicine by cancer patients targeting health professionals, an invitation to partner with the European based http://cam-cancer.org/ has been received. This is in the spirit of building an international authoritative network around CAM in cancer led by a panel of experts in CAM research and/or in cancer care. Details regarding this relationship will be formalised soon.

Looking ahead into 2014 the CITG is keen have a presence at the Melbourne COSA ASM – UICC Congress through a concurrent session and hopefully an integrative oncology clinician and researcher of international standing as a keynote speaker. We also encourage members and their colleagues to submit papers for consideration in the program. Finally we remind all members to promote active involvement in the CITG.

Paul Katris, Chair Email: pkatris@cancerwa.asn.au

Developing Nations Group

Since July, two Asia-Pacific Mentoring Programs have commenced. Ashodra Gautam, Senior Oncology/Haematology Pharmacist from Fiji has been based at Prince of Wales Hospital and has had the opportunity to visit the pharmacy unit of Princess Alexandra Hospital and the Peter MacCallum Cancer Centre, as well as eviQ and the Children's Hospital, Randwick. She returns to Fiji in early December however, the relationship between Ashodra, Prince of Wales, COSA and other connections she had established in Australia will continue to progress pharmacy services at Colonial War Memorial Hospital in Suva, Fiji. COSA acknowledges that this worthwhile program was made possible with funding from the AusAID Australian Leadership Fellowships scheme.

Dr Rajinikanath Janakiraman, Associate Professor and Consultant Surgeon from Vellore, India began his program in mid-October at Sydney Head and Neck Cancer Institute at Royal Prince Alfred Hospital, Sydney under the guidance of Associate Professor Jonathan Clark. Dr Janakiraman has also met with colleagues from Adelaide and Darwin, and locally has visited Liverpool and St George hospitals. Around 600 head and neck cancers a year are managed within Christian Medical Hospital. Many of these patients choose simpler reconstruction options and no rehabilitation, and are not fully aware of quality of life outcomes associated with their disease and treatment path. Dr Janakiraman's program considers management of head and neck cancer and an understanding of the patient's perspective of quality of life as an integral part the decision making process of treatment and reconstructive surgery for patients with advanced stages of head and neck cancer.

Both Ashodra and Rajinikanath were present at the recent COSA Annual Scientific Meeting to discuss with the Executive ways COSA can continue to support the collaborative partnerships they have established through their fellowships. A major focus of the Executive is to review the reporting of these programs and ensure continued follow up and support translates into long term impact of program outcomes. Such discussions will consider a comprehensive and formalised method of developing a personalised and effective program; program match between fellow and Australian Cancer Centre; and establishment of key performance indicators, outcomes and skills, including a practical return to work plan with commitment from the fellow's home institution. Thank you to all involved in both programs for creating practical and comprehensive programs for our visitors.

A highlight of the Developing Nations Group's year occurred at the Annual Scientific Meeting where Prof Ian Frazer received the Tom Reeve Award which formally recognises a national leader who has made a significant contribution to cancer care. Prof Frazer returned from holiday in Fiji to give the lecture at the conference dinner and used the opportunity to highlight the need to take a global perspective on cancer control especially countries like Fiji. Coincidentally, as mentioned earlier, this year COSA enabled a pharmacist from Fiji to come to Australia to support the establishment of a system of safe practice in cytotoxic handling for Fiji. This has really highlighted the importance of the work of the DNG.

Matthew Links
Chair, Developing Nations Group
Matthew.Links@sesiahs.health.nsw.gov.au



Report from COSA's Asia-Pacific Mentoring Program recipient - Ashodra Gautam



As a recipient of the fellowship, I was given the opportunity to attend COSA's Annual Scientific Meeting. As this is the very first conference of my career, attending and experiencing the conference had quite an impact on me. Four days spent in an atmosphere saturated with knowledge, experiences, research work and new developments, being shared readily, left me with the desire to attend more such conferences in the future. Vibrant minds sharing their research work, exhibitions from pharmaceutical companies and the Clinical Oncology Society of Australia professional membership - all of these aspects showed me how far care for cancer patients has progressed.

On the other hand it brought home to me how far cancer treatment in Fiji still has to go. I already knew this intuitively, but attending the conference was a gentle but firm reminder of this fact. It was wonderful indeed to see how far cancer care has progressed and that it has provided a pool of knowledge for use by places which are







still developing. The experience has been quite enriching.

Ashodra Gautam
Senior Oncology/Haematology
Pharmacist from Colonial War
Memorial Hospital in Suva, Fiji is
currently based at the Pharmacy
Department at Prince of Wales
Hospital.

Familial Cancer Group

The last half of the year has seen the Familial Cancer Group participate strongly in two national meetings, the first was the annual Familial Cancer Research and Practice meeting held in conjunction with the International InSiGHT consortium and the second was our contribution to the COSA ASM in November.

Familial Cancer Research and Practice in conjunction with InSiGHT

This meeting was held in Cairns as our usual location at the Mantra resort in Kingscliff was not large enough for this much bigger combined meeting. It was a great location on the Barrier Reef for the international speakers although for the Australian contingent it was more of a "fly in-fly out" without seeing much of Cairns or its surroundings!

The first two days were dedicated to familial cancer clinical and laboratory research presentations (without hereditary colorectal cancer) but we did not run the usual COSA-sponsored clinically-focussed familial cancer clinic day. Instead the third day was a joint InSiGHT/PEDIGREE/COSA meeting where the focus was on the variation in human genes, highlighting the Human Variome Project, and presenting a number of talks about the complexity of integrating the wealth of new genetic and genomic data into future clinical practice.

One rather sobering presentation from Dr Rosemary Knight, Principal Adviser, Chronic Disease and Cancer, Population Health Division, Australian Government Department of Health and Ageing, included the perception that cancer was considered to be "well-funded" by an important number of government departments. I am sure we all think that there are many areas of cancer care, including cancer genetics, which would benefit greatly from more funding so it is clear from Dr Knight's presentation that any bids for additional funding have to be compelling! On that topic, Professor Ian Frayling from the UK gave a very interesting presentation about the costeffectiveness of universal screening of colorectal cancer for evidence of Lynch syndrome and a group of us in Australia will use the same model to calculate this for the Australian context.

The final two and half days were focussed purely on hereditary bowel cancer syndromes and covered a very wide range of topics indeed. It is great to hear that the CAPP3 aspirin prevention study in Lynch Syndrome is almost open. Unfortunately the Australian NHMRC grant application to support the Australian participation in CAPP3 was not successful this round so we are waiting for the outcome of Cancer Australia's grant applications to see if we will be able to offer recruitment to Australian families with Lynch Syndrome.

COSA ASM

Dr Nicola Poplawski and Dr Graeme Suthers were active participants in the program committee for this year's COSA ASM and two sessions were focused on familial aspects of cancer. The first session was hereditary gastric cancer outlining the various syndromes associated with increased gastric cancer risks and also demonstrated the difficulties still present, despite the major advances in technology, to identify the faulty gene that must exist in a family with a strongly inherited cancer predisposition - while next generation sequencing has revolutionised gene

discovery and mutation detection, it's not the perfect discovery tool!

The second session was about familial breast cancer, detailing some of the more unusual hereditary forms including lobular cancer associated with E Cadherin mutations (more commonly known as a cause of hereditary diffuse gastric cancer). The second half of the session focused on the management of women at high risk of breast cancer and in particular the use and impact of risk reducing mastectomy and PARP inhibitors in the treatment of women with BRCA-associated breast cancer. An opportunity was also taken to advertise the current PARP inhibitor study in metastatic BRCA-associated breast cancer which is open in almost all states in Australia. The study website is at https:// www.brocadestudy.com/ which details the content of the study as well as locations.

Other items of note

The Familial Cancer Group has led the development of a new COSA position statement about the use of SNP profiling for breast cancer risk assessment which has been endorsed by the RACGP, RCPA and HGSA and will be launched shortly. This is timely as the US FDA has recently brought to a halt the marketing of groups such as 23 and me to consumers while their claims of utility are investigated.

All the familial cancer clinics/genetics clinics in Australia continue to experience the aftermath of Angelina Jolie's announcement about her BRCA1 mutation. While referral rates have settled after an initial peak, for most clinics referral rates seem to have settled down at about double the previous rate. This is having a significant impact on wait times for clinic appointments and is likely to lead to increased demand for BRCA testing (and testing budgets) as the same proportion of women are likely to be eligible for testing.

I continue to update the members of the Familial Cancer Group on a monthly basis about items relating to familial



cancer including providing PDFs of relevant articles of interest and information about forthcoming familial cancer conferences across the world. If any other COSA members would like to receive these updates please nominate Familial Cancer as one of your Groups or Areas of Interest on your COSA website profile. Alternatively contact the COSA Secretariat via cosa@cancer.org.au and they can assist.

This is my last contribution to the Marryalyan as the Chair of the Familial Cancer Group as I will be stepping down from this role due to my relocation to Canada next year. The Familial Cancer Group Executive will elect a new chair who will provide the next summary for the Marryalyan. It's been a pleasure being part of COSA and the COSA Familial Cancer Group, I hope to continue my links with both when I'm in Canada next year.

Gillian Mitchell, Chair Email: gillian.mitchell@petermac.org

Geriatric Oncology Group

In theme with the COSA Annual Scientific Meeting (ASM), the Geriatric Oncology Executive hosted a clinical professional development day on Monday 11th November 2013 at the Adelaide Convention Centre for interested members and ASM delegates. Titled 'Adequate Assessment: Appropriate Treatment- Practical ways to incorporate geriatric assessment and intervention into the oncology clinic', the workshop provided delegates with an overarching understanding of geriatric oncology as a dual specialty of geriatric medicine and oncology with a focus on current screening, assessment practices and complexities of treating the older cancer patient.

It was attended by approximately 35 people and the program featured presentations

from different jurisdictions and settings, national and international. Sustainability of programs was addressed by identifying what health service funders and administrators require in terms of outcome reporting to show benefit of specialised programs to improve patient care. The importance of regular multidisciplinary team engagement for the treatment of cancer in the older patient requires input from the geriatrician and medical oncologist, as well as other support staff, as the demands on a geriatrician extend beyond that of oncology. Without a specialist geriatric oncologist continuous interdisciplinary consultation is required for appropriate treatment decisions.

Theoretical content were complimented by a facilitated brainstorming session where delegates were encouraged to identify practical solutions to the barriers of geriatric oncology services in the Australian context. Themes discussed included sustainable funding, access to specialised care, justification of service, engaging consumers and starting a service. After a very interactive session delegates were able to appreciate the challenges and opportunities in integrating geriatric principles into the oncology clinic.

International speakers Janine Overcash and Harvey Jay Cohen contributed to the workshop by providing international perspective on geriatric oncology models and collaborative research respectively. Thank you to all who presented and attended for an engaging and practical discussion highlighting the continuing interest from Australian based oncology professionals to integrate a geriatric focus into their services.

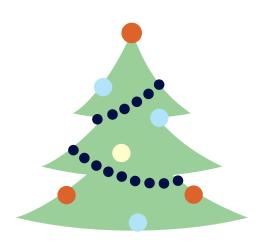
On behalf of the Geriatric Oncology Group of COSA I would like to sincerely thank convenor, Nimit Singhal and the Annual Scientific Meeting Program Committee for their selection of international and national speakers representing the interests of geriatric oncology and the session topics that were covered. It was a very comprehensive and engaging program.

The Geriatric Oncology edition of Cancer Forum will be published shortly and sent via email to COSA members. Contributors included members from the COSA Geriatric Oncology Group and national and international colleagues. Topics include decision making and use of comprehensive geriatric assessment, primary care and nurse practitioner roles, polypharmacy and chemotherapy management, research priorities and the current state of play of geriatric oncology in Australia and internationally.

A potential collaboration with CINSW and EviQ has arisen out of the interest generated by the ASM. We look forward to working with EviQ to develop content specific to geriatric oncology that can serve as a web-based reference for all.

Given the momentum that we have gained through the discussions at the annual meeting it is important to continue to focus on the key areas of service provision, education and research. In early 2014 the Executive will meet for a face to face strategic planning day to reflect on the past year's events and engagement with the diverse membership, and how this COSA Group can continue to progress and support the interests of its members. Members are welcome to submit comments and suggestions to Kate Whittaker, COSA Project Coordinator which would support their interest in geriatric oncology.

Christopher Steer Chair, Geriatric Oncology Group





Lung Cancer Group

The highlights for 2013 for the COSA lung Group were the following:

- The publication of the Cancer Australia wiki platform Clinical Practice Guidelines for the Treatment of Lung Cancer, with significant contributions from a number of COSA Lung group members
- The publication of the Asbestos Disease Research Institute (ADRI) Guidelines for the Diagnosis and Treatment of Malignant Pleural Mesothelioma, also with significant contributions from a number of COSA Lung group members
- The hosting of the IASLC 15th World Conference on Lung Cancer (WCLC), held in Sydney, Oct 27-31

The WCLC was a resounding success with over 5300 delegates, over 2300 abstracts (the largest yet!), of which around 10% were from Australian researchers. Special thanks goes to the conference Presidents Drs Kwun Fong and Michael Boyer and the numerous members of the Local Organising Committee, including members of the COSA Lung group.

We hope the publicity generated from this meeting and the significant Australian contribution will springboard ongoing research activities, greater distribution of funding and patient advocacy in lung cancer and mesothelioma in Australia for years to come.

Nick Pavlakis Chair, COSA Lung Group

Neuroendocrine Tumour Group

The COSA Neuroendocrine Tumours (NETs) group continues to progress the SIGNETURe registry project. The objective of this database is to facilitate the collection of retrospective and prospective data on patients with NETs in Australia.

There are now 9 sites participating in the registry, with Sir Charles Gairdner Hospital in Western Australia gaining ethics approval in November. The other approved sites are in South Australia (Queen Elizabeth Hospital, Royal Adelaide Hospital, Flinders Medical Centre), NSW (St George Hospital, Royal North Shore Hospital, Prince of Wales Hospital), ACT (The Canberra Hospital) and Victoria (Peter MacCallum Cancer Centre). The number of patients entered in the registry is steadily growing with close to 200 expected by the end of this year.

The NETs group recently held an invitation only investigators meeting at the COSA ASM. This was a very successful meeting which brought together principal investigators, data managers and study coordinators from all of the trial sites. The agenda for the meeting included the presentation of initial results, site experiences with data entry and the mapping of retrospective data, as well as an open discussion on barriers and limitations. COSA would like to acknowledge Ipsen for providing sponsorship for this meeting and thank them for their ongoing support of the registry.

Yu Jo Chua Chair, COSA Neuroendocrine Tumour Group



Neuro-Oncology Group

2013 has seen a productive year for the Neuro-oncology professional and consumer advocacy community.

COGNO held its 6th Annual Scientific Meeting, its first inaugural stand-alone meeting, from Friday October 25th to Saturday 26 August 2013 in Sydney. The ASM was a great success with over 155 registrants and a record number of submitted abstracts with very positive feedback received regarding the calibre of the meeting.

COGNO was pleased to host four international guest speakers: Professor Mitchel Berger (neurosurgeon and scientist, University San Francisco), Professor Jan Buckner (neuro-oncologist from the Mayo Clinic), Professor Peter Burger, (renowned neuropathologist, from Johns Hopkins Hospital, Baltimore), and Assoc Prof James Perry (Neuro-oncologist from Sunnybrook Health Science Centre, Canada), as well as a number of well-known Australian experts as part of the COGNO program.

Full program details can be found via the COGNO website.

COGNO-sponsored abstract prizes went to:

Best oral presentation: Improved responsiveness to temozolomide by blocking MIF expression in glioblastoma KI McDonald, H Sevim, R Baxter, L Chung

Best poster presentation: (joint winners)

Comparative longitudinal assessment of psychosocial distress between malignant and benign primary brain tumours in a patient-carer cohort W Trad, T Simpson, KM Wright, T Tran, C

W Trad, T Simpson, KM Wright, T Tran, C Choong, MB Barton, EJ Hovey, E-S Koh

and

EphA3 Maintains Tumorigenicity and is a Therapeutic Target in Glioblastoma

Multiforme

BW Day, BW Stringer, F Al-Ejeh, MJ Ting, J Wilson, KS Ensbey, PR Jamieson, ZC Bruce, YC Lim, C Offenhäuser, S Charmsaz, LT Cooper, JK Ellacott, A Harding, L Leveque, P-L Inglis, S Allan, DG Walker, M Lackmann, G Osborne, KK Khanna, BA Reynolds, JD Lickliter, AW Boyd

Selected speaker video presentations will be made available via the COGNO website (www.cogno.org.au) in due course.

The 4th Quadrennial Meeting of the World Federation of Neuro-Oncology (WFNO) in conjunction with the Scientific Meeting of the Society for Neuro-Oncology (SNO) was held recently from November 21-24, 2013 in San Francisco, California. Australian and New Zealand clinicians and researchers were well represented at this international forum.

International Brain Tumour Awareness Week was held during 27 October - 2 November. A host of activities were held during this time. Some further information can be found summarised here:

http://www.btaa.org.au/LowResOct2013.pdf

Please contact Dr Koh (eng-siew.koh@ sswahs.nsw.gov.au) if you have suggestions regarding any aspect of COSA Neuro-Oncology.

Best wishes

Dr Eng-Siew Koh – Chair, and Associate Professor Kate Drummond, Deputy Chair, COSA Neuro-Oncology Group

Nutrition Group

The COSA Nutrition Group was wellrepresented at this year's meeting with Dr Liz Isenring contributing to a lively multidisciplinary panel discussion on the older person with cancer. The session highlighted practical tips for ensuring malnutrition screening, nutritional assessment and intervention are included as part of routine, comprehensive cancer care. For a summary of concepts covered, this session coincides nicely with an article co-authored with other Nutrition Group members in the soon to be published November issue of Cancer Forum. Dr Isenring also chaired the very successful Nutrition Symposium, focusing on Advances in Nutrition and Cancer. Symposium highlights included updates on evidence-based care in radiotherapy/ chemotherapy by Dr Isenring, head and neck cancer by Merran Findlay as well as novel approaches to managing chemotherapy-induced nausea and vomiting by PhD Candidate, Wolfgang Marx. It was pleasing to see the number of other oral and poster abstracts emphasising the role of nutrition in best-practice care at this year's meeting. In the absence of the Nutrition Group Chair, Associate Professor Judy Bauer, who was unfortunately unable to attend this year's meeting, the Deputy Chair, Merran Findlay wished to thank Judy for her positive leadership throughout the year and the group is looking forward to making further contribution at next year's COSA ASM.

Merran Findlay Deputy Chair, Nutrition Group



Psychooncology Group

Professional Day 2013

The third OZPOS and PoCoG Psychooncology Professional day also included the COSA Survivorship Group. It was held on Monday 11 November 2013 at the Adelaide Convention, as a satellite event to the COSA ASM, and attracted more than 65 registrants. The focus of the Professional day was men's mental health after cancer leading into a panel discussion of screening for psychological distress. There were a series of excellent oral presentations from members particularly emphasising physical activity and survivorship care.

The final session of the day discussed the process of developing psychological interventions, protocol fidelity and led to a lively discussion of the ethical and practical issues of implementing interventions within randomised controlled trials. We are grateful to the Investigators and POCOG staff leading the Fear of Cancer Recurrence Study, who developed this session.

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.

For those of you who were unable to attend this outstanding professional development day, COSA arranged recording of the presentations and discussions. They are in the process of being edited and will be posted to the members section of the COSA website over the next few months.

COSA ASM

The COSA ASM 2013 "Cancer Care Coming of Age" was a highly successful meeting. There were some fantastic psycho-social







sessions during the meeting including a wonderful session discussing sexuality after cancer and another the problem of cognitive decline during and after cancer treatment. Both were very well attended, demonstrating the high impact of these two problems for those living with a diagnosis of cancer. I would like to thank Lisa Beatty who represented OZPOS on the program committee, her involvement ensured a high quality program of relevance to those of us working in psycho-oncology – thank you Lisa.

Access to travel support and release time

As most of you working within the health system are aware obtaining release time for professional development and funds to support travel to education and training meetings is difficult for psycho-oncology staff. This is an issue that OZPOS would like to explore with members and a survey of members will be circulated early in 2014, to ascertain how OZPOS might advocate for improvements in this area for members.

OzPOS Executive - Invitation to members

As I enter my final year as Chair of OZPOS, I am conscious that we have a diverse membership and professional issues to match. It is very important that we establish an executive committee for the group who can help identify and lead projects of relevance to the working lives of our members. Please consider joining me in this endeavour. 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 are 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@sydney.edu.au.

Haryana Dhillon Chair, COSA Psychosocial Oncology Group

Regional and Rural Group

The COSA Regional and Rural Group is a multidisciplinary group focused on the unique issues facing cancer service delivery outside metropolitan areas. Our goals are to work at highlighting the deficiencies in service delivery and to enhance the equity of access to current best practice care, cancer services and clinical trials.

We encourage all COSA members with an interest in regional and rural oncology to join the Group.

Following the formation of a new executive committee in July, a face to face meeting was held in Sydney in August 2013.

Agenda items included an overview of the workshop held in August 2012 on cancer service development in regional and rural Australia and planning to implement some of the recommendations. Other items included development of the group's Terms of Reference and exploring mechanisms for increased collaboration between regional cancer centres.

COSA, with the assistance of the Regional and Rural Executive, is now planning to progress the implementation of a number of activities. These plans include development of telehealth guidelines, enhancing rural training pathways, conducting a workforce survey to examine the impact of regional cancer centre expansions, along with other recommendations.

In other changes for the group, Adam Boyce stepped down from his position as Chair in November 2013. We would like to take this opportunity to thank Adam for his contribution to the work of the Regional and Rural Group and look forward to his continued active involvement. Leadership of the group will be in good hands with Sabe Sabesan taking over as Chair and Rob Zielinski as Deputy Chair.

Thank you.

COSA Regional and Rural Group

Social Work Group

This year has been an interesting transition period for OSWA. We have been very busy 'behind the scenes', getting on with creating a new web page that I'm sure users will really enjoy and find very a useful resource. Watch out for mail in your inboxes very soon for details of the website and how to register.

The other main focus has been organising the 2014 OSWA Conference which will be held in South Australia. This promises to be a very exciting meeting, the theme is:

The Fabric of Modern Family: Working with Life, Love and Loss

Dates: Thu 31 July – Sat 02 Aug 2014 Venue: Stamford Plaza – North Tce, Adelaide, South Australia Further Enquiries: Debbie Ball – Debbie.Ball@oswa.net.au.

We are very excited to be able to confirm the keynote speaker is Shirley Otis-Green. Shirley is a Senior Research Specialist at City of Hope National Medical Center USA. She is a licensed clinical social worker, researcher and educator focused upon improving the quality of care for those facing cancer.

As ever OSWA this year has again been involved in advocating at both state and national levels to enhance care and access for cancer patients. We are about to enter an exciting phase of change as the AGM will mean a changing of the guard so to speak, there are many exciting initiatives in the pipeline, if you'd like to get involved please send me an email.

Enjoy the festive season and the opportunity to hopefully take a break. For further information please email me on Angela.Cotroneo@lf.org.au.

Angela Cotroneo OSWA Chair



Survivorship Group

It is with great pleasure that I report on the activities of the Survivorship Group of COSA at the end of its first year of existence. There is a large amount of enthusiasm and engagement in the Survivorship Group from a very diverse group of health professionals.

Models of Survivorship Care Working Group

Over the past year a working group has been evaluating the existing models of survivorship care to determine their applicability in the Australian setting. This work has identified a series of areas that COSA is well placed to take leadership on and advocate for increased resourcing. These include:

- There is clearly a need to evaluate models and also to look at cost effectiveness
- Addressing needs of CALD and low health literate populations
- Increasing workforce capacity, including referral pathways and training rehabilitation specialists, nurses, psychiatrists, exercise physiologists, endocrinologists, rheumatologists, psychologists, nutritionists who are not only working in cancer centres but in the community
- Education and training resources for all health professionals working in survivorship
- Care coordinators are keen to have a role in survivorship care
- COSA could develop a communication skills package around survivorship
- Collaboration on data collection between survivorship centres
- How to integrate community services and what role Cancer Councils play

As you can see there is a vast amount of work to be done. We will continue this work and aim to start identifying small bodies of work that can be undertaken by subgroups of our members.

OZPOS, POCOG and Survivorship Group Professional Day

This Professional Day, supported by COSA and POCOG, was an excellent opportunity to come together and discuss issues of importance in the sphere of survivorship care, challenges in researching in this area and the power of physical activity to improve some outcomes for people living with a diagnosis of cancer.

If you weren't able to make it to the professional day, most sessions were recorded and will be made available on the member's area of the COSA website over the coming months.

There was also a strong emphasis on physical activity throughout the main meeting program with international speaker Dr Lee Jones. This is an area increasingly recognised as being vital to the ability of people to complete their treatment and to live well after treatment.

Our sincere thanks to Chantal Gebbie who is supporting the work of the group – she has certainly earned a break over the Christmas and New Year period.

Haryana Dhillon Acting Chair, COSA Survivorship Group



Urologic Oncology Group and ANZUP Cancer Trials Group

Once again COSA has completed a highly successful Annual Scientific Meeting and on this occasion celebrated its 40th birthday, highlighted (or marred, depending on your bias) by some truly impressive 70's clothing retrieved by many members and dignitaries from the backs of their wardrobe. Some of us did not have to dig very far back.

Urologic cancers were not a key theme of this year's ASM but we still made our presence felt. Many of the over 300 abstracts were related to urologic cancers. A special symposium sponsored by Janssen was held on Tuesday 12 November 2013, including great presentations from Ben Tran (medical oncologist), Peter Sutherland (urologist) and Kumar Gogna (radiation oncologist). This was well attended and there was a lively discussion.

On Wednesday 13 November 2013 the Urologic Oncology group ran a concurrent symposium entitled, appropriately for an Adelaide meeting, "Fine wine: the old and the new in prostate cancer." Not only were we able to meet in a state where fine wine is everywhere to be found, but we were able to talk about old and new therapies, old and new ideas, and old and young and newly-old patients. Our speakers included three local vintages and one imported one: Wayne Tilley, who spoke on the role of androgens in aging and prostate cancer; Nick Brook, who was right on the ASM theme of geriatric oncology in his talk about whether age mattered in treatment selection for localised disease; Raghu Gowda, who gave a masterful overview of the history and some of the many developments in radiation oncology in prostate cancer; and Alex Chan from Singapore, who managed



to describe clearly many of the new agents for prostate cancer now available or coming soon. Many thanks to all of our contributors and to the audiences who also made the discussions so interesting.

The Annual General Meeting was to be held immediately after the prostate session and in the same room. I'm disappointed to say that only three people attended besides myself. It is understandable that subspecialists might not attend an ASM where their area of interest is not highlighted, but I also wonder if it is now time to rethink the role of the Group in the context of the new COSA governance model and also the increasing role that ANZUP is playing in meeting many of our collaborative and multidisciplinary needs. I am firmly convinced that COSA remains the peak multidisciplinary body for all aspects of cancer care and control. What we now need to work out is how best to represent our members' interests, and ensure that COSA continues to provide good reasons to keep people engaged and contributing.

ANZUP continues to grow and flourish and it is an exciting time for our members. We had another highly successful ASM in July this year and planning is well underway for the 2014 ASM to be held 13-15 July in Melbourne. Our international speakers are already confirmed: Eric Klein (urologist from Cleveland), Christian Kollmansberger (medical oncologist, Vancouver), Rob Bristow (radiation oncologist, Toronto) and Theresa Wiseman (psychology and supportive care, London). Keep an eye on the ASM web page at www.anzup.org. au for more updates. Make sure you put 13-15 July 2014 into your diaries now and talk to your colleagues and trainees about it as well.

ANZUP has an active trials portfolio and we are about to commence two large scale international trials in prostate cancer, for example. Many other opportunities are also being developed, including some concepts that have come up through the group, successfully received funding, and are about to commence in earnest. It is

an exciting time for genitourinary cancer research in our region and I encourage you all to join and participate.

Note: membership of ANZUP is free, and ANZUP members receive a discount on COSA membership and COSA ASM registration – why would you not be a member? If you are not a member of ANZUP, or you know or work with someone who should be, please visit the membership page at www.anzup.org.au to join. We particularly want to encourage younger clinicians and researchers to join, participate, and become the clinical and research leaders of the future.

Thanks once again to the other members of the Urologic Oncology Group Executive, Shomik Sengupta and Scott Williams. Many thanks also to the wonderful ANZUP Executive Officer Marg McJannett, our project officer Yi Feng, and a warm welcome to the new ANZUP Marketing and Communications manager, Liz Thorp.

lan Davis Chair, COSA Urologic Oncology Group Director, COSA Board Chair, ANZUP Cancer Trials Group

Did you know COSA is on social media?



Please follow us on Twitter https://twitter.com/COSAoncology

and



Like our Facebook Page https://www.facebook.com/pages/ COSA-Clinical-Oncology-Society-of-Australia/172334056270046?ref=hl





COSA Affiliated Organisation Updates

Australasian Gastro-Intestinal Trials Group



Investing in tomorrow's researchers

At the AGITG, we are passionate about GI cancer research and are committed to supporting new researchers through awards, courses and grants.

Making cancer a priority

In August 40 young researchers attended a two-day intensive course sponsored by Roche to increase understanding about colorectal cancer treatments.

"It's important that we provide innovative and interactive avenues to enhance medical knowledge in the field of colorectal cancer. The forum, which was led by key Australian experts, allowed the participants to walk through the evolution of treatment of colorectal cancer through the seminal clinical trials. With representation from city, rural and regional practices from almost every state in Australia, the knowledge acquired was then used to workshop difficult cases and future directions for clinical trials research," said the convenor and developer of the Preceptorship, Associate Professor Eva Segelov.



The Kristian Anderson Award



In October the AGITG launched the Kristian Anderson Award, which offers funding to support a clinician to research an aspect of personalised medicine in the area of colorectal cancer.

Kristian Anderson was 34 years old when he was diagnosed with cancer in his bowel and liver in 2009. After his life was prolonged by cetuximab, a drug used to treat advanced colon cancer, Kristian used his new found profile to successfully lobby the federal government to subsidise it to extend its availability. He created a legacy as the man who helped secure federal funding for this drug. After over two years of extensive treatment, sadly Kristian passed away on 2 January 2012.

"It is fitting that we have launched an award in honour of a man who fought so hard to find better and more affordable treatments for people with bowel cancer. Australia has one of the highest incidences of bowel cancer in the world, and over 14,000 Australians are diagnosed with bowel cancer every year. It is vital that we encourage young researchers to choose GI cancer as the cancer they will find a cure for," said Professor John Zalcberg, Chair of the Australasian Gastro-Intestinal Trials Group.

The recipient will be announced in late December 2013.

Trial update

The AGITG currently has 9 studies open to recruitment and 15 studies in follow up.

C0.23 recruited its first Australian patient at the Monash Cancer Centre in September and currently has 14 sites open across Australia. Learn more - www.agitg.org.au/ clinical-trials/trials-open-to-recruitment.

IMPaCT's open! IMPaCT (Individualised Molecular Pancreatic Cancer Therapy) opened in June 2013. A pilot phase to evaluate feasibility and activity on progression free survival will focus on 20 patients from four sites. Bankstown Hospital in Sydney was the first to open the trial and it has now also opened at Royal North Shore Hospital and Royal Prince Alfred Hospital in Sydney. Fremantle Hospital, Fremantle in Western Australia is expected to open in early 2014.



ICECREAM: By the end of October, 31 of the planned 100 patients had been recruited. In Australia all 12 sites are open. The Hammersmith Hospital in London, which opened in July, has recruited their first patient and the Italian site, Seconda Universita degli Studi di Napoli, is expected to open in November.

ATTACHE closed: Due to recruitment difficulties, ATTACHE, a randomised phase III multi-centre comparison of chemotherapy given prior to and post surgical resection versus chemotherapy given post surgical resection, closed to recruitment on 2 October. Although ATTACHE has closed to further recruitment, patients who are on study treatment or in follow-up will continue to be followed. Learn more -www.agitg.org.au/clinical-trials/trials-in-follow-up.

SCOT closed: SCOT has closed to recruitment at the end of November 2013.

Trial recruitment - how the trials are tracking

	Recruited	Target
A La CaRT - Rectal cancer	301	470
CO.23 - Colorectal cancer	34	275
DOCTOR - Oesophageal cancer	70	150
GAP - Pancreatic cancer	28	50
IMPACT - Pancreatic cancer	1	20
ICECREAM - Bowel cancer	35	100
INTEGRATE - Oesophago-Gastric		
Cancer	123	150
SCOT - Colorectal Cancer	213	225
TACTIC - Gallbladder	45	48
TOP GEAR - Stomach cancer	94	752

^{*} Recruitment figures to end November 2013



Engaging with the community



For the first time, the GI Cancer Institute launched a series of three community forums in Melbourne, Adelaide and Sydney to help people understand the challenges of gastro-Intestinal (GI) cancer and the latest advancements in medical research.

Over 400 people attended the forums where leading medical oncologists and health professionals provided an easy-to-understand overview of GI cancer and spoke about the latest advancements in research and treatments. Cancer survivors shared their personal experiences about adjusting to the challenges following diagnosis and treatment for GI cancer.

"The Engage Forum provided an opportunity for those touched by GI cancer to discuss quality of life issues and surviving cancer with experts in the field," said presenter Nick Goodall, cancer survivor and member of the Australasian Gastro Intestinal Trials Group Consumer Advisory Panel.

Feedback from participants was very positive. "One of the best forums I have ever been to - succinct, clear, passionate speakers. Easy to understand and very relevant," wrote one attendee. "I have been to many seminars as a nurse and I found this just amazing. I will be telling my colleagues to go too," commented another.

The Forum held in Sydney on 21 November was filmed and is available to watch as a webcast. Visit us at www. gicancer.org.au to view the presentation. More forums are planned for 2014. Stay tuned!

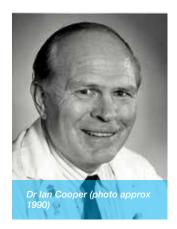
Get the latest GI cancer news

Updated daily and accessible from our website, the GI Cancer news feed is an easy way to read about the latest cancer breakthroughs in detection and treatment, lifestyle tips for preventing cancer and much, much more.

Australasian Leukaemia & Lymphoma Group



The Australasian Leukaemia and Lymphoma group is celebrating the 40th anniversary of its foundation in 2013. As the oldest cancer collaborative trials group in Australia, the ALLG traces its existence back to the establishment of the Australian and New Zealand Lymphoma Group in 1973. The very first trial, amazingly a randomised phase III study in non-Hodgkin Lymphoma, accrued 181 patients from 7 sites in Victoria, NSW, Qld, ACT and SA between 1974 and 1979 and was published in 1982.



Dr lan Cooper at Peter MacCallum Cancer Centre chaired the ANZLG for over 20 years. Ian has been honoured by induction into the recently established ALLG Hall of Fame. Set up as part of the 40th anniversary commemoration, the Hall of Fame was inaugurated at a gala dinner in Sydney in November. Its purpose is to give recognition to those who have made an outstanding contribution to clinical research in blood cancers through the ALLG.

lan Cooper was PI or co-PI on the first five NHL studies, which focussed on the addition of new drugs and dose intensification in an effort to improve treatment outcomes for patients. With his scientific integrity, wisdom and commitment, lan established a standard that has remained with the group to today.

lan was also for many years chairman of the COSA standing committee on clinical trials. This committee was established in 1979, initially under the chairmanship of Dr John Colebatch, to advise on the design, conduct and evaluation of trials conducted by groups within COSA. Ian was chair of the committee from 1981 until his retirement in 1994. During his time as Chair, the committee published a book entitled "Guidelines for Clinical Trials in Cancer", which was an important document guiding clinical research in cancer in Australia for a long period.

lan's unfailing caring attitude, sensitivity and sympathy for patients and mentoring of haematologists and other staff have left indelible memories. Ian retired in 1995 and died sadly the following year. The award of induction into the Hall of Fame was presented posthumously to his son Mark.



Hall of Fame inductees - from left to right: Prof Jim Bishop AO, Mark Cooper (son of Dr Ian Cooper), Dr Jane Matthews and Prof Ray Lowenthal AO

The Australian Leukaemia Study Group began as a separate group in 1982. The first trial was a phase I/II study in AML and accrued 28 patients from 6 sites between 1983 and 1984. Prof Ray Lowenthal AO (Royal Hobart Hospital) who was its inaugural Chairman is also a Hall of Fame inductee. Ray was a Pl and author on most of the early AML studies. His particular

contribution was the promotion of the use of idarubicin in AML, which became a standard component of group trial regimens. As well as having been an active member of the ALSG and then the ALLG for over 40 years, Ray is well known in the haematology/oncology community for his wide clinical interests. He published one of the first books on cancer for consumers in 1990 and in 2005 convened a conference in Darwin on cancer in Indigenous Communities. He has been the recipient of many awards most notably the Officer of the Order of Australia in 2006. Ray has recently retired from clinical practice.

The second Chairman of the ALSG from 1984 to 1993, Prof Jim Bishop AO, was also an inductee into the Hall of Fame. Jim was a key driver of the ALSG leukaemia trial program which helped establish new Australian standards of care for AML. As PI or co-PI of many AML studies he led trials which made important contributions to shaping clinical care in AML nationally and internationally. Jim's subsequent career has taken him to leading positions in other agencies, including chair of the Cancer Institute NSW, Chief Medical Officer of Australia and most recently Executive Director of the Victorian Comprehensive Cancer Centre.

A central figure in both early groups was Dr Jane Matthews, biostatistician, who was the fourth Hall of Fame inductee. Jane made an impact on almost every aspect of group and continues involvement to this day. She was instrumental in setting both groups up, served on Executive Committees, the Safety and Data Monitoring Committee and many writing committees. Jane was responsible for statistical input for the vast majority of protocols from 1973 until her retirement in 2003, and almost every publication of trial results to that date and beyond. She was particularly associated with the flagship series of randomised NHL and AML studies. Jane was intimately involved with at all stages of trial conduct in the Trial Centre at Peter MacCallum Cancer Centre, and also analyses and publication. She brought her high standards to play in particular in



relation to ethical issues and data integrity and her trial reports set a standard of comprehensiveness, level of detail, clarity of expression and scientific accuracy that remains a model to this day.

Jane Matthew's contribution is incalculable. Without Jane the ALLG would not be what it is today.

In 1999 the two groups, the ANZLG and the ALSG fused to form the ALLG. The gala dinner on 14 November celebrated the group's research achievements over 40 years and the people who have made this possible.

Professor Mark Hertzberg Chairman Scientific Advisory Committee ALLG

Australia and New Zealand Breast Cancer Trials Group



NHMRC Grant for ELIMINATE: Grant to help Australian researchers improve surgery options for women with larger breast cancers

A \$2.1 million grant from the National Health and Medical Research Council (NHMRC) will help Australian researchers investigate whether combining chemotherapy with oestrogen lowering treatment before surgery will be more effective in shrinking breast cancer in women diagnosed with large oestrogen receptor positive breast cancer.

The grant will help fund a new breast cancer clinical trial called ELIMINATE which has been developed by researchers of the Australia and New Zealand Breast Cancer Trials Group (ANZBCTG).

Women diagnosed with large oestrogen receptor positive breast cancer are often treated with chemotherapy before surgery to reduce the size of the cancer, while treatment to lower oestrogen levels is given after surgery to lower breast cancer recurrence. This new clinical trial is studying if combining chemotherapy with oestrogen lowering treatment before surgery will be more effective in shrinking the cancer which may provide the opportunity for breast conserving surgery for more women. For some women who have a good response to treatment, a mastectomy might be able to be avoided.

Associate Professor Prue Francis, one of seven ANZBCTG Chief Investigators for the ANZBCTG ELIMINATE clinical trial, says the grant announcement is tremendous news for both researchers and particularly women diagnosed with breast cancer.

"This research will answer an important question and has the potential to increase breast conserving surgery for more women diagnosed with larger tumours," Associate Professor Francis said.

"If the idea behind this clinical trial is proven, a change in routine practice could be recommended for women with large oestrogen receptor positive breast cancer and it may pave the way for similar research for women with smaller hormone sensitive cancers who require chemotherapy after surgery."

The ANZBCTG is Australia's national organisation dedicated entirely to breast cancer clinical trials research. It conducts a national clinical trials research program for the treatment, prevention and cure of breast cancer. The research program involves multicentre clinical trials and collaboration with more than 80 institutions and over 600 researchers throughout Australia and New Zealand. More than 14,000 women have

participated in ANZBCTG breast cancer clinical trials. The ANZBCTG's fundraising department is the Breast Cancer Institute of Australia.

The ELIMINATE clinical trial brings together leading ANZBCTG researchers. The Chief Investigators involved in the trial are:
Associate Professor Prue Francis, Peter MacCallum Cancer Centre; Associate Professor Nicholas Wilcken, University of Sydney; Dr Nicholas Murray, Royal Adelaide Hospital; Professor John Forbes AM, The University of Newcastle; Associate Professor Andrew Redfern, University of Western Australia, Professor Frances Boyle AM, University of Sydney; and Associate Professor Andrew Spillane, Melanoma Institute Australia and the University of Sydney.

The Associate Investigators are: Associate Professor Glenn Francis, Associate Professor Ian Campbell, Ms Petrina Burnett and Professor Val Gebski.

ELIMINATE (Estrogen Lowering Intervention May Increase NeoAdjuvant Therapy Efficacy) is a randomized phase II trial of neoadjuvant chemotherapy +/- concurrent aromatase inhibitor endocrine therapy to down-stage large oestrogen receptor positive breast cancer.

For further information about the ANZBCTG and the Group's clinical trials research program, visit www.anzbctg.org

2014 ANZBCTG's Annual Scientific Meeting

The Australia and New Zealand Breast Cancer Trials Group's 36th Annual Scientific Meeting (ASM) will be held from 16-19 July 2014 in Wellington, New Zealand.

A full and extensive program is being planned which includes specialized workshops, two days of scientific sessions covering timely reviews of breast cancer clinical trials, discussions of new protocols, future trials research and other relevant research developments.





Registration for the ASM will open in early 2014. Information about the ASM can be found at www.anzbctg.org or contact the ASM Secretariat on +61 2 4925 5255 or asm@anzbctg.org.

The 2014 Australian Women's Health Diary

The 2014 Australian Women's Health Diary is now on sale and contains the latest health and lifestyle information, all the essential features to organise busy lives, plus a bonus pink pen.

It is priced at \$14.95 and all proceeds

support the research program

of the Australia and
New Zealand Breast
Cancer Trials Group. To
purchase a dairy, which
makes a great Christmas
gift for friends and family,
please visit our website at
www.anzbctg.org.

Australian and New Zealand Children's Haematology and Oncology Group



Australian and New Zealand Children's Haematology and Oncology Group (ANZCHOG) is continuing to strengthen and grow, supported by our recent success in securing Cancer Australia funding for the

next three years. This funding will assist us to develop research and trial projects, which combined with a range of other ANZCHOG initiatives, will enable us to improve our treatment and care for children with cancer and their families.

ANZCHOG's 2014 Annual Scientific Meeting

After the success of ANZCHOG 2013 ASM, planning is underway for the 2014 ASM (to be held in Sydney, 18 -21 June 2014). An exciting program is being developed around the theme of "Improving Patient Care – From Bench to Bedside". In addition to workshops and presentations from top paediatric oncology researchers and health professionals, the organising committee has secured a number of distinguished international speakers. We look forward to releasing additional details in the coming weeks. All welcome!

Clinical trial news

ANZCHOG is currently working with several international cooperative clinical trials groups to boost the number of trials sponsored locally in Australia and New Zealand. In May, ANZCHOG was welcomed as a national member of the large European leukaemia and lymphoma group, International Berlin Frankfurt Munster (I-BFM) Study Group. Through ANZCHOG's research sub-group, Australian Children's Cancer Trials (ACCT), and ACCT's membership of the Early Phase Paediatric International Cancer (EPPIC) Alliance, participation in global early phase trial opportunities is planned. With the challenges of relatively small numbers across a range of tumour sub-types, such global participation is critical. Our local studies are continuing to recruit well, in particular our Phase I study for recurrent malignancies. It is a key objective of ACCT, our trials and research sub-group, to provide local early phase options.

ANZCHOG Clinical Trial and Research Initiatives

ANZCHOG continues to build the capacity for our members to undertake research and clinical trials through a range of initiatives. ANZCHOG has developed a clinical research support program, awarding funding and support for researchers to collaborate, develop trial concepts and participate in international trial development. In addition, ANZCHOG acknowledges the broad scope of research interests within our membership, and is building a portfolio of diverse projects (such as examining pain management, bereavement services and clinical management practices) that will continue to improve the way we treat and care for our children. ANZCHOG has teamed up with the Victorian Paediatric Integrated Cancer Service and this collaboration has resulted in a Cancer Australia project grant. The combined project will develop and deliver a range of resources to support consumer involvement within health services and the provision of information resources specifically for paediatric oncology patients and families.

Member support and development

ANZCHOG continues to support our members to undertake a range of professional development opportunities. We have funded members to undertake the Specialist Cert in Clinical Research (Oncology) and to attend ANZCHOG's ASM. In partnership with UCLH (London) we have a joint ANZCHOG/UCLH clinical fellowship in paediatric & adolescent haematology. In addition, ANZCHOG supports our members to develop their trial development skills through attending workshops hosted by Cancer Research Economics Support Team and Cancer Australia's Chair in Quality of Life.

It is a great time to be involved with ANZCHOG – particularly as membership is free!

Please visit our new website at www.anzchog.org

Peter Downie Chair







Trans Tasman Radiation Oncology Group

26TH ANNUAL SCIENTIFIC MEETING

1st April - 4th April 2014

Twin Waters Resort, Sunshine Coast, Queensland

A message from the Convenor

In 2014, TROG Cancer Research will celebrate 25 years of clinical research. The Annual Scientific Meeting (ASM) will be hosted at the Novotel Twin Waters on Queensland's Sunshine Coast.

TROG's ASM provides a forum for radiation oncologists, cancer care clinicians, physicists, radiation therapists, data managers, research nurses, clinical trial co-ordinators and personnel from allied health fields to meet and discuss TROG's current portfolio of clinical trials, potential new trials and new technologies.

The theme for 2014 is "Innovation and Technology-based Cancer Research'.

Our invited international speaker is Professor David Brizel from New York's Duke Cancer Institute. Professor Brizel is an eminent radiation oncologist with New England Journal of Medicine publications and will present on 'Quality in Clinical Trials'.

The social calendar for our ASM promises to be fun and will allow old friends to reconnect, as well as new friendships and networks to be developed.

I look forward to welcoming you all to the TROG 25th Anniversary ASM14 in beautiful sunny Queensland.

Bryan Burmeister

Convenor TROG ASM14

Official Program

Tues 1st April	Technical Research Workshop, Clinical Trial Management Workshop, FRO Trainee Statistics Workshop
Wed 2nd April	Official Opening: Dr Chris Davis, Deputy Minister of Health, QLD Gastrointestinal, Breast, New Proposals, Lung, Guest speaker - Keith Whelan, Guest speaker - David Ball, Annual General Meeting
Thurs 3rd April	Sponsored breakfast session, Prostate, Head & neck, Guest speaker - David Brizel, Lymphoma, Symptom management, New Proposals revisited, free afternoon activity
Fri 4th April	Skin, CNS, Gynaecological, Bladder, Education, Official close

www.trog.com.au | www.trog2014.com | +61 2 4014 3911





Australia and New Zealand Melanoma Trials Group 2013 Update

The aim of the Australia and New Zealand Trials Group (ANZMTG) is to support our members to develop clinically relevant investigator driven clinical trials focusing on melanoma. Membership to the group is free and all members receive weekly e-bulletins and regular newsletters with relevant information of treatment, management and upcoming events.

ANZMTG have had a busy and successful vear. We held our Annual Scientific Research Meeting in Brisbane coinciding with The Global Controversies in Skin Cancer Congress in late November. The meeting provided a good opportunity for the members to come together and review all of the current studies as well as discussing a number of exciting new concept proposals. The 2013 highlights include presentation and publication of a number of trials at major melanoma meetings including the presentation of the ANZMTG 01.02 final results at the American Society of Clinical Oncology (ASCO) in Chicago USA; various poster and oral presentations at the World Melanoma Congress in Hamburg, Germany, The Global Controversies in Skin Cancer Congress in Brisbane, Australia and the Cooperative Trials Group for Neuro-Oncology (COGNO) Annual Scientific Meeting in Sydney, Australia.

The ANZMTG Executive Committee and membership was also very pleased to have had 3 trials accepted for poster presentation as part of the Clinical Trials in Progress sessions at the 2013 COSA Annual Scientific Meeting. Dr Megan Lyle, Medical Oncologist at Melanoma

Institute Australia and ANZMTG member, presented as a part of the COSA Meeting program, with recent data regarding melanoma mutations, targeted therapies and upcoming trial protocols which was of particular relevance to our membership.

In 2014, ANZMTG will continue to build momentum in respect to the current trial recruitment, promote clinical trial development via annual presentations at the major national melanoma units and will also develop a series of concept development workshops to encourage new research in melanoma. ANZMTG will continue to expand and diversify the membership to ensure appropriate representation nationally. We invite any COSA member to look on our website for more information about our activities www.anzmtg.org.

Cancer Nurses Society of Australia



Another busy year for CNSA is coming to a close. With a successful Winter Congress, strong membership participation and active regional and special interest groups, we have much to celebrate as we enter the festive season. Recent nominations will however see changes to our National Executive Committee (NEC) in 2014.

We say a fond farewell to Mei Krishnasamy our Past President and welcome Ray Chan as President Elect. Megan Nutt steps down as our amazing Treasurer and Trevor Saunders steps out of his state representation role (Vic) to take on this important portfolio. Sandie McCarthy ends her four years as the Queensland

representative and we welcome Jane Campbell coming in for that state. We also sadly farewell Mary Ryan and welcome Ellen Barlow to the NSW Representative role. Jac Mathieson (Vic) and Laura Pyszkowski (Tas) take up their first terms for their states as Trevor Saunders steps sideways and Laura who has been exofficio since earlier this year takes her official position.

As Tish Lancaster comes to an end of her term on the International Society of Nurses in Cancer Care (ISNCC) in June 2014, she too steps down from the NEC at the end of this year. With ISNCC Board Nominations closing on December 1st, we have had three CNSA Members seek nomination with our International Society's Board of Directors. Ms Sandie McCarthy: Knowledge Development and Dissemination Portfolio, Ms Cath Johnson: Membership Development Portfolio (second term) and Ms Gabrielle Prest: Corporate and Philanthropic Portfolio. Continued Australian representation on the Board has established and strengthened closer ties to our international cancer nursing colleagues and raised awareness with our members of the increasing challenges of equitable cancer care outside of Australia.

Whilst in South Australia attending COSA, a small group of SA Members came together with members of the NEC to discuss reinvigoration of the South Australian Regional Group. Excitingly nine members have come together to reform a committee with a focus on educational and networking events for 2014. If you would like to know more or become involved in their activities please contact Julie Calvert juliec.cnsa@bigbond.com. We look forward to supporting the activities of the new committee and increased member participation from SA.

As we move to a new year the CNSA will continue to work with COSA, its Groups and Affiliate Organisations to strengthen the links between CNSA and the wider opportunities that exist when we work in collaboration. The recent focus of Geriatric



Oncology at the recent COSA ASM 2013 has identified an opportunity for a workshop at our 2014 Winter Congress on the Care of the Older Cancer Patient. Although still in the planning stages we hope to bring this to our members at our 2014 Winter Congress 24-26 July: Leading in a time of change, in Melbourne.

I take this opportunity to thank each and every one of the outgoing NEC members for their amazing dedication, support, guidance and tenacity over their time in the Executive. I have been privileged to work alongside all of you during your time on the National Executive Committee.

Best wish for a wonderful festive season and New Year.

Sandy McKiernan CNSA President

Medical Oncology Group of Australia Incorporated (MOGA)



The Medical Oncology Group of Australia Incorporated (MOGA) is well advanced with plans for another busy year in 2014 as we enter the last quarter of the year. The Association officially welcomed Associate Professor Phillip Parente (Melbourne) and Dr Zarnie Lwin (Brisbane) to the MOGA Executive as newly elected members and Dr Ashayana Malalaskera (Sydney), as the

new National Trainee Representative, at the 2013 Annual General Meeting on Friday 2 August.



Dr Mark Shackleton. Pfizer Australia Senior Research Fellow, Veski Innovation Fellow and Group Leader with the Melanoma Research Laboratory at Melbourne's Peter MacCallum Cancer Centre, has taken over the convenorship of the Association's ground-breaking education program for Australian medical oncology trainees, the Sciences of Oncology Program (8-9 November 2014, Melbourne). The program is only open to MOGA trainees and will focus on translational sciences and research as well as current advances in cancer treatment and their relevance to the clinic, such as developmental biology, immunology, genetics, canceromics and pharmacology. The Program was established to ensure that Australian medical oncology trainees fully understand the sciences that underpin our speciality and ensure their clinical and knowledge bases align with the rapidly changing discipline.

Annual Scientific Meeting

Professor Paul de Souza, Professor and Foundation Chair, Medical Oncology, School of Medicine University of Western Sydney and Director, Medical Oncology, Liverpool Hospital, has taken on the role of Convenor for the Association's 2014 Annual Scientific Meeting that will be held at the Sydney Hilton from 6-9 August. The Meeting title is still under wraps but the focus will very much be on the latest advances in a number of tumour streams, including breast, lung and colorectal cancers, their relevance to clinical practice

and, other developments at the forefront of cancer treatment and management globally, including immunotherapy and bioinformatics.

Best of ASCO® Australia featuring major international oncology research highlights will follow the Annual Meeting on Saturday 9 August. This Program provides a unique opportunity for oncology and allied health professionals to consider and debate the very latest international developments in the field with key Australian and international experts.

Oncology Drugs and Advocacy

MOGA's advocacy and lobbying initiatives related to oncology drugs and treatments in Australia continue to expand. In November, all key Australian stakeholders gathered at the Association's Annual Oncology Drugs Roundtable to consider key national issues relating to oncology drug access and the findings of the Association's Annual Horizon Scanning Report, highlighting major new developments in oncology drugs and research as well as their implications for Australian clinicians. The number of oncology drugs and treatments in the pipeline is rapidly expanding and will place considerable strain on our health system, posing many access challenges for clinicians and patients. The Association has continued to work closely with regulatory agencies on long standing matters such as amending indications to reflect clinical practice for off patent drugs and strategies to address national drug shortages. We have also been active in developing submissions and participating in key meetings regarding workforce, the Chemotherapy Review, Barriers to Access to Oncology Drugs and the Medicines Australia Transparency Review to name but a few.





Australia and Asia Pacific Clinical Oncology Research Development ACORD) Workshop

Applications for the 2014 Australia and Asia Pacific Clinical Oncology Research Development Workshop (ACORD) Workshop to be held from 14-20 September at Coolum on the Sunshine Coast are open through to 24 February 2014 (for details go to www.acord.org.au).

Places at the Workshop are open to junior clinicians and scientists from a broad range of disciplines involved in cancer care including medical, radiation, surgical, haematologic and paediatric oncology, supportive care, palliative medicine, imaging and psycho-oncology. Junior clinicians are those who have completed their oncology or professional training within the last 7 years or will do so within the next 3 years. Junior scientists are those who've completed a PhD within the last 5 years. Applicants are required to submit a clinical trials outline as part of their application to attend the next week-long ACORD Protocol Development Workshop in September 2014, in Queensland, Australia. Selection for the Workshop is highly competitive and only the best 60 applications from more than 120 applicants are offered places.

ACORD 2014 — Apply online now?

CONCEPT OUTSINE HOPE TO NAME ACORD STUDY MORNAGE MORNA

To facilitate Workshop applications from across the Asia Pacific region, from midlate November this year, Professor Martin Stockler, ACORD Convenor, and previous ACORD Faculty member, Dr Andrew Martin from the NHMRC Clinical Trials Centre, University of Sydney, have presented Turning Good Ideas into Successful Studies...Getting Started in Clinical Research: Writing a Concept Outline to start the Clinical Trials Process Workshop.

This series of six 1 day workshops aims to help early career researchers in India and Pakistan turn their new ideas for cancer clinical research studies into persuasive 1 page research concept outlines - ideal starting points for writing study protocols, letters of intent to industry or grant applications to funding bodies and applications for the ACORD 2014 Workshop.

Participants in the workshops were asked to come with an idea for a clinical research study and workshop faculty members assisted participants in developing a concept outline. The workshop program included short presentations, written exercises and small group discussions. The Program was supported by unrestricted education grants provided by Pfizer Oncology and the National Cancer Institute, USA.

Associate Professor Gary Richardson Chairman

Royal College of Pathologists of Australasia (RCPA)



Cancer Services Advisory Committee (CanSAC)

CanSAC is the principle cancer-related committee of the RCPA and is holding a strategic planning meeting this month to examine ways in which the RCPA may better interface with other cancer related organisations, nationally and internationally. At the epicentre of these organisations, the Clinical Oncology Society of Australia,

with it's new Council and broad multidisciplinary and multi-organisational representation presents the RCPA with our single best opportunity for communication and collaboration on cancer-related issues throughout Australasia. As the current chair of CanSAC, Prof Jane Dahlstrom from the ANU Medical School and ACT Pathology will lead the review. Topics will include bio-banking; biomarker testing for personalised medicine and the associated MSAC process; cancer staging activities in conjunction with UICC in Geneva; and further development of cancer data strategies through the National Structured Pathology Reporting Project and leadership of the International Collaboration on Cancer Reporting (ICCR).

Bio-banking

There are many highly successful bio-banks within Australasia with good data linkage yet, with so many jurisdictions, stakeholders and functions, a national framework has thus far been elusive. Funding is clearly a major issue and the RCPA is currently preparing a position paper on the subject.

National Structured Pathology Reporting for Cancer (NSPRC) Project

Good data is critical to any bio-bank, as it is for clinical care, and the RCPA is driving better cancer data through the National Structured Pathology Reporting for Cancer Project in conjunction with Cancer Australia, Cancer Institute NSW and the Department of Health and Aging. There are now over 20 current cancer datasets produced and posted to the RCPA website and there are moves to mandate their use in Australia through the National Pathology Accreditation Advisory Council. In New Zealand, the Cancer Registry has already mandated their use and Cancer Control New Zealand, with collaboration from our RCPA program, has developed an innovative software solution for pathologists to generate structured reports containing all data elements in synoptic format.



Informatics Advisory Committee (IAC)

The IAC is currently engaged in the Pathology Informatics, Terminology, Units and Safety (PITUS) project with funding from DOHA. This will examine ways to standardise reference ranges, units and rendering of reports both for ease of use by clinicians and patient safety. This will include standardisation of cumulative pathology reports so that results are presented in the same order regardless of the generating laboratory and that the format is rendered in a consistent way. Data feeds to Registries are on the agenda, including their electronic implementation and terminology bindings.

Cancer Staging and UICC

The RCPA, through the NSPRC project, submitted the Australasian TNM report to the UICC in Geneva in May this year. As a result, we are now part of the UICC Core Committee and have been asked by the President, Dr Mary Gospodarowicz, to convene a multidisciplinary Australasian TNM Committee. TNM staging is currently undergoing some major changes with anatomical stage being separated from tumour "profiling". We are hoping to convene this Australasian committee in the New Year with COSA's assistance.

Outreach Activities

COSA's Developing Nations Interest Group has much in common with the Developing Communities Working Party of the RCPA. There is no doubt that programs for assisting the development of cancer services and of teaching in developing countries are best done with multidisciplinary coordination. RCPA Fellows through the International Academy of Pathology (IAP) recently began an outreach program in Oceania, centred on Suva and conducted a Symposium there in April this year. It is hoped that in 2014 we may be able to work with COSA in a coordinated approach on this and other outreach activities.

International Collaboration on Cancer Reporting (ICCR)

The ICCR continues to be led by the RCPA and is currently being incorporated as a not-for-profit organisation with a Board and Steering Committee similar to the new COSA Constitution, with the Company office in Sydney, Australia. Founding signatories include pathology Colleges and Societies of the USA, Canada, Australia, UK and the European Society of Pathology, bringing over 64 countries and one billion people under a common process for cancer dataset reporting. The International Association for Research in Cancer (IARC) is engaged on the Steering Committee; the Series Editors of the WHO Classification of Tumours are active participants, and ICCR datasets are to be produced in synchrony with all future WHO Tumour Classification Monographs. UICC, FIGO and AJCC are all represented on the ICCR Steering Committee. IARC and UICC are keen to see the ICCR play a global role in education by involving developing countries in the development and use of these datasets. To begin this process, a presentation was made to the newly formed African Pathology Forum at the AORTIC meeting in Durban, South Africa in November 2013, an activity which has some alignment with outreach goals of both RCPA and COSA.

A/Prof David Ellis, Chair, NSPRC Project, RCPA, Cancer Australia and Cancer Institute NSW

Chair, ICCR



International Collaboration on Cancer Reporting

International Collaboration on Cancer Reporting Email: dwe@member.rcpa.edu.au





Calendar of Events

Date	Event	Venue
2014		
23 - 25 January	The 1st World Congress on Controversies in Multiple Myeloma (COMy) 2014 www.comtecmed.com/comy/2014/	Bangkok, Thailand
5 - 7 February	First International Symposium on Cancer in People with Intellectual Disability www.oncodefi.org/en/project.html	Montpellier, France
4 - 5 March	COSA Cancer Care Coordination Conference 2014 www.cosaccc2014.org	Sydney, New South Wales
2-5 April	International Symposium on Oncology Pharmacy Practice (ISOPP 2014) www.isoppxiv.org/	Montreal, Canada
3 - 5 April	Australasian Lymphology Association Conference www.alaconference.com.au	Auckland, New Zealand
9 - 11 April	10th Asia Pacific Musculoskeletal Tumour Society (APMSTS) Meeting www.apmsts2014.aoa.org.au/	Melbourne, Victoria
13 - 16 April	Australian Pain Society ASM 2014 www.dcconferences.com.au/aps2014/Home	Hobart, Tasmania
6 - 9 May	Royal Australasian College of Surgeons Annual Scientific Congress 2014 www.surgeons.org	Marina Bay Sands, Singapore
26 - 28 June	MASCC/ISOO International Symposium on Supportive Care in Cancer 2014 www.mascc.org	Miami, Florida, USA
28 - 29 June	St Jude-Viva Forum www.viva.sg/stjude/	Singapore
30 June - 02 July	International Symposium on Pediatric Neuro-Oncology www.ispno2014.com/index.html	Singapore
13 - 15 July	ANZUP Annual Scientific Meeting 2014 www.anzup.org.au/content.aspx?page=asm-home	Melbourne, Victoria
24 - 26 July	CNSA Winter Congress 2014 www.cnsawintercongress.com.au/	Melbourne, Victoria
31 August - 02 September	15th Asia-Pacific ProstateCancer Conference 2014 www.prostatecancerresearch.org.au/	Melbourne, Victoria
11 - 13 September	3rd World Congress on Controversies in Hematology (COHEM) www.comtecmed.com/cohem/2014/	Istanbul, Turkey
14 - 19 September	ACORD Workshop 2014 www.acord.org.au/	Coolum, Queensland
09 - 11 October	Breast Surgeons of Australia and New Zealand Congress www.breastsurganz.com/events.html	Surfers Paradise, Queensland
8 - 11 November	15th Biennual Meeting of the International Gynaecologic Cancer Society http://www2.kenes.com/igcs/pages/home.aspx	Melbourne Victoria
16 - 19 November	Australian Health and Medical Research Congress www.ahmrcongress.org.au/	Melbourne, Victoria
2 - 4 December	COSA's 41st Annual Scientific Meeting	Melbourne, Victoria
4 - 6 December	UICC World Cancer Congress	Melbourne, Victoria

