



Sandro V Porceddu,  
President, COSA

## President's Report

The COSA Board met recently and have developed a new strategic plan for July 2014 to June 2019 which was presented to Council in March. The 4 key pillars include Advocacy, Education, Research facilitation and Sustainability. These strategic goals have been set to ensure that COSA remains the peak multidisciplinary body for health professionals involved with cancer care and control. Ongoing work is being done in collaboration with Marie Malica to finalise the KPI's and budget that will support these goals. All COSA Groups have been asked to formulate plans for the forthcoming financial year and to align any proposed activities with the agreed strategic directions. Details about the strategic plan will be available to all members shortly through the website.

The "new look" COSA Council meeting was held in March. This forum is now focussed on discussions around cancer care issues that are of concern to the membership. It is also an opportunity for Council members to provide a report on the activities of their Groups. It was a dynamic exchange of ideas and opportunities for collaboration across the membership.

Listed below is a summary of some of the Group's activities and issues that were discussed at the March Council Meeting

Wayne Nicholls, Chair of the COSA AYA Group, gave a presentation on the Group's achievements and plans for the coming year. In line with the strategic direction "Advocate for matters affecting cancer service delivery, policy and care," Wayne presented some excellent and practical proposals in the AYA space including:

- Promote the establishment of a virtual national tumour biobank as biological differences across different age groups exist that are not fully understood.

- Advocate for a reduction in the age eligibility criteria for pharma-sponsored trials. Age alone should not prevent a 15 year old cancer patient who is physiologically the same as an 18 year old from participating in a trial.
- Foster cooperation between Australian clinical trials groups.
- Lobby the Government and other funders to support AYA research activities.

The COSA Geriatric Oncology Group wishes to advocate for the removal of upper age limits in trials to enable their patients to participate. This may present an excellent opportunity for the AYA and Geriatric Groups to work together.

Sabe Sabesan, Chair of the COSA Regional and Rural Group, also presented on the recent activities of his Group. The R&R Group has a new Executive Committee, and Sabe acknowledged the great work of the previous committee in advocating for funding to support Regional Cancer Centres (RCCs). 26 RCCs are in differing stages of development and all should be fully established by the end of 2014. The Group plans to work on the disparities in access to specialist multidisciplinary care for rural vs non rural; as well as Indigenous vs non Indigenous populations, thus driving the Group's aim to make COSA a home for Indigenous related cancer activities.

Council also considered the following proposals:

- Christopher Steer's request that COSA considers the issue of cytotoxic contamination in the workplace and the advantages/disadvantages of closed system transfer devices. Council agreed to seek further advice from the Cancer Pharmacists Group, particularly on the importance and use of the technology.

## President's Report Continued

- Sandy McKiernan presented a discussion paper from CNSA on the administration of intravenous cytotoxic therapy by Enrolled Nurses. The request was for COSA and CNSA to develop a joint position paper for EN administration of IV cytotoxics. Council agreed to provide in-principle support for the proposal however the issues are much broader than COSA's remit and may fit best with CNSA.
- Farshad Foroudi, Scientific Committee Chair of TROG, spoke to his request for COSA to assist in identifying volunteers for a TROG Independent Data Safety Monitoring Committee. Given TROG's membership comprising professionals working in radiation oncology, COSA is well placed to help identify medical oncologists, surgeons, radiation oncologists and other health professionals independent of TROG. Of course we are happy to help and Eva Segelov volunteered herself at the meeting. A request for other volunteers will be circulated to the COSA membership.
- Council also supported the proposal from Paul Grogan, Cancer Council Australia Director of Advocacy, for the development of joint National Cancer Care Policy.

In other matters I recently attended another productive meeting of the National Cancer Expert Reference Group which informs COAG in cancer issues. COSA made a joint submission led by CCA to the House of Representatives inquiry into skin cancer in Australia recommending ongoing education of and support for GPs in skin cancer prevention, early detection and treatment, as well as an update and dissemination of clinical practice guidelines.

Please feel free to contact me or Marie with any comments or suggestions at [cosa@cancer.org.au](mailto:cosa@cancer.org.au).

**Sandro V Porceddu**  
President

# Executive Officer's Report

I'm sure you will have seen from Sandro's report that COSA Council has returned to being a forum of information exchange, now that the governance and finance discussions have moved to the Board. Many Council members have mentioned to me that they are really enjoying the vibrancy and are feeding off each other's enthusiasm – I even had one member comment that the March meeting was the best Council meeting ever!

## Strategic Plan

The new Strategic Plan will be made available in June, so for now here is a snap shot of the important components.

**Vision:** Quality multidisciplinary cancer care for all.

**Mission:** To improve cancer care and control through collaboration.

COSA achieves this by:

- Supporting the professional and educational needs of cancer health professionals
- Enhancing cancer care and control through network development
- Advocating for improvements in cancer care and control
- Facilitating research across the spectrum of cancer

## Guiding principles for COSA activities

As a membership organisation, COSA activities are driven by the needs of our members. The following guiding principles are intended to provide an overarching direction for all COSA activities.

1. COSA activities should have a multidisciplinary focus
2. COSA activities should have a clinical focus
3. COSA activities should have outcomes relevant to its members, patients and carers
4. COSA will act as a hub and facilitator for idea generation

## COSA ASM

Planning for the 2014 ASM at the Melbourne Convention and Exhibition Centre is well and truly underway with the program almost finalised. Building on the strength of previous meetings and to appeal to COSA's multidisciplinary membership, the Organising Committee led by our expert convenor Mei Krishnasamy is keen to ensure the inclusion of broad content in every session.

As I am sure you know by now we are holding the 41st ASM held in conjunction with the UICC World Cancer Congress (WCC) in the first week of December 2014. The COSA ASM will be held Tuesday 2 to Thursday 4 December, and WCC 4 to 6 December, with Thursday 4 being a joint day. Delegates can either register for the COSA ASM, or the WCC, or both. Discounts are on offer if people register for both, and on the joint day delegates will be free to move between all sessions.

The theme for COSA's 41st ASM will highlight cancer survivorship, supportive care and palliative care – all important areas of interest for COSA members, and hopefully attractive to WCC delegates also. Our disease themes are lung cancer and metastases.

The Australasian Metastases Research Society (OzMRS) are planning to hold a half day meeting on Monday 1 December, therefore the Tuesday program will concentrate on metastases and oligometastatic disease; Wednesday's focus will be on lung cancer and Thursday will bring everything together with the joint UICC/WCC day. Survivorship, palliative and supportive care will be blended into the program on each day.

Program highlights include:

- Tuesday 2 December – Metastases, Oligometastatic disease, Survivorship, Late effects, and Emerging technologies
- Wednesday 3 December – Lung cancer, Mesothelioma, Tobacco control, Integrative cancer management, Patient outcomes, and Nutrition
- Thursday 4 December – Sustainable systems, The financial morbidity of cancer care, Clinical trials, Hot topic – cost versus benefit, and the COSA Presidential Lecture will be delivered by Professor James Bishop AO

In addition to an extensive and broad representation from Australia, I am delighted to announce that the following invited international speakers are confirmed:

Donald Abrams – Integrative oncologist, USA



Julia Downing – Palliative care nurse, Uganda



Thomas Jagoe – Cancer and Nutrition expert, Canada



Normand Laperriere – Radiation oncologist, Canada



Mary McCabe – Cancer survivorship expert, USA



Harvey Pass – Surgical oncologist, USA



Sumitra Thongprasert – Medical oncologist, Thailand



Visit the conference website for information about abstract submission, registration, speakers and program updates ([www.cosa2014.org](http://www.cosa2014.org)).

## Cancer Drugs Alliance

I was pleased to represent COSA at the Cancer Drugs Alliance Forum held in Canberra 26-27 March 2014. Delegates at the Forum included consumers, clinicians and industry. This is the first time this breadth of stakeholders across our cancer community had come together. The key issues explored were: how we ensure the consumer voice truly gets heard; how we help inform evidentiary requirements; and how we shape a fit-for-purpose Australian system – one that is equitable, affordable and sustainable. The challenge for the Alliance will now be harnessing the energy and enthusiasm at the Forum into some early wins and actions.

## Clinical Trials Alliance

On 28 March I represented COSA at the Australian Clinical Trials Alliance meeting in Melbourne – a national summit of investigator-initiated clinical trials networks. The meeting objectives included providing an opportunity to discuss innovative opportunities for increasing the impact of investigator-initiated clinical trials and the capacity of collaborative networks to answer important clinical questions and provide better evidence to support the delivery of high-quality health care. It is evident that cancer has a long history in running investigator initiated trials through the Cancer Cooperative Trials Groups, yet there are always opportunities to learn from other diseases areas and share knowledge.

**Marie Malica**  
**Executive Officer**



# Abstract Submission Guidelines

## Online Abstract Submission

Abstract submission is online at  
<http://www.cosa2014.org/>

You are able to cut and paste your abstract from a Word document, into the online submission system. The link used for submission will first ask you to load your personal details on your "registration dashboard". This is the same site for registration and accommodation if required, and is an enduring page that will last for future COSA meetings. If you registered for the 2012 or 2013 COSA ASM &/or submitted an abstract, your details should still be in the system and can be updated if necessary.

You should keep all emails sent to you regarding your abstract submission. Once you begin your abstract submission, a number of specific background questions will be asked. The reviewers can see your answer to these questions. Once you have made your submission, you can return and edit it up until the closing date for submissions.

1. Abstract submissions close:

**Wednesday 13 August 2014 – COSA  
Abstract submissions**

**Wednesday 9 July 2014 – COSA  
Symposium abstract submissions**  
(Please refer to the Symposium  
Submission Guidelines for additional  
information)

2. Abstracts are invited to be submitted under **one** of the following categories:

Basic and Translational Research  
Clinical Research  
Education  
Epidemiology  
Health Services  
Supportive Care \*  
Lung Cancer (Conference theme)  
Survivorship (Conference theme)  
Service Provision (poster only) \*\*  
Trials in Progress (poster only) \*\*

*\* Supportive Care is a highly subscribed category. Submitters should consider the suitability of this category when submitting an abstract, as the potential for being awarded a presentation in the Supportive Care category is reduced.*

*\*\* These abstract categories are for non-scientific abstracts. They do not need to follow the normal abstract format and are only considered for poster submission and are still eligible for poster awards.*

3. Maximum text length allowed is 300 words in length including sub-headings. To assist your preparation, abstracts may be structured under the sub-headings Aims, Methods, Results, Conclusions. The sub-headings must be concise, with only the first word starting with a capital letter.

4. Reports of completed studies are preferred, and will be given preference in selecting oral presentations, especially over abstracts which do not report results but indicate that they will be reported at the meeting or mere descriptions of trial methodology. Results of research will be given preference over descriptions of services for oral presentations.

5. Abstracts reporting quantitative studies should contain the planned accrual target and the actual number of patients recruited, levels of significance and confidence intervals of results. Abstracts of qualitative research should indicate how they chose their sample size (e.g. data saturation) and the methodology of analysis.

6. Abstracts will be "blinded" to the reviewers. They will not be able to see the authoring or organisation information. Submitters must not assume that there will be knowledge of the previous work of a group or strength of a research group or researcher.

7. Most of the submitted abstracts will be allocated posters as there will only be a limited number of slots for oral presentations. The best posters will be selected for specific poster presentation sessions with a discussant.

8. Images are not accepted in abstracts.

## Examples of exemplary abstracts

Please take the time to go to the conference website (<http://www.cosa2014.org>) to review examples of an exemplary abstract, and abstracts which would not meet the standard required for acceptance.

# Tom Reeve Award for Outstanding Contributions to Cancer Care

The Tom Reeve Award, offered annually by COSA, formally recognises a national leader who has made a significant contribution to cancer care.

Nominations are now open for the 2014 Tom Reeve Award for Outstanding Contributions to Cancer Care, closing Friday 20 June 2014.

## To be eligible nominees must:

- have made a significant contribution to cancer care through research, clinical leadership and/or community service
- have made a substantial contribution over a relatively long period of time
- be nominated by a COSA member and have support from a member of COSA Council
- be an Australian resident

## Each nomination should include:

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

The successful nominee will be presented with a Gold Marryalyan at the COSA Annual Scientific Meeting (December) at which he/she will deliver an address highlighting appropriate aspects of their area of professional interest, which will also be published in the Society's journal Cancer Forum.

Nominations and supporting documentation should be sent to [cosa@cancer.org.au](mailto:cosa@cancer.org.au) by **Friday 20 June 2014**.



*Ilan Frazer AC - 2013 Tom Reeve Award recipient, delivering his address at COSA's 40th Annual Scientific Meeting conference dinner*



*Previous Tom Reeve Award recipients: (L-R) Patsy Yates (2009), David Ball (2012), Phyllis Butow (2011) & Alan Coates AM (2006)*

## Australia Day 2014 Honours List

COSA congratulates the following member:

Prof Phyllis Butow AM

## COSA Travel Grants

COSA is pleased to call for travel grant applications from financial Society members to attend the Annual Scientific Meeting (ASM) in Melbourne from 2-4 December 2014. Each grant will be up to the value of \$1,000.

## COSA-IPSEN Travel Award

In 2014 IPSEN continues its tradition of sponsoring four COSA members with travel grants up to the value of \$1,100. Recipients will have their names published in the Marryalyan and in the IPSEN Affinity Newsletter that goes to health care professionals within Australia.



## COSA Trainee Travel Grants

COSA trainee travel grants aim to assist oncology trainees in Medical, Surgical or Radiation to attend the ASM or the Trainee Weekend in Melbourne, 29-30 November 2014.

**All travel grant applications close:  
Monday 18 August 2014**

*All funds awarded are to be used for expenses incurred in attending the ASM. Please note all recipients of travel grants will be reimbursed after the event.*

Please refer to **[www.cosa.org.au](http://www.cosa.org.au)** for further information on all travel grants

## Clinical Professional Day Funding

COSA invites applications from its constituent professional groups for grants of up to \$7000 (+GST) to conduct "professional day" meetings or educational sessions aimed at fostering professional development. All COSA's disease, specialist, craft and interest groups are encouraged to apply for a professional day grant. If your group was not a recipient in previous years we encourage you to apply for a grant in 2014.

The aim is to hold professional days on Monday 1 December 2014, immediately prior to COSA's Annual Scientific Meeting (ASM) in Melbourne, 2-4 December 2014. Due to demand, some professional days may be held during or immediately after the ASM (program and space allowing). Depending on the circumstances, grants may also be allocated to support professional days at other times/places in the year.

Visit the COSA website **<https://www.cosa.org.au/grants-awards/clinical-professional-days.aspx>** for guidelines and an application form. **Deadline for submissions is Friday 30 May 2014.**

# COSA Group Reports

## AYA Group

At the strategic planning day in Melbourne on the 6th of September 2013, the COSA AYA Executive Committee were able to identify several key areas of focus for the future activities of the COSA AYA group. One of these was to identify and formulate national research priorities for AYAs.

Over the past few months, the AYA Executive Committee has been busy holding several planning teleconferences for a workshop to develop a draft research agenda with a plan for one and five years. The research strategy workshop was held at the COSA Offices in Sydney on the 17th March 2014. Attendance was excellent with representation from the COSA AYA Executive Committee, Cancer Australia, CanTeen (including the CanTeen Research Advisory Group), Australian Association of Adolescent Health, and eight of the Cancer Cooperative Trials Groups (CCTGs).

The purpose of the workshop was to:

- Identify barriers and issues in AYA research
- Stock take the current activities in AYA research
- Identify priorities for future AYA research
- Identify and promote collaboration opportunities
- Leverage health professional, clinical trial and non-government groups to advocate and achieve change.

Presentations were given on the AYA-PK Study and the ALL6 trial (established as part of the AYA Clinical Research project funded by the Federal Government under Youth Cancer Networks Program and administered by CanTeen) and some of the barriers and challenges they have

faced as they continue to recruit patients in several sites in Australia.

Participants agreed that the best strategy was to focus on the non-therapy issues affecting AYA research, rather than identifying specific studies (which could be done later). The key afternoon session of the workshop brainstormed such issues relating to the following areas:

- Clinical trials (e.g. health economics; age of trial eligibility)
- Tools (e.g. virtual tissue bank)
- Links with other groups (e.g. CCTGs; Cancer Australia; primary care)
- Awareness/education/national curriculum
- Linking technologies (e.g. national clinical trials app)
- Areas of need to add to the list of research priorities (e.g. rural and regional).

Overall the workshop was an excellent opportunity to promote collaboration and participants were highly enthusiastic to be involved in future activities that enable and enhance AYA research.

A full workshop report will be available shortly. The final research strategy will form part of the COSA AYA Group's advocacy platform for research.

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](mailto:cosa@cancer.org.au).

**Wayne Nicholls**  
**Chair, AYA Group**  
**Email: [Wayne\\_Nicholls@health.qld.gov.au](mailto:Wayne_Nicholls@health.qld.gov.au)**

## Cancer Care Coordination Group

On 4th and 5th March 2014 the Cancer Care Coordination Conference 'Constructing Cancer Care Across the Continuum' was held at the Swisshotel in Sydney. The conference was attended by 146 delegates from a range of disciplinary backgrounds from across Australia and New Zealand. The theme focused on coordination across the patient journey and maintaining quality care from pre-diagnosis to survivorship and end of life care. Key concepts addressed included transitions and management of transitions in care, change management and the role of the cancer care coordinator, business and health, and communication strategies. We were fortunate to have Professor Jessica Corner, Dean of Health Sciences at the University of Southampton, and Chief Clinician at MacMillan Cancer Care, to provide an international perspective on cancer care and share her expertise in nursing, survivorship, strategy and reform, and patient experience. In concurrent oral abstract streams, delegates also reported on a range of developments and advances relating to models of care and coordination strategies.

COSA continues to recognise the importance of cancer care coordination. We were honoured to have COSA's President, Sandro Porceddu attend for the day one program. He acknowledged the importance of cancer care coordination within multidisciplinary care.

Professor Corner opened the conference by addressing the changing context of cancer and how health professionals, multidisciplinary teams and systems must adapt in order to continue providing quality care to our patients. She discussed

the impact of global megatrends on current service models and the resource implications of an ageing population. Professor Corner also reported on the importance of quality coordinated care by presenting outcomes from studies comparing perceptions of the quality of care pre-diagnosis to post treatment for patients who received care from a clinical nurse specialist (CNS) and those who did not.

The opening plenary on day one focused on addressing the current fiscal environment in health services, including the implications of Activity Based Funding (ABF) for coordinated cancer care. Speakers from the NSW Agency for Clinical Innovation (ACI) introduced key economic concepts and terminology to delegates with practical examples of economic considerations within our individual service models. The speakers challenged delegates to consider the 'triple aim' in their practice to support the use of scarce resources and provide the most health value for our dollar. The triple aim is to improve the health of the population, enhance experience of care for patients and control costs per capita.

The importance and influence of data demonstrating effectiveness of coordination activities continued to be a key message throughout the conference. Particular emphasis was placed on breaking down silos to integrate quality of care across services and jurisdictions to support the whole population. Violet Platt closed the first session by taking delegates through a case study illustrating the application of ABF principles. She compared the costs and benefits of a patient who went through their cancer journey with a designated cancer care coordinator, and one who didn't. Benefits included not just a reduction of costs, but also improvements in the patient experience. Improvements included less travel time, less time away from families, and earlier access to supportive care. Violet challenged delegates to know the system they work in and how money is allocated, and to work those structures to influence change.

Day two began with Professor Corner acknowledging the key transition points within a cancer patient's journey. She presented the UK's National Survivorship Initiatives in self-management. I followed by presenting the outcomes of a Cancer Council Victoria commissioned research review demonstrating the impact of cancer care coordinator role on cancer patients and the health care system.

Four clinicians involved in various coordination functions across different settings then presented the audience with a very practical session on their experiences, challenges and strategies associated with working across geographical and service boundaries. Delegates were then provided an opportunity to reflect on strategies to achieve systems change. A speaker from the ACI guided delegates in how to think about using their individual position within the system to influence change to the system. She outlined practical approaches and frameworks for developing and implementing innovations to support a model of care which would work across a system of coordinated care. The influence of coordinators in breaking down service boundaries was an important point of discussion in this session.

On the afternoon of day two, Professor Fran Boyle led an interactive session on effective communications with patients and colleagues. She discussed how information provision needs to reflect patient's preferences and needs, and the importance of ensuring patients understand what is being said. The COSA Cancer Care Coordination Executive concluded the conference by facilitating an interactive discussion with delegates about future directions for the Group.

In summary, key messages from the conference include:

- Data and an evidence base are key: use routinely collected data and implement strategies to collect meaningful information about your service
- Support is needed for clinical nurses to participate in and use research in practice

- Ongoing efforts to improve communication skills is essential to improve the patient experience
- Coordinators have a key role in being an advocate for patients within the multidisciplinary team
- Particular attention needs to be given to coordination of care across geographical and service boundaries; Referral pathways and effective communication across sectors are required to breakdown 'silos'
- Designated cancer care coordinator roles have a positive impact on patient experience, and potentially achieve cost reductions
- Care coordinators need to understand the environment in which they work, the impact of fiscal pressures on the health care system, and how to influence decision-making to ensure optimal outcomes for patients.

A full report on the conference will be available shortly. Thank you to all the presenters who volunteered their time, the delegates who continuously show their commitment to improving how we deliver quality care to our patients, and the conference sponsors and exhibitors. I would also like to express my sincere thanks to Douglas Bellamy and the conference planning committee for their fantastic work.

The COSA Cancer Care Coordination Group Executive has prepared a draft strategic plan to guide its work over the next few years. We will provide further details soon and be in touch in the near future to invite participation on various working groups to progress key priority areas.

**Professor Patsy Yates**  
*Chair, Cancer Care Coordination Group*  
[p.yates@qut.edu.au](mailto:p.yates@qut.edu.au)

**Kate Whittaker**  
*Project Coordinator, COSA*  
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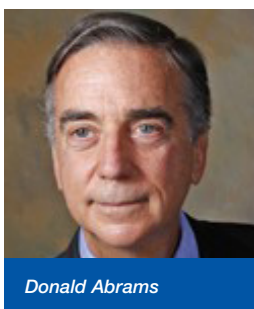
## Complementary and Integrative Therapies Group

### Integrative therapies at COSA 2014 ASM

The COSA Complementary and Integrative Therapies Group is pleased to welcome Dr Donald Abrams MD, the immediate past-President of the Society for Integrative Oncology, to Melbourne in December.

Donald I. Abrams, M.D. is chief of the Hematology-Oncology Division at San Francisco General Hospital, an integrative oncologist at the UCSF Osher Center for Integrative Medicine at Mt Zion and Professor of Clinical Medicine at the University of California San Francisco.

Dr Abrams provides integrative medicine consultations for cancer patients and has completed research in complementary and alternative therapies including mind-body treatments, botanical therapies, medical use of marijuana and traditional Chinese medicine herbal therapies.



### CAM-Cancer Project and COSA CIT Group Partnership

The CAM-Cancer project provides an exciting opportunity for the CIT Group to build an international collaboration. As an official partner of the CAM-Cancer project there may be future invitations to contribute to reviews or other initiatives.

The aims of the CAM-Cancer project are:

- to prepare and disseminate suitable evidence-based information for health professionals in order to assist them in informing their patients
- to build an international authoritative network around CAM in cancer led by a panel of experts in CAM research and/or in cancer care with privileged contacts to cancer organizations.
- [www.cam-cancer.org/](http://www.cam-cancer.org/)

### COSA Integrative Oncology and CAM Position Statement Promotional Slides

The Executive has been preparing a slide set for members and interested persons to present at meetings in their respective States. The slides will highlight the evidence based principles of integrative oncology and promote the COSA CAM position statement. The content is based on a presentations given by Lesley Braun in Perth in August 2013. There are plans for a similar event at the Chris O'Brien Lifehouse centre to promote the CAM position statement and role of COSA.

### New Executive Member

We welcome onto the Executive Christine Scott from the Olivia Newton-John Cancer and Wellness Centre in Melbourne. In 2011 Christine was awarded the Dr Dorothea Sandars and Irene Lee Churchill Fellowship to study the integration of complementary and supportive therapies with conventional medical care for people with cancer – USA, UK.

**Paul Katris**  
**Chair, Complementary and Integrative Therapies Group**  
**Email: [pkatris@cancerwa.asn.au](mailto:pkatris@cancerwa.asn.au)**

## COSA Asia Pacific Mentoring Program -

Applications now open

Each year COSA offers a fellowship to support a 10-12 week program at an Australia cancer institution for a mid-career oncology health professional working in a developing nation within the Asia Pacific region.

The fellow must have a specific project that this fellowship would support and indicate on the application form which institution and mentor will host them.

There are two stages in the application process:

1. Potential fellows who do not have an Australian based COSA member available to host the program should fill in an expression of interest form (due by 25 April 2014). COSA will seek suitable mentors to enable them to submit a full application.
2. Applicants and their mentor must submit a full application. This includes potential fellows who gain a mentor as a result of their expression of interest.

Applications close 4 July 2014.

For more information and to download an application form please visit the Grants & Awards section of the COSA website [www.cosa.org.au](http://www.cosa.org.au)

## Developing Nations Group

The Developing Nations Group aims to enhance co-operation between Australian institutions and cancer services in developing nations. One way the group supports this aim is to provide an annual fellowship to a mid-career health professional working in a developing nation within the Asia-Pacific region. This Asia-Pacific Mentoring Program offers a ten-twelve week observorship at an Australian cancer centre or institution. Applications for the 2014 round are now open.

This year a two stage process has been developed. We know from previous programs that individual fellows within the Asia-Pacific region do not necessarily have a link with Australian cancer centres or institutions, or individual oncology professionals however, programs are strengthened when developed in collaboration. This aids the identification of the fellows intended learning outcomes and the capacity of the host to support the achievement of these.

We are seeking expressions of interest from those fellows who do not have a prior link with an appropriate mentor, and then we will approach the COSA members in these relevant fields to support an application to the APMP. Even if an application to the fellowship is unsuccessful the Executive group see the establishment of a partnership as a positive step.

Individuals who are already in partnership are also encouraged to apply and do not need to submit an expression of interest, just the full application.

COSA will seek to identify external funding opportunities from strong projects identified from the Asia-Pacific Mentoring Program submissions.

More information, including application

forms, are available via the Grants and Awards page of the COSA website ([www.cosa.org.au](http://www.cosa.org.au)).

The group would like to generate discussion about your interests, or enquiries of the membership you may have, and the sharing of journal articles of interest or resources with you and your colleagues. To participate in this discussion and to receive notifications of new posts please update your online membership profile on the COSA website ([www.cosa.org.au](http://www.cosa.org.au)). If you have any issues setting this up please contact at [kate.whittaker@cancer.org.au](mailto:kate.whittaker@cancer.org.au) or on 02 8063 4161.

**Matthew Links**  
*Chair, Developing Nations Group*

## Familial Cancer Group

We are 3 months into 2014 and the COSA Familial Cancer Group has already had one big change – a new chair took over the reins from Gillian Mitchell in February. Gillian has headed to Vancouver, Canada, with her family for what we hope is just one year.

Our current Executive is:  
Chair: Nicola Poplawski (SA)  
Members: Lara Lipton (VIC), Nicholas Pachter (WA), Mary-Anne Young (VIC), Finlay Macrae (VIC), Rachel Susman (QLD), Cliff Meldrum (NSW) and Gillian Mitchell (Vancouver, Canada).

Planning is well underway for the 2014 COSA/Human Genetics Society of Australia (HGSA) Familial Cancer Clinics Clinical Professional Day (which will be held Tuesday 12th August 2014, at the Mantra resort, Kingscliff, NSW). This annual meeting has 4 informative, clinically orientated sessions focusing on different aspects of familial cancer, and includes plenty of time for questions and discussion. This year the session topics

are: familial prostate cancer; rare inherited cancers; the significance and effect of inherited CDH1 mutations in gastric and breast cancer; and genomics – what can we translate to the clinic. Our aim is for delegates to gain clear ideas and understanding of how they might apply up-to-date information about familial cancer in a clinic setting. The meeting is relevant to all professionals working in oncology, but has particular relevance for clinical geneticists and genetic counsellors.

Other familial cancer meetings which will be held in 2014 that might be of interest to COSA members include:

- 6th Familial Cancer Conference, 5-6 Jun, 2014 (Madrid, Spain)
- The Australian Pancreatic Cancer Genome Initiative (APGI) 5th Annual Clinical & Scientific Symposium 21 June, 2014 (Garvan Institute of Medical Research, Sydney)
- 5th International Symposium on Hereditary Breast and Ovarian Cancer: Twenty Years of Advances, 23-25 April, 2014 (Montréal, Canada)

Lastly, I'd like to bring your attention to a series of related publications which focus on cancer in women with familial breast cancer, including familial breast cancer due to germline (inherited) mutations in BRCA1 or BRCA2.

- Brohet et al. Breast and ovarian cancer risks in a large series of clinically ascertained families with a high proportion of BRCA1 and BRCA2 Dutch founder mutations *J Med Genet* 2014;51:98-107
- Metcalfe et al. Contralateral mastectomy and survival after breast cancer in carriers of BRCA1 and BRCA2 mutations: retrospective analysis. *BMJ* 2014;348:g226 doi: 10.1136/bmj.g226 [Published online 11 February 2014]

- Heemskerk-Gerritsen et al. Substantial breast cancer risk reduction and potential survival benefit after bilateral mastectomy when compared with surveillance in healthy BRCA1 and BRCA2 mutation carriers: a prospective analysis. *Annals of Oncology* 2013;24:2029-2035
- The Cancer Australia publication: "Recommendations for the management of early breast cancer in women with an identified BRCA1 or BRCA2 gene mutation or at high risk of a gene mutation" [http://guidelines.canceraustralia.gov.au/guidelines/guideline\\_17.pdf](http://guidelines.canceraustralia.gov.au/guidelines/guideline_17.pdf)

It is important to note that the Cancer Australia recommendations incorporate published evidence to August 2013. Current clinical practice should also take into account the evidence in the articles listed above, especially that related to survival in women with breast cancer after risk reducing contralateral mastectomy (Metcalfe et al), and that related to the potential increased survival in healthy BRCA1 carriers after risk reducing contralateral mastectomy (Heemskerk-Gerritsen et al).

**Nicola Poplawski**  
*Chair, Familial Cancer Group*

## Geriatric Oncology Group

The Geriatric Oncology Group had an exciting and successful 2013. I thank the Group and COSA members for their increasing interest in the field of geriatric oncology. So far in 2014 the Executive have initiated two new exciting projects which have received great support from the membership.

Tim To and Jane Phillips are leading complementary research activities to

inform the role of geriatric assessment in oncological practice. They are supported by a group of Geriatric Oncology Group members to drive these initiatives. This project will investigate the value and views that clinicians place on geriatric assessment in the care of the older person with cancer, incorporation into general practice, and the impact the outcomes have on treatment decisions. This collaborative work will put forward important research to guide future practice including the needs, and delivery for geriatric assessment for general oncologists. Tim will lead a survey of Australian medical oncologists to examine current beliefs and attitudes on the role of geriatric assessment and management. Jane will lead semi structured interviews of the Royal Adelaide Hospital oncologists to assess perceived utility of having a geriatric oncology service. These interviews may be broadened to select other groups of oncologists and staff.

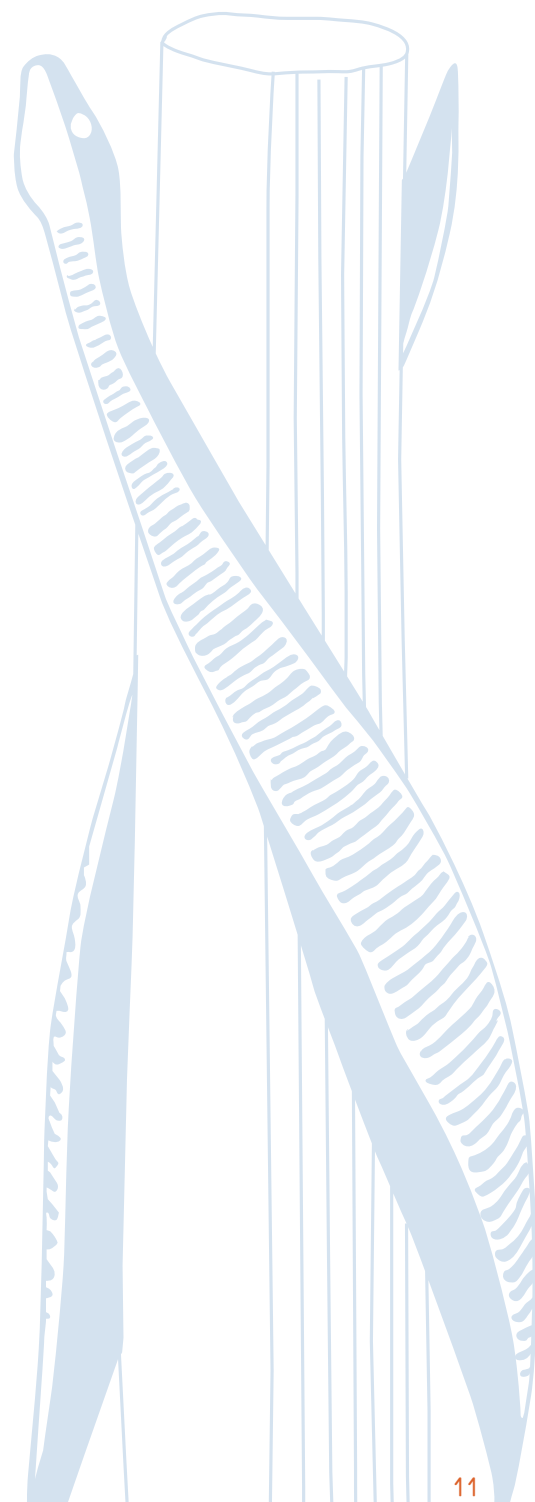
The Executive will also host a pre-congress workshop to the Cancer Nurses Society of Australia (CNSA) Winter Congress on 24th July 2014. This interactive one day workshop will provide nurses with an overview of the key considerations when caring for older people with cancer and their care-giver including: practical tips for integrating screening and assessment into usual practice, an overview of available assessment tools, managing multiple comorbidities, appraising cognitive deficits, identifying and managing delirium, poly-pharmacy and an exploration of the professional and ethical issues associated with caring for older people with cancer. The group is currently in discussions to secure external sponsorship to host this workshop. Thank you to Jane, Nimit Singhal, Kheng Soo and Janette Prouse for developing the program.

I attended my second COSA Council meeting in March and value the opportunity to meet throughout the year with the COSA Group Chairs, COSA Board members and representatives from the Affiliated Organisations. No doubt this

forum will support the communication of information across groups and encourage collaborative opportunities.

I look forward to keeping you informed of the progress of the Group's activities throughout 2014.

**Christopher Steer**  
*Chair, Geriatric Oncology Group*  
[Christopher.Steer@bordermedonc.com.au](mailto:Christopher.Steer@bordermedonc.com.au)



## NETs Group

The activities of the COSA Neuroendocrine Tumours (NETS) Group continues to focus on the SIGNETURE registry. The objective of this database is to facilitate the collection of retrospective and prospective data on patients with NETs in Australia.

There are currently 9 sites participating in the registry in South Australia (Queen Elizabeth Hospital, Royal Adelaide Hospital, and Flinders Medical Centre), NSW (St George Hospital, Royal North Shore Hospital, and Prince of Wales Hospital), ACT (The Canberra Hospital), Victoria (Peter MacCallum Cancer Centre) and Western Australia (Sir Charles Gairdner Hospital). There are now over 200 patients entered in the registry.

A number of database modifications have been proposed by sites to improve functionality and work to implement these changes is currently underway.

COSA would like to acknowledge Ipsen for providing funding for these important modifications and thank them for their ongoing support of the registry.

**Yu Jo Chua**  
*Chair, NETS Group*  
*Email: yujochua@gmail.com*

## Neuro-oncology Group

In March 2014, internationally renowned neuro-oncologist Professor David Reardon, Clinical Director, Centre for Neuro-Oncology, Dana-Farber Cancer Institute, Boston, undertook the MSD Oncology International Speaker Lecture Series across several Australian cities.

### Selected upcoming events in 2014:

Brain Cancer Action Week will be held across several Australian states Sunday 27th April to Saturday 3rd May 2014 with many key events and initiatives. This includes the NSW Brain Tumour Support and Education Forum, sponsored by the Cancer Institute, and hosted by Cure Brain Cancer on Thursday May 1, 2014, Sydney. The forum will be webcast.

Further information can be found here:

**<http://www.curebraincancer.org.au/events/31/brain-tumour-support-and-education-forum>**

As part of Brain Cancer Action Week, there are several other events taking place around Australia, which include:

#### WA

1st May, 7.30am - Breakfast meeting, Crawford Lodge, Cancer Council WA  
Webcast of the NSW event will be streamed live from 8am – 10am AWST  
Contact: Louise Young,  
**[info@btawa.com.au](mailto:info@btawa.com.au)**

#### TAS

1st May - Morning tea to raise money and awareness of brain cancer

Contact: Caitlin Daniels,  
**[caitlin.daniels@dhhs.tas.gov.au](mailto:caitlin.daniels@dhhs.tas.gov.au)**

#### VIC

2nd May - "Action on Brain Tumours", a community information and education forum hosted by Cancer Council Victoria  
Contact: Sally White,  
**[sally@sallywhite.com.au](mailto:sally@sallywhite.com.au)** or  
Dianne Legge, **[btso@austin.org.au](mailto:btso@austin.org.au)**

#### ACT

Contact the ACT Brain Tumour Support Network for information.  
Contact: Susan Pitt,  
**[secretary@btaa.org.au](mailto:secretary@btaa.org.au)**

COGNO will hold its 7th Annual Scientific Meeting from Friday October 24th to Saturday October 25th 2014 in Melbourne with the theme of 'Translating science to patient centred trials'.

COGNO is pleased to host international guest speakers Professor Lisa DeAngelis, neuro-oncologist from Memorial-Sloan Kettering and Professor Minesh Mehta, renowned Radiation Oncologist from Maryland, USA. The 2014 Convenor is Dr Mustafa Khasraw, VIC, with Co-convenor Dr Zarnie Lwin, QLD.

For further information, see  
**<http://www.cogno.org.au/content.aspx?page=cognoasm-home>**

Please contact Dr Koh  
**[eng-siew.koh@sswahs.nsw.gov.au](mailto: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  
Neuro-Oncology Group***

## Nutrition Group

The Nutrition Group's activities continue to firstly focus on maintaining the wiki-based practice guidelines for the nutritional management of head and neck cancer and secondly, activities related to the annual scientific meeting and professional development day planning. Thank you to Dr Anna Boltong for representing the Group on the ASM organising committee.

In this report, Nicole Kiss and Amber Kelaart provide an overview of the Malnutrition in Victorian cancer services project.

**Judy Bauer PhD FDAA**  
**Chair, Nutrition Group**  
**Centre for Dietetics Research**  
**University of Queensland**

### Malnutrition in Victorian cancer services project

Malnutrition in Victorian cancer services is an initiative of the Victorian government working in partnership with Peter MacCallum Cancer Centre and 14 other health services. Phase I was completed in March 2012 as a point prevalence study of cancer malnutrition in 1,693 patients across the 15 health services. The overall prevalence of malnutrition was 31% with a higher prevalence of 57% in the inpatient setting. It was identified that only 45% of malnourished patients were receiving dietetic intervention and that health services with strong governance practices provided more effective dietetic services for their malnourished patients.

Phase II of the project has commenced with a focus on improving the awareness, identification, and management of cancer malnutrition at a state wide and local health service level. Each of the 15 health services involved in the project are conducting local service improvement projects designed to improve the recognition and treatment of cancer malnutrition within the areas of radiotherapy, chemotherapy day units, and high risk tumour streams including gastrointestinal cancer and patients

receiving bone marrow transplant. In addition three state wide projects are underway:

1. Development of an e-learning package led by the Peter Mac Nutrition department. The e-learning package is designed to improve the awareness, recognition and understanding of malnutrition in clinicians working with cancer patients, with the ultimate aim of improving screening and earlier management of this high risk group. The package will contain targeted, discipline specific content, utilising special effects, patient videos and clinician experiences to demonstrate how management of malnutrition requires multidisciplinary involvement.
2. Development of a cancer malnutrition governance tool kit led by St Vincents Hospital Nutrition department. The toolkit is designed to reduce variation in provision of nutrition care to malnourished patients with cancer by informing health services about effective nutrition governance practices, key performance indicators for malnutrition management and models for nutrition service delivery. In addition to the local working group, an expert reference group has been formed. Together these groups will provide input into the development of the toolkit content.
3. A repeat malnutrition point prevalence study led by the Peter Mac Nutrition department. The repeat point prevalence study has been expanded to include 18 health services and will take place in May 2014 in an anticipated 2,700 patients. The results will be compared to the original study from 2012.

It is anticipated that the findings of the local health services projects and point prevalence study, as well as access to the e-learning package and governance tool kit will be available in November 2014.

**Nicole Kiss MND Adv APD (Thu/Frid)**  
**Amber Kelaart MND (Mon - Wed)**  
**Acting Joint Head, Nutrition and**  
**Speech Pathology Department**  
**Peter MacCallum Cancer Centre**  
**[www.petermac.org](http://www.petermac.org)**

## 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>

## Australian Psycho-Oncology Society, the COSA Psycho- Oncology Group

### Identifying Fear of Recurrence in Cancer Survivors

Several OZPOS and COSA members were involved in the development of Cancer Australia's guidelines for the identification of fear of cancer recurrence in survivors. Public consultation has just closed and the release is expected later this year. Keep this useful resource in mind for the future, it will be available on the Cancer Australia website. Don't forget about the POCOG study assessing an intervention to address fear of cancer recurrence in cancer survivors, this study is continuing to accrue participants, deliver the intervention and follow-up procedures. For more information contact [conquer.fear@psych.usyd.edu.au](mailto:conquer.fear@psych.usyd.edu.au)

### Burn-out in health professionals – thank you

Workforce issues are an ongoing issue, our workforce and resources are limited and we need to be mindful of the impact that system changes have on our workforce. Thank you to all the OZPOS members who took part in the recent study conducted by Prof. Phyllis Butow, Dr. Ilona Juraskova, Dr. Laura Kirsten, Victoria Rasmussen and Adrienne Turnell. The results provided some insight into the characteristics and working conditions contributing to the wellbeing of the psycho-oncology workforce internationally. While individuals experience high levels of work engagement, findings revealed a susceptibility to chronic stress in psychosocial oncologists, with one-fifth of participants being identified as highly emotionally exhausted. Screening is recommended as a means of identifying

at-risk professionals, followed by intervention to avoid full blown burnout. Such interventions are needed to enhance employee wellbeing and the quality of patient care. Self-care strategies may also be valuable for alleviating the impact of stressors on wellbeing. In particular, findings support maintaining a balance between the demands of one's work and home life as well as being attentive to warning signs of burnout, such as a loss of meaning derived from one's work.

There remains strong interest in pursuing some work assessing burn-out in healthcare professionals and the psychological services role in providing support to them. If you are interested in participating in this work, please get in touch - we need to establish a working group to plan and undertake this work.

### Developing standards of practice documentation

Practice standards of psychological service documentation vary markedly between practices and even across hospitals in the public sector. Such variation is a marked difference in practice implementation, as is the acceptable communication with other members of the healthcare team about psychological issues for patients. Our aim during the next 6 months is to document the variation in practice and develop guidelines that practitioners can use to support best practice in the delivery of psychological services.

How will activity based funding impact your practice? A question vexing many health professionals at this time, psychological support services need to be proactive to ensure that all aspects of their services are considered within funding models.

### COSA ASM 2014

This year's COSA Annual Scientific Meeting, running back to back with UICC, will focus on cancer survivorship and lung cancer. These are two topics of importance to psycho-oncology members. There will be excellent multidisciplinary plenaries and sessions; you might think

about submitting a symposium addressing specific topics. There will be discussion of great interest to members of the psycho-oncology community. There is still plenty of time to submit your own abstracts and contribute to what looks like being an excellent program.

### Psycho-Oncology across the lifespan - Victorian Psycho-Oncology Research Conference

Three significant groups are partnering to deliver a one-day conference exploring psycho-oncology across the lifespan in Melbourne Friday 5 September 2014. This conference supported by the Victorian Comprehensive Cancer Centre, the Psycho-Oncology Cooperative Research Group (POCOG) and The University of Melbourne aims to highlight advances in psycho-oncology research and foster collaboration. It will be run in conjunction with a POCOG concept Development Workshop. More information can be found at [www.vcccproject.vic.gov.au/](http://www.vcccproject.vic.gov.au/)  
**VCCCVictorianPsychoOncologyResearchConference**

### Psycho-Oncology Awards back again for 2014

We received no nominations for the Psycho-Oncology awards in 2013, I am hoping that members see the value in recognising excellence in our membership and will start thinking about which of their colleagues they would like to nominate for these important awards. COSA will again be awarding our two COSA, OZPOS, POCOG Psycho-Oncology Awards. There are many people deserving of the COSA Psycho-Oncology Award or the New Investigator in Psycho-Oncology Award. This is a great opportunity to celebrate the strength and diversity of psycho-oncology research and practice in Australia.

Looking forward to seeing all of you during the year and working to improve psycho-oncology services across Australia.

**Haryana Dhillon**  
*Chair, Australian Psycho-Oncology Society*

## Social Work Group

Firstly, let me introduce myself as the incoming Group Chair. My name is Kim Hobbs and I am a Clinical Specialist Social Worker at Westmead Hospital in Sydney, as well as a member of the OSWA national committee. I have recently replaced Angela Cotroneo as she is about to embark on Maternity Leave. I'm sure you will want to join me in wishing Angela well for the upcoming birth of her first child, and to thank her for her input as our COSA Group Chair over the last few years.

Our next OSWA conference is rapidly approaching! It is to be held in Adelaide from Thursday 31st July to Saturday 2nd August, with a theme of The Fabric of Modern Family: Working with Life, Loss and Love. Our international Key Note speaker is Shirley Otis Green from City of Hope Medical Center, USA. The call for abstracts is now open, with a closing date of 30th April. I commend the hard-working South Australian OSWA members who are putting together an excellent program. The team is headed by Debbie Ball: should you have any enquiries about the conference please email Debbie at [Debbie.Ball@oswa.net.au](mailto:Debbie.Ball@oswa.net.au).

OSWA is experiencing a dynamic period of growth and change. If you haven't looked for a while I would urge you to check out the new website, [www.oswa.net.au](http://www.oswa.net.au). OSWA members Evey Wegener and Jeanie O'Connor have worked tirelessly with a professional web designer to produce a very professional website with great utility for members. Congratulations to Jeanie and Evey!

On the subject of dynamic growth and change, OSWA and COSA are currently in discussion about the future relationship between the two organisations. With the evolving nature of cancer care and the shifting nature of Australian sociodemographics, emerging themes such as geriatric oncology, rural and

remote, AYA, palliative care, survivorship and issues for carers, reflect domains of "core business" for Social Workers. With that in mind, it is timely to consider our future role within the COSA organisation. I will be able to report more fully on this in the next issue of Marryalyan.

**Kim Hobbs**  
*Chair, Social Work Group*

## Survivorship Group Report

Since our last report we have welcomed Hayley Griffith, COSA Project Officer, to our team. Hayley is providing support for the activities we are undertaking. I'd like to extend my sincere thanks to Chantal Gebbie who ably supported our group through its first year.

### Models of Survivorship Care Working Group

The models working group is grappling with the complexities of developing a model that reflects the breadth of the survivorship care services available and the differing models across states and the public and private sectors. The emphasis is on promotion of wellness and reducing medicalization wherever possible. Linkage with existing community-based services has been identified as a priority as this impacts greatly on the available workforce who may support cancer survivors to live well.

### COSA ASM

One of the main themes of the COSA ASM this year is Survivorship, the program is shaping up to be an excellent one and I am looking forward to seeing you all there. We are working toward a pre-conference workshop and professional day to present the proposed models of survivorship care discussed above. This will provide us with opportunities to explore the model and

approaches to implementation in detail to guide future directions of work for the Group.

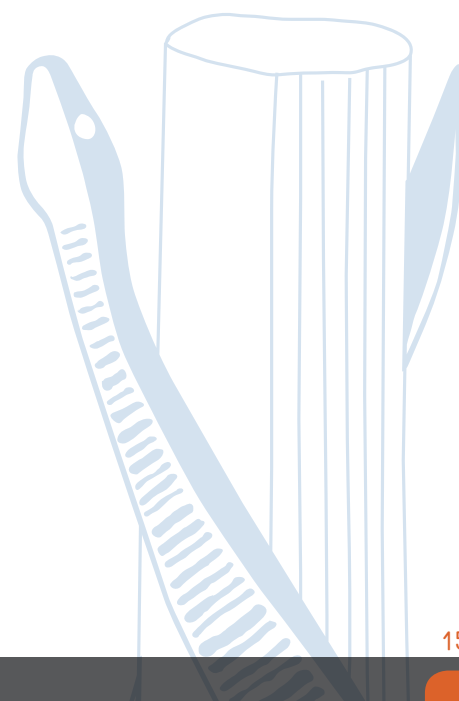
### Victorian Cancer Survivorship Program

Six diverse survivorship care projects, funded by the Victorian Department of Health under the Victorian Cancer Survivorship Program, are drawing to a close. Reports on the outcomes of these projects aimed at implementation of differing survivorship care services and models in a range of settings will be available through the department later this year. We will promote these when they become available.

### FCIC Survivorship Conference

A small team are working with Prof. Bogda Koczwara to develop the program for the next Flinders Cancer Survivorship Conference. It will again be held in Adelaide in early February. With the wealth of research in cancer survivorship in Australia it is shaping up to be an excellent program. Keep an eye out for more information as it becomes available.

**Haryana Dhillon**  
*Acting Chair, Survivorship Group*



# Urologic Oncology Group

The COSA Urologic Oncology Group is fairly quiet at the moment but there is a great deal going on through ANZUP Cancer Trials Group. Most COSA Urologic Oncology Group members are also members of ANZUP. ANZUP continues to move from strength to strength. Its membership numbers continue to grow rapidly and ticked over 700 members in March 2014, including a diverse range of members from all states and territories and all disciplines, as well as international members.

ANZUP is embarking on some new clinical trials that will answer key questions we all face every day with our patients. Prominent amongst these are the ENZAMET and ENZARAD trials, which will respectively examine the effects of enzalutamide on overall survival in the settings of metastatic hormone-naïve prostate cancer or locally advanced high risk prostate cancer. These two trials involve collaborations with international groups including Ireland, UK, Canada and the USA, as well as Australian and New Zealand sites. This is an exciting time for the organisation.

ANZUP has also initiated new trials in the form of the phase 3 accelerated BEP trial (Principal Investigator: Peter Grimison) and the mitomycin/BCG non-muscle-invasive trial (Dickon Hayne), both supported by competitive grant funding. We have also submitted further grant applications for the 2014 round to support other clinical trials in prostate and urothelial cancers.

The composition of the ANZUP Scientific Advisory Committee is reviewed annually by the Board. This year we said farewell to some of our longest standing and in some cases founding SAC members who are retiring from the SAC. They include Colleen Nelson (scientist; Correlative and

Translational Research chair), Manish Patel (urologist; Bladder chair), John Pedersen (Pathologist), Hema Samarantunga (Pathologist) and John Stubbs (Consumer Advisory Panel). I wish to thank them all profoundly for their wonderful contributions and we look forward to their future contributions to ANZUP in different ways. We also welcome several new SAC members in 2014: Paul De Souza (medical oncologist; Correlative and Translational Research chair), Dickon Hayne (urologist and USANZ nominee; Bladder chair), Paul Waring (pathologist and RCPA nominee). Many thanks to them for taking on this role, and thanks to all our SAC members, past and present, for your commitment and the quality of your contributions.

Considerable activity is underway for the 2014 ANZUP Annual Scientific Meeting, to be held at Melbourne Hilton on the Park on 13-15 July 2014. Make sure you register now if you have not already done so, and put the dates in your diary. Many thanks to our wonderful convening committee for pulling together an exciting program for the main ASM. We will continue what was previously known as the Trainees' Day but now renamed to the Masterclass. It is important to remember that the first ANZUP Trainees' Day was supported by a Clinical Professional Day grant from COSA in 2011 and has continued to be highly successful since then. The ASM will also include a Consumer Advisory Panel education session, the Community Forum (open to the general public), and a great social program for delegates. If you have not already registered take a moment now to do so, and encourage your colleagues and trainees to attend. More information is here: [www.anzup.org.au/content.aspx?page=asm-home](http://www.anzup.org.au/content.aspx?page=asm-home).

ANZUP continues to grow its public profile as well. The Community Forum in July will go a long way to achieving this. ANZUP also continues a strong fundraising presence, which is already bearing financial fruit that we will be able to use to grow our programs and facilitate bringing clinicians and researchers together more productively for clinical trials. One example is the EveryDay Hero initiative

[www.everydayhero.com.au/charity/view?charity=2503](http://www.everydayhero.com.au/charity/view?charity=2503).

ANZUP also been able to grow its administrative support team, increasing the time available for our Marketing and Communication manager Liz Thorp, and developing a new part time project officer position.

Many thanks to all who contribute to ANZUP, especially its Directors, the Scientific Advisory Committee and its subcommittees, and the Consumer Advisory Panel led by Belinda Jago. Special thanks also to our Executive Officer Marg McJannett, our project officer Yi Feng, and our Marketing and Communication manager Liz Thorp.

Note: membership of ANZUP is free, and ANZUP members receive a discount on COSA membership and COSA ASM registration. It simply makes sense to be a member of both. 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](http://www.anzup.org.au) to join. Please especially encourage younger clinicians and researchers to participate and take their places as the clinical and research leaders of the future.

Change of Address: ANZUP has relocated to Level 6, Lifehouse, 119-143 Missenden Road, Camperdown. We welcome opportunities to show off our new home.

Finally, my thanks go once again to the other members of the Urologic Oncology Group executive, Shomik Sengupta and Scott Williams.

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



# COSA Affiliated Organisation Reports

## Australasian Leukaemia and Lymphoma Group



*A photo from the Gala Dinner ALLG held last November. Pictured are the 4 inductees into the new ALLG Hall of Fame. From left to right: Prof Jim Bishop AO, Mark Cooper (on behalf of Ian Cooper, deceased), Dr Jane Matthews, Prof Ray Lowenthal AO.*



The ALLG continues with a very busy calendar of activities. Last year we commemorated 40 years of the group's existence. This year the focus is on expanding the trial portfolio.

### ALLG Trial Centre

An exciting new venture is the establishment of the ALLG Trial Centre, located with the ALLG Operations Unit.

Previously ALLG trials were coordinated from several locations, most notably at the Centre for Biostatistics and Clinical Trials at Peter MacCallum. With the new Trial Centre, all new ALLG trials will be coordinated in-house.

Megan Sanders is Program Manager and there are currently three CRAs – Sarah Dewberry, Bala Ravishankar and Briony Tupper. The team have been very busy over the last few months, establishing procedures and setting up several new trials. Also under development are plans for new web-based eCRFs – more news on that later.

### RePLY

The ALLG's first fully in-house study and a world-first study of PET-directed therapy in relapsed follicular lymphoma opened last November. ALLG NHL26 RePLY is designed to improve on the very poor prognosis of patients who remain PET positive after initial induction therapy and consists of lenalidomide added to rituximab

maintenance therapy. The PI Judith Trotman (Concord Hospital) says: "The efficacy of lenalidomide in follicular lymphoma offers the potential to obtain remission for patients who have responded only partially to conventional immunochemotherapy."

The aim of completing accrual within two years will test the functioning of the ALLG as a truly cooperative group. With only 15 sites activated, cross-referral will be critical for the success of the trial. This has already happened with the first patient enrolled at Concord being referred from Liverpool hospital for therapy.

Prior to commencement of maintenance therapy, all patients undergo a study-funded PET scan. Thanks must go to Royal Prince Alfred Hospital PET department for ensuring rigorous high quality PET QC across the accredited PET centres at Princess Alexandra, Peter MacCallum Cancer Centre and Royal Hobart Hospital. Patients who are PET positive receive lenalidomide plus rituximab, those who are PET negative receive standard of care which is rituximab alone.

Judith urges all COSA members to support this study and refer patients to a participating site. The eligibility criteria for this and all currently recruiting ALLG studies are easily found on the trials portfolios listed on the NSW or Victorian HSNZ ClinTrial Refer App freely downloadable on any iPhone, iPad or Android device. For any other information please contact the CRA Briony Tupper at [Briony.Tupper@petermac.org](mailto:Briony.Tupper@petermac.org).

### Adolescent/young adult trial

Meanwhile, an important trial for patients in the adolescent/young adult age group has been accruing for over a year. ALLG ALL6 uses a modified version of a paediatric protocol in patients between 15 and 40 who have acute lymphoblastic leukaemia. This disease is the most common form of childhood cancer, which in over 80% of children can be cured with chemotherapy. Adults with ALL conventionally receive different treatment but have a much poorer outcome. This trial examines whether the treatment given to children can also be given to adults, and if so, are the results as good.

ALL6 is currently running at 8 sites with more due to open and has accrued 15 of the target 100 patients. A feature of the trial that is potentially very desirable for patients, is that they receive regular testing for minimal residual disease (MRD) which helps determine their response status much more reliably than patients not participating in the trial.

The trial also includes substantial psychosocial aspects via several QOL questionnaires including leukaemia specific components.

The trial is sponsored by the ALLG with PIs Ken Bradstock and Luce Dalla Pozza.

ALL6 has had success with acquisition of funds from philanthropic sources, and from the Adolescent and Young Adult group

National Program supported by Canteen and COSA, and additionally from AYA Victoria/Tasmania directly.

We very much encourage you to cross refer your ALLG patients in this age group to one of the participating sites. For further information contact the Trial Manager Ania Matera at Anietta.Matera@petermac.org.

The picture below is Megan Sanders, Program Manager, ALLG Trial Centre



**Mark Hertzberg**  
Chair of the ALLG Scientific Advisory Committee

## Australasian Metastasis Research Society (OzMRS)

The Australasian Chapter of the International Metastasis Research Society



*Members of the 2012 Metastasis Research Society Local Organizing Committee, many of whom have become the initiating committee of OzMRS. Pictured from left are Dr Carmela Ricciardelli (Adelaide), Dr Belinda Parker (Melbourne), Dr Andreas Evdokiou (Adelaide), Pr Rik Thompson (Melbourne Convener), Dr John Price (Melbourne), Dr Judith Clements (Brisbane), Dr Robin Anderson (Melbourne, Co-Convener), Dr Alex Swarbrick (Sydney), Dr Normand Pouliot (Melbourne), Dr Elizabeth Williams (Brisbane). Absent were Dr Lilian Soon (Sydney), Dr Mark Waltham (Melbourne), Pr Paul Waring (Melbourne), Dr Jason Lickliter (Melbourne).*

OzMRS has recently joined COSA, as we can see the huge benefits of aligning our group with an organisation focused on the clinical aspects of cancer care. OzMRS was formed following the hosting by Australian members of the International Metastasis Research Society (MRS) biennial conference in Brisbane in 2012. OzMRS is managed jointly by Professor Rik Thompson and Associate Professor Robin Anderson and a committee of ten OzMRS members, each of whom are MRS members.

Oz MRS is affiliated with the MRS, for which Rik Thompson is immediate past President and Robin Anderson is a long-standing board member. MRS has growing ties with the national bodies in Japan (Japanese Associate for Metastasis Research; JAMR) and China (Chinese Metastasis Research Society; ChMRS) and OzMRS seeks to leverage productive interactions with these groups and others in the Asia Pacific region. Although not an incorporated body, OzMRS has a formal membership process.

We are busy planning and preparing for several activities to be held later in

2014. First, we are preparing articles for the June 2014 edition of Cancer Forum that will be focused on several aspects of metastasis and its impact on cancer care. Also in June, we will be participating in the next international meeting of the MRS to be held in Heidelberg, Germany. We have negotiated a reduced registration rate for OzMRS members and anticipate that a number of our members will travel to Germany to attend. OzMRS will provide two travel awards to help junior investigators attend the meeting.

Finally, we are preparing for a metastasis focused satellite meeting to be held at the COSA ASM in Melbourne, on Monday December 1, 2014, the day before COSA officially starts. We are also contributing to the COSA program on Tuesday December 2, where metastasis will be one of the themes of the COSA ASM.

**Rik Thompson**  
[rik@svi.edu.au](mailto:rik@svi.edu.au)

**Robin Anderson**  
[robin.anderson@petermac.org](mailto:robin.anderson@petermac.org)

# Australia and New Zealand Breast Cancer Trials Group



## ANZBCTG 36th Annual Scientific Meeting



The Australia & New Zealand Breast Cancer Trials Group (ANZBCTG) is holding its 36th Annual Scientific Meeting (ASM) in Wellington, New Zealand, from Wednesday 16 to Saturday 19 July, 2014.

The ANZBCTG ASM is an established and well known conference in the breast cancer and medical research field. The Scientific Meeting is an opportunity for breast cancer researchers throughout Australia and New Zealand to learn of recent advances in breast cancer research worldwide; to share knowledge and research outcomes; and to collaborate, plan and strategise for new breast cancer clinical trials research initiatives.

The planned program covers timely reviews of breast cancer clinical trials, discussion of new protocols, future trials research and other research developments. The ASM will include various discipline workshops and two full days of scientific presentations involving

renowned international and national guest speakers and eminent ANZBCTG researchers.

For more information about the ASM, or to register, visit [www.anzbctg.org/asm](http://www.anzbctg.org/asm).

## Membership Milestone

The ANZBCTG now has 700 members across Australia and New Zealand who are actively involved in the conduct of our clinical trials research program. This includes oncologists, surgeons, trial coordinators, nurses, breast physicians and staff. The ANZBCTG began more than 35 years ago and is the largest, independent, oncology clinical trials research group in Australia and New Zealand. For more information about the ANZBCTG, or to complete an online membership application form, visit [www.anzbctg.org](http://www.anzbctg.org).

## Clinical Trial Consent Communication Project

The Australia and New Zealand Breast Cancer Trials Group and the Australia and New Zealand Melanoma Trials Group are developing an online clinical trial consent communication module. With the assistance of Cancer Australia grants, the project is based on successful workshops run in past years, with actors and facilitators from Pam McLean Centre, and on Australian research in this area spearheaded by Professor Phyllis Butow. Basic trial concepts will be covered such as randomisation, giving a recommendation, discussing tissue banking and addressing patient concerns, as well as some trial specific issues (observation only control arms, placebos). It is anticipated that the module will be appropriate for clinical trial research nurses and data managers as well as multidisciplinary clinicians. The ANZBCTG would be keen to hear from other trials groups who might be interested in collaborating in this project.

## Mother's Day Research Appeal



The ANZBCTG's fundraising department, the Breast Cancer Institute of Australia (BCIA), recently launched the Mother's Day Research Appeal. When you make a donation to the BCIA, you'll receive a beautiful Mother's Day card that acknowledges your special gift. You can choose from an animated Mother's Day e-card, PDF e-card or a traditional card. To find out more or to make a donation, visit [www.bcia.org.au](http://www.bcia.org.au) or call 1800 423 444 in Australia or +61 2 4925 3022 in New Zealand. Mother's Day is on 11 May 2014.

## LinkedIn

The ANZBCTG recently launched its own **LinkedIn** page, which provides regular news and updates on our research and fundraising activities. Alternatively, you may want to keep up to date through the **Facebook**, **Twitter** and **YouTube** pages of our fundraising department, the Breast Cancer Institute of Australia.

# Australia and New Zealand Melanoma Trials Group

**ANZMTG** Australia and New Zealand  
Melanoma Trials Group

The Australia and New Zealand Trials Group (ANZMTG) had another successful year in 2013 and activities are well underway for a productive year in 2014.

ANZMTG is unique as the only melanoma-specific clinical trials research group in the world, and we have developed a number of relevant protocols which are now open and recruiting at over 25 melanoma departments in Australian hospitals and overseas centres. The final analysis of our first trial, ANZMTG 01.02, was performed in 2013 and will be published soon. Furthermore ANZMTG has established a number of open and recruiting clinical trials, approved Trials in Development and there are many new research concepts under consideration for development.

ANZMTG was successful in receiving ongoing infrastructure support from Cancer Australia in July 2013 - this was critical to maintaining current activities and we gratefully acknowledge this ongoing support for the group. ANZMTG also has a number of other grants to support its trials and the group continues to actively seek funding for the growing number of new ANZMTG-led collaborative projects.

On the 9th October 2014, ANZMTG will host our Annual ANZMTG Scientific Research Meeting in Perth coinciding with 2nd National Scott Kirkbride Melanoma Research Centre (SKMRC) Melanoma Conference. A relevant and interesting program is planned including review of the current studies, new research concepts and discussion of the future direction and research priorities for the group. We

are honoured to host the meeting at the newly opened Harry Perkins Institute of Medical Research and warmly welcome the membership to attend.

ANZMTG's 2013 highlights included presentation and publication of a number of trial reports at major melanoma meetings, in particular the presentation of the ANZMTG 01.02 final results at the American Society of Clinical Oncology (ASCO) Congress in Chicago USA; a number of poster and oral presentations at the World Melanoma Congress in Hamburg, Germany; The Global Controversies in Skin Cancer Congress in Brisbane, Australia and at several Cancer Cooperative Trials Group meetings including the Trans-Tasman Radiation Oncology Group (TROG) meeting in Wellington, New Zealand and the Cooperative Trials Group for Neuro-Oncology (COGNO) Annual Scientific Meeting in Sydney, Australia. More information on ANZMTG's publications and the group's activities is available online via the website (<http://www.anzmtg.org/content.aspx?page=publications>).

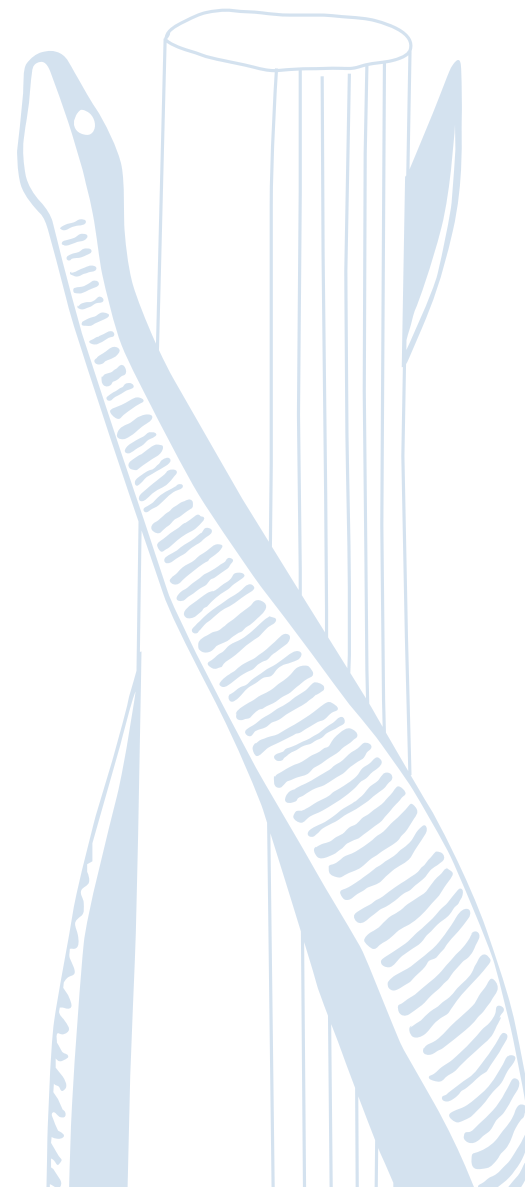
In 2014, ANZMTG plans to continue expansion of its current trial recruitment, promote clinical trial development and will also hold a series of concept development workshops to encourage new research in melanoma. ANZMTG will continue to maintain and support the membership to ensure appropriate representation nationally.

We warmly welcome newly appointed ANZMTG Chairman, Professor Bryan Burmeister to the position following the conclusion of Professor John Thompson's appointment. Professor Thompson commenced as the ANZMTG Chairman in 1999 and we sincerely acknowledge and thank him for his contribution to the group. We also welcome several new appointments to the Executive Committee which we hope will create exciting opportunities for the continued development of the research priorities and scope for the group.

The group now includes over 700 members from around the world and the need for investigator-driven, independently run clinical trials for melanoma remains just as important, especially as we enter a new era of melanoma treatment and management.

We take this opportunity to thank the past and current Executive Committee members, Executive Office staff and the support and commitment of the ANZMTG members, trial study chairs, site research and data management staff, and most importantly the patients and their families for their participation in research studies undertaken by the ANZMTG.

## *Australia and New Zealand Melanoma Trials Group*



# Cancer Nurses Society of Australia



As the year is quickly progressing the work of the CNSA Executive and the activity of our Members are in full swing across the country. January was a busy time as the Executive came together in Melbourne, reviewed our past achievements and focused on a new three year strategic plan. The strategic goals of the society remain focused upon membership services, financial growth and stability and engagement in the wider cancer control context of Australia. As the society continues to grow we also thought it timely to put into words the values we aspire to – and in one member's view they are **EPIC** – **E**xcellence, **P**rofessionalism, **I**nnovation and **C**ollaboration.

Registrations are now open for the 17th CNSA Winter Congress 24th-26th July which this year will be hosted in Melbourne. Themed with 'Leading in a time of Change' and with international key note speaker Dr Theresa Wiseman it is again sure to be a must attend event. Dr Wiseman is the Lead for Health Service Research, Nursing, Rehabilitation and Quality, at The Royal Marsden NHS Foundation Trust, London UK and was a lead investigator on the internationally acclaimed work on Evidence Based Co-Design, an innovative and uniquely patient-centred approach to improving UK health services provision. She has recently completed an analysis of the UK Patient Experience Survey and has experience and expertise in developing interventions and care pathways to respond to patient experience.

We will also welcome a number of local speakers including: Associate Professor Gail Garvey, a Kamilaroi woman from New South Wales and Senior Research Fellow at Menzies School of Health Research has 25 years' experience working in Indigenous education and health research. Ms Peta Marks, a Credentialed Mental Health Nurse working freelance as a Mental Health Consultant, Peta has broad ranging experience in the development of educational programs across a range of mental health subjects. Professor Grant McArthur, a Fellow of the Royal Australasian College of Physicians who holds a PhD in Medical Biology whose research interests include clinical trials of targeted therapeutics, molecular haematology, melanoma, cell cycle control, differentiation, and functional imaging and Professor Claire Rickard, from the NHMRC Centre for Research Excellence in Nursing at the Griffith Health Institute, Griffith University. She believes a randomised controlled trial is a thing of beauty and its joys last forever. Professor Rickard attempts to apply that beauty and joy to improve the care of the 70-90% of all hospital patients who need an intravascular access device for treatment.

CNSA has also secured a wonderful opportunity to host the Nurses Symposium at the International Gynaecologic Cancer Society (IGCS) in Melbourne in November this year. Planning is currently underway for this event to be held Friday 7th November and will have sessions that have an international flavour and incorporate toxicities of treatment, education and nurse led services, sexuality and the psychological impact of the disease. For more details please contact Ann Mellon (Gynaecology Special Interest Group Chair) via CNSA at [info@cnsa.org.au](mailto:info@cnsa.org.au).



Patsy Yates

CNSA was delighted that one of our founding members and past CNSA Chair, Professor Patsy Yates was recently inducted into the Honor Society of Nursing, Sigma Theta Tau International (STTI) 2014 Nurse Researcher Hall of Fame [http://www.nursingsociety.org/Media/Pages/NurseResearcherHallofFameInductees\\_2014.aspx](http://www.nursingsociety.org/Media/Pages/NurseResearcherHallofFameInductees_2014.aspx)

Created in 2010, the International Nurse Researcher Hall of Fame recognises nurse researchers who have achieved significant and sustained national or international recognition and whose research has improved the profession and the people it serves. Professor Yates has many outstanding academic achievements and has developed a program of research aimed at improving management of symptoms associated with advanced progressive disease, having undertaken studies evaluating non-pharmacological and behavioural interventions for people with cancer experiencing cancer pain, breathlessness, fatigue and nausea. Congratulations Patsy!

The CNSA Travel Grants are once again available to CNSA members to attend Winter Congress or other Cancer Nursing conferences internationally. Grant submissions have been extended and will now close April 30th 2014. Application details and information can be found on the CNSA Website <https://www.cnsa.org.au/about-us/grants/> or by contacting your local CNSA State Representative.

I hope to see many members at Winter Congress in July and for more details on local activities in your state please visit <https://www.cnsa.org.au>.

Sandy McKiernan  
CNSA President

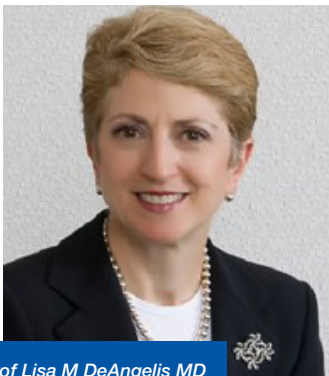
## Cooperative Trials Group for Neuro- Oncology

SAVE THE DATE!

**7th COGNO Annual Scientific Meeting**  
*'Translating science to patient centred  
trials'*

Friday 24th - Saturday 25th October 2014  
Melbourne Australia

COSA members are encouraged to attend the 7th COGNO Annual Scientific Meeting, to be held on 24th to 25th of October 2014, in Melbourne Australia. We have two confirmed international guest speakers:



Prof Lisa M DeAngelis MD

Prof Lisa M DeAngelis MD

Chair, Department of Neurology, Memorial Sloan-Kettering Cancer Center, USA  
Lillian Rojzman Berkman Chair in Honor of Dr. Jerome Posner  
Co-Executive Director, MSKCC Brain Tumor Center, USA



Prof Minesh P Mehta MB ChB, FASTRO

Prof Minesh P Mehta MB ChB, FASTRO

Medical Director, Maryland Proton Treatment Center, USA  
Associate Director of Clinical Research, Department of Radiation Oncology, University of Maryland School of Medicine, USA

Flyer: a copy of the 2014 COGNO ASM Promotional Flyer is available at <http://www.cogno.org.au/docview.aspx?id=198>.

For further information please visit the COGNO ASM website: <http://www.cogno.org.au/content.aspx?page=cognoasm-home>.

## Palliative Care Clinical Studies Collaborative (PaCCSC)

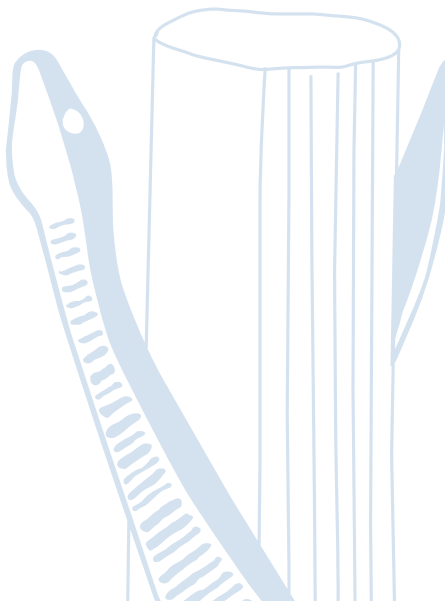


At the recent Annual Research Forum, the Palliative Care Clinical Studies Collaborative (PaCCSC) announced the release of its first Research Report 2006-2014.

The report details the eight year journey of PaCCSC from inception in 2006 through to current activities in 2014. Information on the clinical research studies, results and achievements of the Collaborative are all contained in the report. The report will interest current collaborating sites and their affiliated health and tertiary institutions, Collaborative members and provides an introduction to PaCCSC for those less familiar with the research network.

A PDF copy of the Research Report can be downloaded from the PaCCSC webpage here:

<http://www.caresearch.com.au/caresearch/tabid/2479/Default.aspx>





Clinical  
Oncology  
Society of  
Australia

# SAVE THE DATE

2-4 December

2014

Melbourne Convention  
and Exhibition Centre  
Melbourne, Australia

Convened by  
Associate  
Professor  
Mei Krishnasamy

**COSA's**  
**41<sup>st</sup>** Annual  
Scientific  
Meeting

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](http://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.



# Awareness Calendar

Date	Event	Website
<b>2014</b>		
<b>April</b>		
7 Apr	World Health Day	<a href="http://www.who.int/campaigns/world-health-day/2013/en/index.html">http://www.who.int/campaigns/world-health-day/2013/en/index.html</a>
10 - 16 Apr	World Homeopathy Awareness Week	<a href="http://www.homeopathyoz.org/">http://www.homeopathyoz.org/</a>
27 Apr - 3 May	Brain Cancer Action Week	
<b>May</b>		
8 May	World Ovarian Cancer Day	<a href="http://www.ovariancancer.net.au/">http://www.ovariancancer.net.au/</a>
12 May	International Nurses Day	<a href="http://www.acn.edu.au/ind2014">http://www.acn.edu.au/ind2014</a>
17 May	World Neurofibromatosis Awareness Day	<a href="http://www.ctf.org.au/">http://www.ctf.org.au/</a>
20 May	International Clinical Trials Day	
22 May	Australia's Biggest Morning Tea	<a href="http://www.cancer.org.au/">http://www.cancer.org.au/</a>
25 - 31 May	Kidney Health Week	<a href="http://www.kidney.org.au/">http://www.kidney.org.au/</a>
25 May	World Thyroid Day	<a href="https://www.thyroidfoundation.com.au/atf-awareness-events/world-thyroid-day.html">https://www.thyroidfoundation.com.au/atf-awareness-events/world-thyroid-day.html</a>
25 - 31 May	National Palliative Care Week	<a href="http://www.palliativecare.org.au/">http://www.palliativecare.org.au/</a>
31 May	World No-Tobacco Day	<a href="http://www.who.int/campaigns/no-tobacco-day/2013/en/index.html">http://www.who.int/campaigns/no-tobacco-day/2013/en/index.html</a>
<b>June</b>		
All month	Bowel Cancer Awareness Month	<a href="http://www.bowelcanceraustralia.org/bca/">http://www.bowelcanceraustralia.org/bca/</a>
1 - 7 Jun	ATF Thyroid Awareness Week	<a href="https://www.thyroidfoundation.com.au/atf-awareness-events/thyroid-awareness-week.html">https://www.thyroidfoundation.com.au/atf-awareness-events/thyroid-awareness-week.html</a>
1 - 8 Jun	Medical Research Week	<a href="http://www.asmr.org.au/MRW.html">http://www.asmr.org.au/MRW.html</a>
9 - 15 Jun	Mens Health Week	<a href="http://www.menshealthweek.org.au/En/Default.aspx">http://www.menshealthweek.org.au/En/Default.aspx</a>
18 - Jun	Red Aussie Apple Day	<a href="http://www.bowelcanceraustralia.org/bca/">http://www.bowelcanceraustralia.org/bca/</a>
<b>July</b>		
All month	Dry July	<a href="http://au.dryjuly.com/">http://au.dryjuly.com/</a>
<b>August</b>		
1 Aug	Jeans for Genes Day	<a href="http://www.jeansforgenes.org.au/-About-Us">http://www.jeansforgenes.org.au/-About-Us</a>
3 - 10 Aug	National Healthy Bones Week	<a href="http://www.healthybones.com.au/">http://www.healthybones.com.au/</a>
8 Aug	Dying to Know Day	<a href="http://thegroundswellproject.com/dying-to-know-day/">http://thegroundswellproject.com/dying-to-know-day/</a>
22 Aug	Daffodil Day	<a href="http://www.cancer.org.au/">http://www.cancer.org.au/</a>
25 Aug - 19 Sep	Fruit n Veg Month	<a href="http://healthy-kids.com.au/">http://healthy-kids.com.au/</a>
<b>September</b>		
All month	Prostate Cancer Awareness Month	<a href="http://www.prostate.org.au/articleLive/">http://www.prostate.org.au/articleLive/</a>
All month	Childhood Cancer Awareness Month	<a href="http://www.ccia.org.au/">http://www.ccia.org.au/</a>
All month	Blue September (men with prostate, lung, skin, bowel and testicular cancer)	<a href="http://www.blueseptember.org.au/">http://www.blueseptember.org.au/</a>
1 Sep	Gold Bow Day (Thyroid Cancer)	<a href="https://www.thyroidfoundation.com.au/atf-awareness-events/gold-bow-day.html">https://www.thyroidfoundation.com.au/atf-awareness-events/gold-bow-day.html</a>
1 - 5 Sep	Jean Hailes Women's Health Week	<a href="http://jeanhailes.org.au/">http://jeanhailes.org.au/</a>
15 Sep	World Lymphoma Awareness Day	
<b>October</b>		
All month	Breast Cancer Awareness Month	
1 - 31 Oct	Girls Night In	<a href="http://www.pinkribbonday.com.au/host-your-own-girls-night">http://www.pinkribbonday.com.au/host-your-own-girls-night</a>
10 Oct	Hat Day - Mental Health Research	<a href="http://www.hatday.com.au">http://www.hatday.com.au</a>
12 - 18 Oct	National Nutrition Week	<a href="http://www.nutritionaustralia.org/">http://www.nutritionaustralia.org/</a>
27 Oct	Pink Ribbon Day	<a href="http://www.cancer.org.au/">http://www.cancer.org.au/</a>
31 Oct	National Bandana Day	<a href="http://www.canteen.org.au">http://www.canteen.org.au</a>
<b>November</b>		
All month	Movember	<a href="http://au.movember.com/">http://au.movember.com/</a>
All month	Lung Awareness Month	<a href="http://www.lungfoundation.com.au/">http://www.lungfoundation.com.au/</a>
9 - 15 Nov	National Psychology Week	<a href="http://www.psychology.org.au/NPW">http://www.psychology.org.au/NPW</a>
17 - 23 Nov	National Cervical Cancer Awareness Week	<a href="https://accf.org.au/">https://accf.org.au/</a>
17 - 23 Nov	National Skin Cancer Action Week	<a href="http://www.cancer.org.au/preventing-cancer/sun-protection/campaigns-and-events/national-skin-cancer-action-week.html">http://www.cancer.org.au/preventing-cancer/sun-protection/campaigns-and-events/national-skin-cancer-action-week.html</a>
24 - 30 Nov	Australian Mesothelioma and Asbestos Awareness Week	<a href="http://www.lungfoundation.com.au/">http://www.lungfoundation.com.au/</a>



# Calendar of Events

Date	Event	Venue
<b>2014</b>		
1 - 4 April	Trans-Tasman Radiation Oncology Group Annual Scientific Meeting 2014 <a href="http://trog2014.com/">http://trog2014.com/</a>	Sunshine Coast, Queensland
2 - 5 April	XIV International Symposium International Symposium on Oncology Pharmacy Practice (ISOPP 2014) <a href="http://www.isoppxiv.org/">http://www.isoppxiv.org/</a>	Montreal, Canada
3- 5 April	Australasian Lymphology Association Conference <a href="http://alaconference.com.au/">http://alaconference.com.au/</a>	Auckland, New Zealand
9-11 April	10th Asia Pacific Musculoskeletal Tumour Society (APMSTS) Meeting <a href="http://apmsts2014.aoa.org.au/">http://apmsts2014.aoa.org.au/</a>	Melbourne, Victoria
10-12 April	6th Exercise & Sports Science Australia Conference <a href="http://www.essa.org.au/2014conference/">http://www.essa.org.au/2014conference/</a>	Adelaide, South Australia
11-13 April	Asian Oncology Summit 2014 <a href="http://www.asianoncologysummit.com/">http://www.asianoncologysummit.com/</a>	Kuala Lumpur, Malaysia
13-16 April	Australian Pain Society Annual Scientific Meeting 2014 <a href="http://www.dconferences.com.au/aps2014/Home">http://www.dconferences.com.au/aps2014/Home</a>	Hobart, Tasmania
6 - 9 May	Royal Australasian College of Surgeons Annual Scientific Congress 2014 <a href="http://www.surgeons.org">www.surgeons.org</a>	Marina Bay Sands, Singapore
6 - 9 May	Australasian Leukaemia and Lymphoma Group Annual Scientific Meeting 2014 <a href="http://www.allg.org.au/events.html">http://www.allg.org.au/events.html</a>	Melbourne, Victoria
17-18 May	COSA Cancer Pharmacists Group Clinical Skills for Cancer Pharmacy Practitioners Course <a href="http://cpg2014.org.au/">http://cpg2014.org.au/</a>	Brisbane, Queensland
24-25 May	Obstetrical and Gynaecological Society Annual Scientific Meeting 2014 <a href="http://www.ogshk.org/asm2014/">http://www.ogshk.org/asm2014/</a>	Hong Kong
30 May – 3 June	American Society of Clinical Oncology 50th Annual Scientific Meeting <a href="http://am.asco.org/">http://am.asco.org/</a>	Chicago, USA
19-21 June	Australian and New Zealand Childrens Haematology and Oncology Group Annual Scientific Meeting 2014 <a href="http://www.anzchogmeeting.org/">http://www.anzchogmeeting.org/</a>	Sydney, New South Wales
21-22 June	5th Postgraduate Course in Endocrine Surgery <a href="http://www.endocrinesurgeons.org.au/postgraduate-course-2014">http://www.endocrinesurgeons.org.au/postgraduate-course-2014</a>	Melbourne, Victoria
26 - 28 June	MASCC/ISOO International Symposium on Supportive Care in Cancer 2014 <a href="http://www.mascc.org/">http://www.mascc.org/</a>	Miami, Florida, USA
26 - 28 June	International Association for Cancer Registries Annual Conference 2014 <a href="http://www.iacr.com.fr/">http://www.iacr.com.fr/</a>	Ottawa, Canada
28 - 29 June	St Jude-Viva Forum <a href="http://www.viva.sg/stjude/">http://www.viva.sg/stjude/</a>	Singapore
30 June- 2 July	International Symposium on Pediatric Neuro-Oncology <a href="http://www.ispno2014.com/index.html">http://www.ispno2014.com/index.html</a>	Singapore
4-5 July	2014 Annual Paris Melanoma Conference <a href="http://www.primeoncology.org/parismelanoma2014">http://www.primeoncology.org/parismelanoma2014</a>	Paris, France
12-13 July	2nd International Society of Geriatric Oncology Asia Pacific Conference <a href="http://www.siog.org/index.php?option=com_content&amp;view=article&amp;id=288&amp;Itemid=186">http://www.siog.org/index.php?option=com_content&amp;view=article&amp;id=288&amp;Itemid=186</a>	Singapore
13 - 15 July	ANZUP Annual Scientific Meeting 2014 <a href="http://www.anzup.org.au/content.aspx?page=asm-home">http://www.anzup.org.au/content.aspx?page=asm-home</a>	Melbourne, Victoria
16-19 July	2014 Australian and New Zealand Breast Cancer Trials Group Annual Scientific Meeting <a href="https://www.bcia.org.au/content.aspx?page=asmpublic">https://www.bcia.org.au/content.aspx?page=asmpublic</a>	Wellington, New Zealand
24 - 26 July	Cancer Nurses Society of Australia Winter Congress 2014 <a href="http://www.cnsawintercongress.com.au/">http://www.cnsawintercongress.com.au/</a>	Melbourne, Victoria

# Calendar of Events

Date	Event	Venue
<b>2014</b>		
1-3 August	Royal Australian and New Zealand College of Radiologists New Zealand Branch Annual Scientific Meeting <a href="http://www.ranzcr2014.co.nz/">http://www.ranzcr2014.co.nz/</a>	Wellington, New Zealand
6-8 August	Medical Oncology Group of Australia <a href="http://moga.org.au/news-events/events/moga-asm-2014">http://moga.org.au/news-events/events/moga-asm-2014</a>	Sydney, New South Wales
20-22 August	16th Australasian Gastro-Intestinal Trials Group Annual Scientific Meeting <a href="http://www.agitg.asnevents.com.au/">http://www.agitg.asnevents.com.au/</a>	Brisbane, Queensland
31 August - 2 September	15th Asia-Pacific Prostate Cancer Conference 2014 <a href="http://www.prostatecancerresearch.org.au/">http://www.prostatecancerresearch.org.au/</a>	Melbourne, Victoria
2-5 September	Australian and New Zealand Society of Palliative Medicine Conference 2014 <a href="https://www.etches.com/ehome/65181">https://www.etches.com/ehome/65181</a>	Gold Coast, Queensland
11 - 13 September	3rd World Congress on Controversies in Hematology <a href="http://www.comtecmed.com/cohem/2014/">http://www.comtecmed.com/cohem/2014/</a>	Istanbul, Turkey
14-19 September	Australia and Asia Pacific Clinical Oncology Research Development Workshop 2014 <a href="http://www.acord.org.au/">http://www.acord.org.au/</a>	Coolumb, Queensland
26-30 September	European Society for Medical Oncology <a href="http://www.esmo.org/Conferences/ESMO-2014-Congress">http://www.esmo.org/Conferences/ESMO-2014-Congress</a>	Madrid, Spain
09 - 11 October	Inaugural BreastSurgANZ Conference <a href="http://www.breastsurganz.com/events.html">http://www.breastsurganz.com/events.html</a>	Gold Coast, Queensland
9-11 October	SKMRC National Melanoma Conference 2014	Perth, Western Australia
16-19 November	Australian Health and Medical Research Congress <a href="http://www.ahmrccongress.org.au/">http://www.ahmrccongress.org.au/</a>	Melbourne, Victoria
16-18 October	BreastScreen Australia Conference 2014 <a href="http://bsaconference.com.au/">http://bsaconference.com.au/</a>	Melbourne, Victoria
16-18 October	Australasian Lung Cancer Meeting 2014 <a href="http://www.alcc.net.au/">http://www.alcc.net.au/</a>	Brisbane, Queensland
20-24 October	16th World Congress of Psycho-Oncology and Psychosocial Academy <a href="http://www.ipos2014.com/">http://www.ipos2014.com/</a>	Lisbon, Portugal
23-25 October	International Society of Geriatric Oncology 2014 Conference <a href="http://www.siog.org/">http://www.siog.org/</a>	Lisbon, Portugal
24-25 October	7th Cooperative Trials Group for Neuro-Oncology Annual Scientific Meeting <a href="http://cogno.org.au/content.aspx?page=cognoasm-home">http://cogno.org.au/content.aspx?page=cognoasm-home</a>	Melbourne, Victoria
29-31 October	34th European Society of Surgical Oncology Congress 2014 <a href="http://www.ecco-org.eu/Events/ESSO34Baso2014.aspx">http://www.ecco-org.eu/Events/ESSO34Baso2014.aspx</a>	Liverpool, UK
8-11 November	15th Biennial Meeting of the International Gynaecologic Cancer Society <a href="http://www2.kenes.com/igcs/pages/home.aspx">http://www2.kenes.com/igcs/pages/home.aspx</a>	Melbourne, Victoria
11-14 November	Australasian Leukaemia and Lymphoma Group Annual Scientific Meeting 2014 <a href="http://www.allg.org.au/events.html">http://www.allg.org.au/events.html</a>	Sydney, New South Wales
16-19 November	Australian Health and Medical Research Congress <a href="http://www.ahmrccongress.org.au/">http://www.ahmrccongress.org.au/</a>	Melbourne, Victoria
26-28 November	Sydney Cancer Conference 2014 <a href="http://sydney.edu.au/cancer-research/SCC2014/">http://sydney.edu.au/cancer-research/SCC2014/</a>	Sydney, New South Wales
2-4 December	COSA's 41st Annual Scientific Meeting <a href="http://cosa2014.org/">http://cosa2014.org/</a>	Melbourne, Victoria
4-6 December	UICC World Cancer Congress <a href="http://www.worldcancercongress.org/">http://www.worldcancercongress.org/</a>	Melbourne, Victoria
<b>2015</b>		
17-19 November	<b>Save the Date!</b> COSA's 42nd Annual Scientific Meeting 2015	Hobart, Tasmania





# Marryalyan

APRIL 2014

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Sydney NSW 2000  
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