



A/Prof Nick Pavlakis, COSA President 2019-2020

President's Report

As 2020 comes to a close this is my opportunity to say thank you and farewell. I must admit that I cannot help but feel that just as I have got the hang of the job, my time has come up. With COVID-19 forcing us all into a state of hibernation one might feel that things have been quiet this year, but I can certainly state for myself and for COSA, it has been business as usual, only with modifications reflecting the need to be adaptable.

If we look back over the year, after the tragedy of the bushfires, COVID-19 has brought a number of emotions to people, particularly fear and anxiety, based largely around uncertainty – physical, emotional, financial. But this has also led to a resolve to conquer and move forward despite the threats of COVID-19. These emotions and responses are common to patients threatened by a cancer diagnosis or experiencing a cancer related

event. While we at COSA as a group haven't had a direct role with COVID-19, we have maintained stability and calmness in amongst the chaos by providing our membership with information, reassurance and demonstrating that we must continue to fulfill our purpose in the battle against cancer. If we look at the COSA mission – "to improve cancer care and control through collaboration" – we are reminded that we are a cancer organisation and that whatever happens around us, we have a duty to ensure that we continue to fulfill our mission.

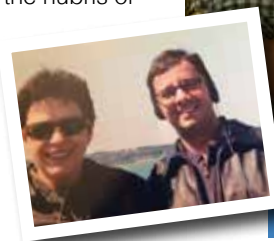
I have been quite proud to be associated with COSA since I was a JMO in the mid-1990s as I have always felt my path into Medical Oncology has been driven by my personal overarching view that fighting cancer requires you to serve a higher purpose than your own. It's important for our membership and the oncology community as a whole to recognise that the fight against cancer is best served by collaboration and a camaraderie amongst the various professional groups, as brought together through COSA. While our individual pursuits might bring us immediate personal rewards, if we let ego and self-interest be the sole drivers of our ambition, we may lose sight of this greater goal. So, as COVID-19 has required us as individuals to act in the interests of the community, as cancer professionals we have been coming together for some time – collaborating in various aspects of cancer control: advocacy, education, clinical trials and research, clinical practice guidelines and policy discussions.

When I started thinking about what to say in the conclusion of my term as COSA President, the US elections were underway. I have never been a fan of modern politics, which is too often dominated by the hubris of individuals, the obsession of "the party" and sadly, stories of corruptness. However, this US election occurred in the COVID-19 era and it was interesting to see so many

people take to the polls in a country where this is voluntary. In thinking of the timing of this election at a time of such uncertainty in the world due to COVID-19, I was reminded of other moments in history and a song by a favourite singer from my early university days. Written following the disillusionment of the 1987 UK elections, Billy Bragg's song "Waiting for the great leap forward" reminds me not to let disappointment and disillusionment get you down, to draw on your collective resilience and defiance to unite in hope and in the belief that positive change will come. As an individual, I know I have certainly felt this way after many a grant application failure! But with the camaraderie of my co-investigators and collaborators, we have commiserated, dusted ourselves off and decided that together, if what we are aiming for is worth fighting for, we will keep going. As such, I do believe that we owe it to our patients and the greater community to aim to work together rather than compete as we can achieve so much more when we do this.

Finally, would like to thank the COSA membership for its dedication and contributions and hope that you will continue to maintain engagement and active participation going forward. I also would like to acknowledge and thank our CEO, Marie Malica and her team for their diligence and excellence in their work. I wish Fran Boyle and following her Dion Forstner good luck in striving to achieve the COSA mission.

Nick Pavlakis
COSA President 2019-2020



Above: Nick Pavlakis passes the baton to Fran Boyle at the ASM. Left: Fran and Nick at the 2002 ASCO ASM in San Francisco.

Chief Executive Officer's Report



Marie Malica, CEO, COSA

I must be honest and say I'm signing off on 2020 with a huge sigh of relief. Like many other organisations, COSA faced multiple challenges this year which resulted from COVID-19. Of course, the ASM is our feature event every year, and the conference this year was unlike anything COSA has experienced before. That

being said, it was a very successful event (even if I do say so myself). I'll briefly touch on my ASM highlights, but be sure to read all about it in Bryan's convenor report.

2020 COSA ASM

We initially planned for the 2020 ASM to be a "hybrid" event with face-to-face and virtual registration and content delivery, with the in-person aspects to be held at the Brisbane Convention and Exhibition Centre. By late August, it became obvious that the travel and border restrictions in place at that time would prevent us from safely planning for in-person components. The COSA Board therefore made the decision to take the ASM totally virtual – a decision we conveyed to COSA members and delegates promptly. I believe this gave members the confidence to then plan and not be concerned about travel and accommodation, and so we saw an instant spike in registrations.

Of utmost importance to us was ensuring delegates would have the best experience possible, so we invested heavily in the virtual technology, and I think the results speak for themselves. We had 815 registered delegates – more than 2019 in Adelaide and 2018 in Perth.

Over the three days of the ASM, 11-13 November, virtual delegates had access to all content from plenaries and three concurrent sessions in each time block, as well as breakfast sessions and dinner symposia. There was a live chat function, enabling opportunities for live interaction with other delegates and exhibitors, to ask questions of speakers and participate in polls. All registered delegates also have access to the content on demand for up to 12 months after the ASM. We even had a "Wellness page" with 5 stretching videos to ensure delegates took care of their physical health throughout the three days of online viewing.

Some fun statistics!

Live Stream
views totalled

275,795

minutes

Poster views
totalled

4,334

minutes

Wellness page
views totalled

465

Twitter
impressions
totalled

2.8

million

For those of you not online, you may have seen the twitter frenzy throughout the event. COSA's Social Media Coordinator, Olivia Hart did a fabulous job managing the @COSAoncology twitter account during the ASM, with #COSA20 receiving over 2.8 million impressions. What an amazing effort! Of course, our top tweeter was Haryana Dhillon (@hagsie) who just beat COSA as the most influential tweeter (as always!).

Our top 10 most prolific tweeters!

- @hagsie with 332
- @COSAoncology 113
- @M_Jefford 55
- @TeresaBrownAPD 41
- @AbbeyDiaz_says 38
- @bogda_koczwara 38
- @Afaf_Girgis 36
- @Cardioonc_bot 33
- @BryanChan 27
- @CarmenSwanton 24

#COSA20 Participants



Here are a few tweets that stood out.

From @jasmineyee_ Jasmine Yee, COSA member, researcher in exercise oncology

End of #COSA20 day one! A different experience but quite enjoy tuning in from the couch #10000steps 😊 Hats off @COSAoncology for a seamless #virtaul platform.

From @DrHattieWright1 Hattie Wright, COSA member, Accredited Practising Dietitian

I was fortunate enough to attend the #COSA20 conference. So many esteemed speakers and well organised online conference. Congratulations to the organisers! The conference had a #personcentred flavour throughout – a great win for the healthcare of #cancersurvivors.

From @hagsie Haryana Dhillon, COSA member and chief tweeter

These #COSA20 recordings will be a great asset for those of us who struggle to manage our conference viewing with work & home commitments #VirtualConferences #TheStruggleIsReal #GetYourMoneysWorth !!

And in reply to Haryana from @DrBryanChan Bryan Chan, 2020 COSA ASM convener

I need another week to watch them all properly – luckily we get up to 12 months to watch them #generous @COSAoncology #COSA20

Other virtual events

We held our first fully virtual COSA Council meeting and Annual General Meeting in October and November respectively. Both were well attended and went off without a hitch. It's going to be interesting to see if this will become the new norm for these and other meetings.

Team COSA

Olivia Hart commenced earlier this year in the new position of Social Media Coordinator. Those of you on Twitter and Facebook will have seen a much greater presence for COSA in the socials. We are delighted to have her on the team.

The COSA staff have been working from home since late March, and we are commencing a gradual return to the office. We have been fortunate to retain all staff, and not had to reduce hours like many other not-for-profits. It has been challenging, but the nature of our work enables us to work remotely, plus we have been grateful recipients of some of the government's financial support which has certainly helped.

Marie Malica
Chief Executive Officer

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2020 COSA ASM Convenor's Report

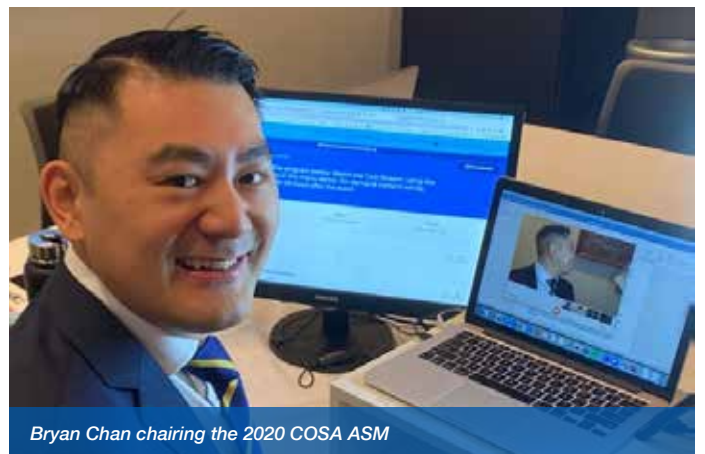


To say that this year has been extraordinary would be an understatement. For many of us, 2020 has thrown multiple roadblocks and challenges, but it has also shown us that we can adapt and be resilient. In addition, it has also given us a chance to reflect on priorities, both personally and professionally. I'm proud to say that for me, the COSA Annual Scientific Meeting (ASM) has always been one of those priorities, and I'm extremely humbled and honoured by the fantastic team that supported me in making that a reality in such an unexpected year. I have been a staunch supporter of the COSA ASM as it was the very first oncology conference that I attended when I was an oncology trainee with Sabe Sabesan. We first presented our work on tele-oncology in 2012, but who could have predicted that in 2020, it would become mainstream, in fact obligatory, for many of us to be able to safely provide care for our patients. It was only fitting that this year's opening plenary featured the evolution and rollout of tele-oncology trials in Queensland and beyond.

COSA's distinct strength has always been its rich and diverse multidisciplinary membership and focus on holistic cancer care. So much is gained by the cross-pollination and exchange of ideas and perspectives on research, highlighting all areas of the cancer care continuum. One of my most favourite things about the ASM is the social aspect of catching up with friends and meeting new like-minded people, from across the country and internationally. This year we had to settle for virtual chat rooms and social media, but I can report that I am now officially on Twitter! @DrBryanChan

It was always going to be a tough act to follow the success of the 2019 ASM that Professor Bogda Koczwara and her team put together. The 2020 ASM program committee decided early on that, rather than focus on a single cancer, we would open it to all cancers and focus on themes that are rapidly

evolving and pertinent to the entire multidisciplinary COSA membership. The themes of Quality & Safety, Implementation Science and Cardio-Oncology were quickly endorsed by the COSA Council for the meeting, originally planned for Brisbane. Despite the rapid changes associated with the COVID-19 pandemic, Marie and the COSA leadership team remained steadfast and optimistic about proceeding with the ASM in a safe format. In keeping with the spirit of COSA and its members, we were so glad that we were able to successfully deliver COSA's very first virtual ASM.



Bryan Chan chairing the 2020 COSA ASM

We had a record number of over 800 delegates join us virtually for the conference, many of whom would have been in the safety and comfort of home. However, in exchange for loungewear, the dedicated members of the planning committee from the Sunshine Coast and Brisbane met up in person to support one another at the Brisbane Convention and Exhibition Centre. Many thanks again to our industry sponsors and ASN Events who seamlessly rose to the challenge of converting and delivering the meeting virtually.

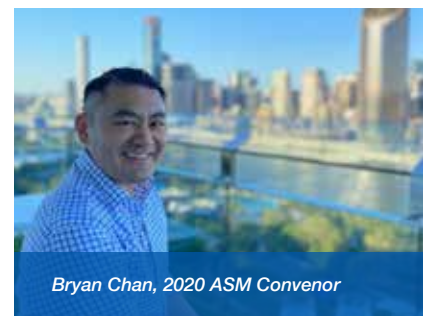
Our opening plenary was led by Bogda Koczwara and featured Implementation Science expert, David Chambers from the National Cancer Institute, in the US; Hardeep Singh from Houston's Centre for Innovations in Quality, Effectiveness and Safety; as well as our local telehealth champion, Sabe Sabesan from Townsville. The session focussed on the intersection between oncology and implementation science and highlighted how we could harness the power of health information technology and telehealth to improve the care of patients with cancer.

On day two, we were inspired by Susan Dent (Duke University, North Carolina), a pioneer and global leader in cardio-oncology, and her pragmatic approach to establishing multidisciplinary cardio-oncology clinics. She was joined by Eng-Siew Koh, Tom Marwick and Liza Thomas who highlighted the vast research being conducted locally within Australia to address this pressing need. Sanchia Aranda very deservedly received the Tom Reeve award and in her oration she reminded us of the need to sometimes 'step out of our lanes' to approach challenges with a fresh and more comprehensive perspective.

Our final day featured another first, our inaugural joint COSA and ASCO Breakthrough plenary, exploring the integration of artificial intelligence in Oncology. As you can imagine, there were so many other excellent concurrent sessions and symposia throughout the meeting that echoed the conference themes. The 2020 Presidential Lecture was given by Ian Frazer who took us on a journey of cancer immunotherapy discovery, from the time of William Coley to what exciting prospects lay ahead.

Now that this mammoth responsibility has lifted, I can now finally relax and reflect on the many memorable moments and lessons learnt from this positive experience. None of it would have been possible without the support of my fellow planning committee members: John Atherton, Katie Benton, Krissy Carrington, David Cavallucci, Ray Chan, Ben Chua, Cassandra Dickens, Fran Doughton, Curtis Forbes, Marie Malica, Nicole Rankin, Simon Troth and Jane Turner. It truly has been an honour working with you all and to serve as your COSA 2020 ASM Convenor and I hope that you all enjoyed the meeting! See you all in Melbourne next year!

Bryan Chan
2020 COSA ASM
Convenor



Bryan Chan, 2020 ASM Convenor



Did you know COSA is on social media?



Please follow us on Twitter
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Link to us on LinkedIn

<https://www.linkedin.com/company/clinical-oncology-society-of-australia-cosa>



Like our Facebook Page
<https://www.facebook.com/COSAoncology/>

International Speaker Profiles

For those not fortunate enough to attend this year's Annual Scientific Meeting (either live or on-demand), or those wanting to know a little more about our international speakers, COSA took 5 minutes to speak with Dr Aisling Barry, Dr David Chambers and Dr Melvin Chua.



Dr Aisling Barry

Dr Aisling Barry

Dr Aisling Barry is a radiation oncology staff member and assistant professor in the radiation medicine program at Princess Margaret Cancer Centre, Toronto, Canada, and the University of Toronto since 2017. She is currently site group leader for the Palliative Radiation

Oncology Program (PROP). She received her undergraduate education at Trinity College Dublin and completed her radiation oncology specialty training also in Ireland. She subsequently completed fellowships in breast radiotherapy and stereotactic body radiotherapy – specifically for liver and lung cancers, at Princess Margaret Cancer Centre in 2016. Dr Barry's research interests include the role of radiotherapy in primary and secondary liver cancers and in oligo-metastatic and oligo-progressive disease.

Have you spoken at or attended any other virtual conferences? How does delivering a virtual presentation compare to face-to-face?

Yes, this year I have participated in the Brazilian Oncology Conference and Canadian Radiation Oncology Conference, and I lecture at the University virtually also. Delivery I have found is fine in general, personally I miss the real time face to face interactions, it's very difficult to know if your talk is having any impact on the audience. I miss the Q&A real-time also which is why I like conferences in general - the discussions and hearing what others do - I learn a lot from others so always open to what others think on things that I discuss.

How were your interactions with COSA delegates during the session and at subsequent opportunities for "virtual networking" for example using the chat function?

Great

Did you get to view any other presentations at the ASM? Can you tell us your highlights or your overall impression?

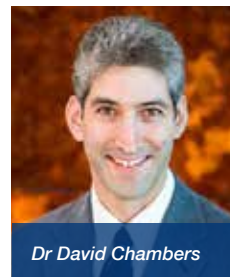
Just from my session which looked great

If you could have come to the COSA ASM in person, what was on your list to see and do in Australia? Or if you've been before, can you tell us about your favourite experiences?

I have been to Australia a couple of times and love it. I have many friends in oncology that I have met during my training and I really would have loved to have caught up with them in person. Also, I have family in Australia that I have not seen for nearly 10 years so would have added that into my trip:)

Do you have any other comments you'd like to add?

Congrats on hosting a great meeting, it takes a lot of work to make it work so smoothly which you definitely achieved. This COVID era is not easy for anyone:) Stay safe



Dr David Chambers

Dr David Chambers

Dr David Chambers is Deputy Director for Implementation Science in the Office of the Director in the Division of Cancer Control and Population Sciences (DCCPS) at the National Cancer Institute (NCI). Dr. Chambers manages a team focusing on efforts to build and advance the field of

Implementation Science (IS) through funding opportunity announcements, training programs, research activities, dissemination platforms, and enhancement of partnerships and networks to integrate research, practice and policy.

From 2008 through the fall of 2014, Dr. Chambers served as Chief of the Services Research and Clinical Epidemiology Branch (SRCEB) of the Division of Services and Intervention Research at the National Institute of Mental Health (NIMH). He arrived at NIMH in 2001, brought to the Institute to run the Dissemination and Implementation Research Program within SRCEB, developing a portfolio of grants to study the integration of scientific findings and effective clinical practices in mental health within real-world service settings. From 2006 to the fall of 2014, Dr. Chambers also served as Associate Director for Dissemination and Implementation Research, leading NIH initiatives around the coordination of dissemination and implementation research in health, including a set of research announcements across 15 of the

NIH Institutes and Centers, annual scientific conferences, and a summer training institute.

Prior to his arrival at NIH, Dr. Chambers worked as a member of a research team at Oxford University, where he studied national efforts to implement evidence-based practice within healthcare systems. He publishes on strategic research directions in implementation science and serves as a plenary speaker at numerous scientific conferences. He received his A.B. degree (with Honors) in Economics from Brown University in 1997, and an M.Sc. and D.Phil degree in Management Studies (Organisational Behaviour) in 1998 and 2001, respectively, from Oxford University (UK).

Have you spoken at or attended any other virtual conferences? How does delivering a virtual presentation compare to face-to-face?

I have now presented at and attended a whole range of virtual conferences, covering four continents, since we arrived at this “new normal” back in March. I find virtual presentations to be a reasonable substitute, although the major things that are missing are the ability to connect directly with the audience. I usually enjoy including audience participation (e.g. polling the audience with specific questions, checking for understanding, having a broader Q&A opportunity), none of which is available on most virtual conference platforms. While we can gain some using Q&A and chat functions, different settings result in variation on how accessible the bi-directional communication can be.

How were your interactions with COSA delegates during the session and at subsequent opportunities for “virtual networking” for example using the chat function?

My interactions with COSA delegates were good but limited, given the relatively short time for the discussion versus the delivery of the pre-recorded presentations. I did appreciate having the questions pop up in the livestream, although it was notable that the questions came from the organizers rather than the larger audience. Due to time zone constraints, I was unable to attend virtual networking sessions, so that was more of a limitation of 14 hours difference between Brisbane and Eastern US.

Did you get to view any other presentations at the ASM? Can you tell us your highlights or your overall impression?

I was only able to view the other presentations in the plenary, which I thought were wonderful. It was helpful to contrast my overview with the specific experience of implementation Health IT, and then the focus on improving oncology care locally. Solid speakers and terrific content.

If you could have come to the COSA ASM in person, what was on your list to see and do in Australia? Or if you've been before, can you tell us about your favourite experiences?

I was very much looking forward to attending COSA ASM in person, and was planning to spend time in Brisbane, Sydney (for another conference), with a potential day trip to visit colleagues in Newcastle in between. Having never been to Australia before, there was much that I wanted to see. In Brisbane, I was hoping to visit the museums, botanic gardens and possibly the Koala sanctuary; in Sydney, I had hoped to do the Bridgewalk and walk around the harbour and Opera house. While Melbourne was not on my itinerary, I do some day want to make it to the Australian Open (an avid tennis player and fan, I've been to the US Open and Wimbledon).



Dr Melvin Chua

Dr Melvin Chua

Dr Melvin Chua is a Clinician-Scientist at the National Cancer Centre Singapore, and Principal Investigator of the Tan Chin Tuan Laboratory of Optical Imaging, Photodynamic and Proton Beam Therapy – Precision Radiation Oncology Programme, Division of Radiation Oncology.

His research is supported by the NMRC Clinician-scientist award, and is focused on discovery and translational cancer genomics, and the development of biomarker-directed clinical trials in nasopharyngeal (NPC) and prostate cancers.

He graduated from the Yong Loo Lin School of Medicine, National University Singapore in 2002. He obtained his Fellowship in Clinical Oncology from the Royal College of Radiologists, and his Doctorate from the University College London in 2013. He later completed post-doctoral Clinician-scientist fellowships at the Mount Vernon Cancer Centre, UK, and the Princess Margaret Cancer Center, Toronto.

Dr Chua is a KOL on NPC and prostate cancer, and he has been invited to speak at >100 international meetings. He is also on the scientific advisory board for the NPC Guangzhou-Singapore Trial Network and a board member on the Head Neck Cancer International Group (HNCIG).

His other academic activities include his roles as the Associate Senior Editor of the *International Journal of Radiation Oncology Biology Physics* – Official journal of the American Society of Radiation Oncology and Editor-in-Chief, *Annals of Nasopharynx Cancer*. He also serves on the International Education Steering Group and the Asia-Pacific Regional Council of the American Society of Clinical Oncology (ASCO).

He has published over 80 peer-reviewed papers, with a H-index of 22, including highly cited articles in the *New England Journal of Medicine*, *Lancet*, *Nature*, *Cell*, *Journal of Clinical Oncology* and *JAMA Oncology*.

Have you spoken at or attended any other virtual conferences? How does delivering a virtual presentation compare to face-to-face?

Yes – it is more convenient for sure, but it doesn't present the opportunity to network during and post-meeting.

How were your interactions with COSA delegates during the session and at subsequent opportunities for "virtual networking" for example using the chat function?

There wasn't much time available for catching up as we were short on time for my session. And the issue with virtual meetings is people don't stick around to network during these virtual sessions. People are often multitasking in between sessions.

Did you get to view any other presentations at the ASM? Can you tell us your highlights or your overall impression?

Yes – they were of high quality.

If you could have come to the COSA ASM in person, what was on your list to see and do in Australia? Or if you've been before, can you tell us about your favourite experiences?

Yes indeed – Australia has always been special and lots to explore. Cities like Sydney and Melbourne are cosmopolitan and always a pleasure to visit.

Do you have any other comments you'd like to add?

Great job!

2020 Tom Reeve Award for Outstanding Contributions to Cancer Care

Professor Sanchia Aranda AM was announced as the 2020 recipient of the Tom Reeve Award for Outstanding Contributions to Cancer Care on the Thursday afternoon of the COSA ASM.



As her nominator said, "Sanchia's extensive list of accomplishments and publications, her tireless contribution to global cancer control, her championing of inequities in cancer outcomes, and the outpouring of support for this nomination, leaves me in no doubt about her deserving this award."

Sanchia has more than 40 years' experience in cancer control as a clinician, researcher, educator and health-system administrator.

Until very recently Sanchia was the Chief Executive Officer of Cancer Council Australia, where she was a strong independent voice on evidence-based cancer control and was engaged in all fields of cancer from prevention through to survivorship and end of life care. She has drawn on her wide expertise across clinical practice, research and government roles to advocate for system improvements. In 2019 Sanchia was appointed as a Member of the Order of Australia for her services to community health, particularly cancer control and nursing.

In her oration, Sanchia spoke of the four guiding lenses she has used to form the basis of a comprehensive approach to quality cancer treatment and care. They are: individual patient experience; evidence-based practice; a recognition of disadvantage at the population level; and public reporting. "However, by themselves they are insufficient," she said. "We need a much better commitment to prevention and public health as cornerstone partners in a closer dialogue with clinicians and policy makers in addressing unwarranted variation and reducing inequality."

Sanchia collected the award from COSA President Nick Pavlakis in person during the ASM in a ceremony that was broadcast live and is now available on demand to ASM delegates.

2020 COSA Best of the Best Awards

Best of the Best Oral Presentation Awards

Basic and Translational Research

Marjan Mojtavavi Naeini
abs#71

Tracking genomic and transcriptomic features of Oesophageal Adenocarcinoma for improving patients outcome

Cardio-Oncology

Hayley Dillon abs#22

Impact of Allogeneic Stem Cell Transplant on the cardiovascular health of haematological cancer patients

Epidemiology

Carolyn Mazariego abs#77

Fifteen-year quality of life outcomes in men with localised prostate cancer: an evidence base for the implementation of improved treatment decision-making

Clinical Research

Nikita Botadra abs#31

International Lung Screening Trial: opportunistic screening for osteoporosis using low-dose chest CT; baseline findings

Quality and Safety

Vivienne Milch abs#38

COVID-19 Recovery: Implications for cancer care

Education

Carolyn Der Vartanian abs#43

Cancer and COVID-19: delivering strategic health communication during a pandemic

Health Services

Grace Chazan abs#86

Impact of COVID-19 on Cancer Service Delivery; Results from an International Survey of Oncology Clinicians

Supportive Care

Phyllis Butow abs#89

Psychological impact of comprehensive genomic profiling results to advanced cancer patients

Implementation Science

Andrea Smith abs#97

The future of sentinel lymph node biopsy in the management of invasive melanoma in Australia: a mixed-methods study using a determinants of practice implementation science framework

Best of the Best Poster Oral Presentation Awards

Clinical and Translational Research

Sam Banks abs#263

Developing a Predictive Model utilising Real-world Pancreatic Cancer data and CT-based Radiomics for Implementation into Clinical Practice

Supportive Care and Exercise for Cancer Patients

Benjamin Singh abs#400

Safety, feasibility and effect of exercise following cancer: do findings differ according to survival prospects?

PROMs, PREMs, QoL and Patient Preferences

Olivia Cook abs#280

'Real-time' collection and use of patient-reported outcome measures (PROMs) and patient-reported experience measures (PREMs) in outpatient oncology: barriers, enablers, and impact on consultation length.

2020 COSA ASM in pictures



Hands up if you can't wait to start! The organising committee gather in Brisbane for the ASM

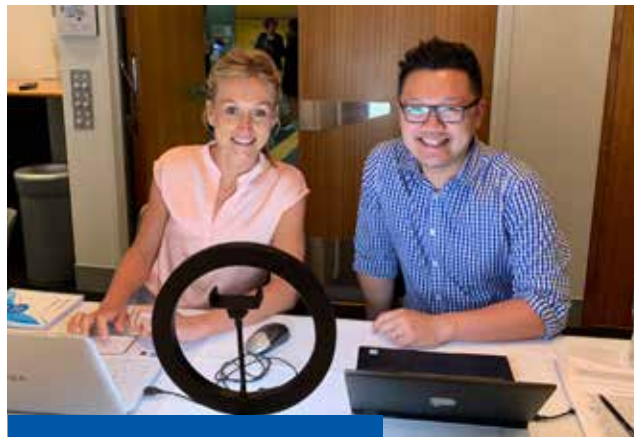


The COSA team in Sydney applaud Ian Frazer's inspiring Presidential lecture

Nick Pavlakis prepares to open his last ASM as COSA President



Bernard Stewart speaking on COSA's recently published Smoking Cessation in Cancer Patients

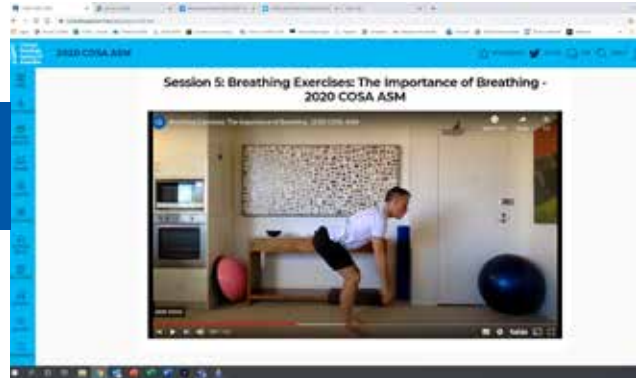


"Yay!! our turn now!" Katie Benton and Ray Chan take up chairing duties

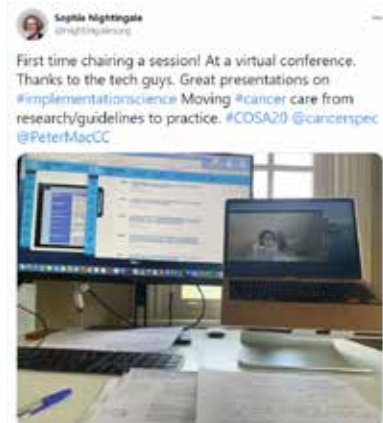




Wellness videos were all part of the holistic delegate experience



Trans-Atlantic tumour boards: David Cavallucci presents on Artificial Intelligence in oncology



Nothing's too much of a stretch for COSA Project Manager Jessica Harris



Incoming COSA President Fran Boyle gets the message across about communication skills

COSA Group Reports

Cancer Care Coordination Group

I hope many of you were able to join COSA's virtual Annual Scientific Meeting in November. While I was disappointed to have missed the opportunity to catch up with colleagues face to face, the virtual program provided plenty of rich learning experiences and kept me up to date with developments across the country. The key themes this year were Quality and Safety, Implementation Science and Cardio-oncology. The opening plenary session focused on implementation science and challenged us to consider how we can optimise the use of research findings in more dynamic ways, something that is very relevant to those working in roles focused on improving the cancer care system. There was also an excellent session on the use of data in cancer care which highlighted the work of the Queensland Cancer Alliance and how data is used at point of care to drive care decisions and quality improvement. The presenters illustrated through several examples how such data can be used to create a "learning cancer care system". For example, Dr Euan Walpole described how review of data on management of colorectal cancer enabled assessment of the extent to which optimal care pathways were being applied.

The conference included an excellent session focused on PROMS and PREMS that I recommend to those looking at what the evidence says about use of such measures in practice. Afaf Girgis provided a great overview of the current state of knowledge, barriers and practical application of evidence in the field. Her talk was followed by interesting examples of how cancer

professionals in various settings have sought to develop and implement systems for measuring patient outcomes and experience.

The conference included many excellent rapid fire and best of the best sessions that covered a range of innovations and hot topics in cancer care. I especially enjoyed the session on Day 3 that covered issues relating to quality of life, PROMs, and financial toxicity as it covered new research findings that can be readily implemented in practice.

I was especially delighted to see the Tom Reeve Award for Outstanding Contribution to Cancer Care being awarded to Professor Sanchia Aranda. Sanchia has been an outstanding leader who has pioneered consumer centred approaches to cancer care and system level reforms over many decades. Her work has had an enormous impact on cancer care in Australia and internationally. This work is far reaching, and importantly includes many initiatives which have improved cancer care coordination especially for underserved populations in Australia and internationally.

A reminder that if you registered for the 2020 COSA ASM then you are able to access recordings of all presentations for the next 12 months. I encourage you to check the program via your registration for any sessions you missed or would like to watch again. I also encourage you to visit the ePoster section, where you will discover many presentations that are of interest to a care coordination audience along with other initiatives that are relevant to all cancer health professionals.

We had designed a face-to-face pre-conference workshop for cancer care coordinators prior to the 2020 COSA ASM in Brisbane. Unfortunately the ongoing restrictions related to

COVID-19 meant this did not eventuate. We hope that the workshop will happen at a future date, but in the meantime we will consider ways we can deliver a professional development opportunity virtually in the year ahead. Please get in touch if you would like to help!

As we come to the end of 2020 and the International Year of the Nurse and Midwife I would like to again acknowledge the contributions from the broad range of nurses in our Australian cancer services, and particularly recognise everyone who has had to deal with the ongoing challenges of the COVID-19 pandemic.

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Cancer Pharmacists Group



I'd like to thank all CPG members (and especially the CPG committee) for their continued support for and involvement in various CPG activities that we have been able to undertake or at least plan for this year. In the background, the CPG committee is continuing to plan for several activities, taking advantage of the flexibility that digital delivery allows: CPG Foundation Clinical Practice for Cancer Pharmacists Course, CPG Advanced Clinical Practice for Cancer Pharmacists Course, COSA ASM (+ clinical development workshop).

Pharmacology of Cancer Chemotherapy for Advanced Trainees workshop 29 February, Sydney

Krissy Carrington and Dan McKavanagh presented this workshop in Sydney this year, with fantastic support from Fran and Marie from COSA. Plans are underway for the 2021 course

COSA ASM 2020 11-13 November, Brisbane

The ASM bustled (virtually) into Brisbane this year, with several foci: Quality and Safety; Implementation Science; Cardio-Oncology. Thanks ever so much to Krissy Carrington the CPG representative on the ASM organising committee. The ASM has been a great success, delivering several pharmacist-containing sessions, notably the Medicines Matters session, along with the COSA CPG AGM.

CPG post-ASM Clinical Development Workshop 14 November 2020, Brisbane

CPG committee members Courtney Oar, Marissa Ryan, and Jenny Casanova coordinated a fantastic program for this workshop, linking to one of the ASM themes cardio-oncology, along with practice orientated presentations very relevant in the challenging year we've had. 22 attendees joined this virtual event and was hugely successful as an initial foray into the virtual workshop format.

Other activities

Gail Rowan and Marliese Alexander have been participating on behalf of the COSA CPG with the ISOPP Global Oncology Pharmacy Response to COVID-19 Pandemic study.

Huge kudos to Krissy Carrington and Jim Siderov for their involvement in the

now published range of resources to support cancer care services implement the National Safety and Quality Health Service (NSQHS) Standards. See the publications and resources section of the Commission's website for these.

Geeta Sandhu and Dan McKavanagh along with the CPG committee have commenced planning a Digital Safe Prescribing, Dispensing & Administration Guideline that may sit alongside the existing COSA guidelines. Very much in the early stages of planning but hoping for support from the Group to continue development.

Kimberley-Ann Kerr coordinated this year's COSA CPG member survey, which had a great response rate and has provided excellent feedback on CPG activities and what you all want going forward. Of note was the appetite for educational activities to proceed using virtual means to engage with cancer pharmacists and still allow an interactive experience.

The CPG is partnering with Cancer Council Australia in a review of the Efficient Funding of Chemotherapy (EFC) arrangements. This has only recently commenced but the committee will be seeking input from both the CPG and wider COSA community.

CPG Membership and Executive Committee Update

Currently our membership (either Group members or those COSA members stating cancer pharmacy as an area of interest) stands at 131, which is a substantial drop from the same time last year. Without our usual educational activities this year, it is likely that this has directly impacted membership.

A reminder that your CPG committee members are:

- Dan McKavanagh – Chair
- Kimberley-Ann Kerr – Deputy Chair
- Geeta Sandhu

- Gail Rowan
- Courtney Oar
- Marissa Ryan

Thanks to Jim Siderov and Jenny Casanova for their tireless efforts in serving COSA and the CPG as committee members, deciding to stand down from the committee. We are actively seeking nominations for replacements on the committee.

Dan McKavanagh
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Clinical Trials Research Professionals Group

Members of the CTRPG Executive Committee (EC) represent regional and metropolitan clinical trials research organisations across Australia. Our current committee members are: Annette Cubitt, Clinical Trial Manager, Royal Brisbane and Women's Hospital, QLD (Chair); Dianne Lindsay, Clinical Research Consultant, Newcastle, NSW (Deputy Chair); Alison Richards, Clinical Trials Manager, Flinders Medical Centre, SA (Secretary); Joanne Benhamu, Senior Research Nurse, Peter MacCallum Cancer Centre, Melbourne, VIC; Natasha Roberts, Specialist Nurse, Royal Brisbane and Women's Hospital, QLD; Adam Stoneley, Research Innovation & Operations Manager, Icon Cancer Centre, Brisbane, QLD; Krystyne Hiscock, Affinity Clinical Research, Perth, WA; and, Annette Dempsey, Clinical Research Associate, TROG Cancer Research, Newcastle, NSW.

Recently, the committee liaised with Olivia Hart, COSA Social Media Coordinator to establish a CTRPG Twitter account which is now live! Please follow us on @cosa_ctrpg. We anticipate that this account will allow the CTRPG

Executive Committee to more effectively communicate information about events, allow members to connect or re-connect with each other and provide a platform that encourages members to post comments or questions. Any questions that are posted will be automatically redirected and answered by a member of the EC.



COSA CTRPG Clinical Professional Day Workshop

Despite the impact of COVID-19 on travel and the organisation of the Annual Scientific Meetings of many cancer organisations this year, we were able to run a very successful COSA Clinical Professional Day Workshop in Brisbane, as planned. Both in-person and virtual attendance were combined and the workshop entitled “Teletrials the New Norm” was generously sponsored by the Icon Group. We are very grateful for the support that was provided by Icon staff, led by Mr Adam Stoneley, which included access to an excellent training facility and very high level internet technology expertise. A record number of people were able to take part.



Key stakeholders, including Professor Sabe Sabesan, Dr Craig Underhill and Ms Chantal Gebbie outlined the implementation and current status of the Australasian Teletrials program. Other presenters described how barriers, including regulatory, legal and pharmaceutical processes have been reformed and rapid approvals facilitated when patients are identified at satellite sites. Cancer centres are

now encouraged to embed teletrials into operational plans, trial units to collaborate with other sites to form clusters and clinicians to use the model to care for patients in partnership with other sites. The workshop provided the opportunity for participants to learn more about the program from people at the coal-face. Advice was given on how to become involved in teletrials, and, at the end of the day an expert panel very ably moderated by Ms Elizabeth Wilson, answered questions raised online by participants.

The COVID-19 crisis has had a silver lining, bringing telehealth to the forefront; teletrials have the potential to quietly and effectively revolutionise delivery and access to cancer care clinical trials. Teletrials have created interconnected clinical trial networks and clusters across states and across the country using telehealth. More regional hospitals (satellites) have acquired trial capabilities and more rural/regional staff have received Good Clinical Practice training. Importantly, teletrials enable more Australian patients to access clinical trials closer to home.

Ms Cheryl-Ann Hawkins, Dr Mark Voskoboynik and the team from Alfred Health shared a positive story about how a patient who had been travelling from Launceston to The Alfred Oncology Unit to take part in a phase I clinical trial was able to continue trial treatment after borders shut in Tasmania due to COVID-19. The team at Alfred Health was able to work with the pharmaceutical company, governments and regulatory bodies to set up a satellite centre at The Royal Hobart Hospital to enable the patient to safely continue her treatment in Tasmania, through teletrials.

This is the first time that virtual as well as in-person attendance has been offered for a workshop led by the CTRPG EC, and feedback received from participants to date indicates that they would definitely prefer this opportunity to be available in future. Other feedback received: “All presentations were clear, informative

and inspiring. I got a huge amount out of this workshop, hearing the personal experiences of those who are paving the way for Teletrials to become accessible to all. Really enjoyed hearing about the Teletrial experiences at many different sites, learning the pros and cons at each site. Happy to learn that so much is happening in this space. Excited to see what develops next. I always thought there would be positive unexpected consequences from a global pandemic. Teletrials coming to the fore is one, and virtual conferencing is another”.

The commitment of all the presenters to making teletrials a reality, and to enable patient access to clinical trials was obvious. Everyone involved in the workshop benefited by learning from their first-hand knowledge and enthusiasm. We are grateful to everyone who was involved and especially to the presenters for generously giving their time and expertise, which ensured that this year’s workshop was such a successful event. A summary of the workshop is being drafted for submission to the *Asia-Pacific Journal of Clinical Oncology*.

The CTRPG Executive Committee is keen to continue our efforts to support cancer clinical trials research in Australia and improve outcomes for patients. We aim to do all that we can to foster high quality clinical trials and research processes. Please do not hesitate to contact members of the committee for help with any research queries; our contact details are available on the COSA website (or contact us via Twitter). We look forward to the opportunity to meet and network with colleagues during the next COSA Clinical Professional Day Workshop and the Annual Scientific Meeting in November 2021 in Melbourne.

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Epidemiology Group

The Epidemiology Group was well represented at COSA's 47th Annual Scientific Meeting (ASM) in the Best of the Best Orals-Epidemiology and other Best of the Best Orals. The Group organised a session titled "COVID-19 response: what can oncology learn about the value of real-time, integrated real-world datasets from health and other sectors?" Chaired by Claire Vajdic and Haitham Tuffaha, the session featured four excellent presentations by multidisciplinary speakers. **Nigel McMillan** from Menzies Health Institute Queensland gave an overview about international responses to COVID-19 and outlined the opportunities the pandemic offered us in terms of health care, new RNA-based medicines and research. Dorothy Keefe described the extensive COVID-specific body of work undertaken by Cancer Australia in response to the emerging challenges of managing cancer patients during the COVID-19 pandemic. She also highlighted the need to readily access up-to-date data to inform policy and care and the notable gaps in availability and timely access in Australia. Kees Van Gool from the University of Technology Sydney emphasised the importance of data and research capacity to develop an evidence-based policy response. He discussed the obstacles in improving our capacity to deliver timely and policy relevant research to improve health and economic outcomes for patients and their families. Karen Canfell from Cancer Council NSW explained how data-driven modelling can provide information on longer term impacts and inform the design of fast-tracked innovative mitigation strategies. Her talk highlighted the work of international modelling consortia to facilitate best practice modelling and support decision-making in cancer control both during and after the crisis.



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Exercise and Cancer Group

The Exercise and Cancer Group was active across the course of the year with a number of leading events and initiatives.

Exercise and Cancer Position Statement

The COSA Position Statement on Exercise in Cancer Care was developed by the COSA Exercise and Cancer Group and officially launched in May 2018. The statement endorses evidence-based guidelines and provides guidance to all members of the multidisciplinary cancer team regarding the role of exercise in the care of people with cancer.

Over the past 12 months the Exercise and Cancer Position Statement has undergone a major revision. These changes were circulated for consultation with COSA members, Affiliated Organisations and other interested parties. All existing Endorsing & Supporting Organisations have reconfirmed their support for the revised position statement. Seven new

organisations have agreed to be listed as Supporting Organisations: Australia New Zealand Gynaecological Oncology Group; Australian and New Zealand Head & Neck Cancer Society; Cancer Symptom Trials; McGrath Foundation; Oncology Social Work Australia New Zealand; Royal Australasian College of Surgeons; Royal Australian and New Zealand College of Radiologists. These changes were presented and approved by COSA Council at the October meeting and the Group looks forward to launching the updated position statement in early 2021.

Exercise and Cancer Implementation Working Group

During this year, the Implementation Working Group has been on hold awaiting final approval of the updated position statement. The Group will reconvene in early 2021 to finalise the implementation plan, along with development of new resources. These will include a clinician handout, patient handout, slide deck for presentations and FAQ's. The Exercise Executive Committee will liaise closely with the Implementation Working Group over the coming six months to develop these much needed resources.

Exercise at COSA's 47th Annual Scientific Meeting

Our Group was well represented at the COSA 2020 ASM with a number of excellent presentations. The conference themes 'Cardio-Oncology', 'Implementation Science' and 'Quality and Safety' enabled exercise presentations to be showcased throughout the conference program. Of particular note were the Rapid Fire Best of the Best Poster Orals – Supportive Care and Exercise for Cancer Patients; and Cancer Prevention for Cancer Patients. Congratulations to Dr Ben Singh for winning the Rapid Fire Best of the Best Supportive Care and Exercise for Cancer Patients for his presentation

titled 'Safety, feasibility and effect of exercise following cancer: do findings differ according to survival prospects'.

Please check out the conference website for all the exercise related work presented at the conference. Remember that if you registered for the 2020 COSA ASM, you have 12 months on-demand access to view the recordings of any presentations you missed or want to watch again!

Executive Committee Updates

Prue Cormie has stepped down from the Exercise and Cancer Group Executive Committee and on behalf of the Group I would like to thank her for all her hard work over the past 5 years. Prue played an important role in getting the COSA Exercise and Cancer Group off the ground, as the inaugural Chair responsible for shaping the exercise and cancer agenda. Prue's leadership and passion for the role of exercise in cancer care will be greatly missed.

Additionally, existing committee member Tina Skinner, Senior Lecturer in Clinical Exercise Physiology from the University of Queensland has been appointed as the Group's Deputy Chair – well done Tina. It has been a great pleasure to Chair the Group over the past 12 months and a big thank you to all members of the Executive Committee for their contributions and volunteering their time.

This is an exciting time to be involved in the Exercise and Cancer Group. If you would like to participate in the Group's activities, please login to your member profile on the COSA website and either select Exercise and Cancer as a COSA Group or Area of Interest. We encourage members from all discipline areas to participate in our Group.

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Gastrointestinal Cancer Group

The year 2020 has been overshadowed by the impacts of the COVID-19 pandemic. With the Federal Government mandated shutdown of elective surgery to conserve personal protective equipment and the subsequent lockdown measures, health services were affected across Australia in both the public and private sectors. A Cancer Australia analysis of MBS data indicates there was a decline in the level of diagnostic activity in April with the number of colonoscopies, sigmoidoscopies and polyp removals half of what was undertaken in March. There was some recovery in the figures in May and June but these were still less than in March. **The number of colorectal cancer surgeries were also notably lower in May than in March.**

With the expectation that the health system might be overwhelmed by COVID cases, scope plus theatre lists were limited and patients were reluctant to seek medical advice during the early part of the pandemic. GP practices and diagnostic pathology units also saw a decline in their activity during this period. Cancer Australia has emphasised that patients should not put off following up on any symptoms that could lead to delay in diagnosis of cancer resulting in a more advanced stage of the condition.

Decisions had to be made by multidisciplinary teams whether to bring surgeries forward while operating lists were still available or delay surgeries with an extended period of neoadjuvant systemic therapy until lists were assured. With concerns about the vulnerability of cancer patients receiving myelosuppressive chemotherapy, decisions had to be made about giving treatment holidays to patients on palliative maintenance therapy, supporting necessary intensive protocols (such as FOLFIRINOX or FOFXIRI) with

colony stimulating factor and reducing visits to hospital by use of oral agents and switching to telehealth consultations. Cross border restrictions in travel also impacted care of patients needing to travel to highly specialised centres for treatments.

In 2020 some exciting progress has emerged in the area of immune checkpoint inhibitor therapy in gastro-oesophageal cancers presented at the **ESMO Virtual Congress**. The CheckMate 577 study showed a strong benefit on DFS (22.4 months vs 11.0 months) of adjuvant nivolumab for one year in resected stage II/II oesophageal and gastro-oesophageal cancer following neoadjuvant chemoradiotherapy compared to placebo. The CheckMate 649 frontline study of FOLFOX or CAPOX+/- nivolumab in advanced gastro-oesophagus cancer found an improvement in OS and PFS with the immune checkpoint inhibitor as did the KEYNOTE 590 study of cisplatin/5FU+/- pembrolizumab. The Asian ATTRACTION 4 trial found an improvement in DFS but not OS with the addition of nivolumab to the CAPOX or SOX (S1+oxaliplatin) schedule. The KEYNOTE 062 study of frontline pembrolizumab monotherapy versus chemoimmunotherapy versus chemotherapy alone published in **JAMA Oncology** found immunotherapy non-inferior to chemotherapy (cisplatin/5FU or cisplatin/capecitabine) and chemoimmunotherapy was not superior to chemotherapy for OS and PFS. Differences in the overall survival benefits of these frontline immunotherapy trials likely relate to the differences in patients populations, race and enrichment with higher CPS (combined positive score), the chemotherapy backbone, the checkpoint inhibitor used as well as the availability of second and subsequent line therapies in the countries the studies were performed.

Lastly the combination of bevacizumab and atezolizumab has received PBS approval for the treatment of advanced unresectable Barcelona Clinic Liver

Cancer Stage B or C and Child Pugh class A hepatocellular carcinoma as described in the **IMbrave 150 trial**. With the trend of the use of multikinase therapies being taken on by hepatologists in Australia, this new regimen of immunotherapy and anti-VEGF targeting will need careful cooperation between medical oncologists and hepatologist to select the appropriate patients for treatment, supervise the treatment as well as watch for and manage potential toxicities including immune related adverse events (irAEs). Medical oncologists have built up extensive expertise, procedures and referral networks in units over the last 10 years to be able to manage these irAEs and need to be involved in the care of patients receiving this schedule.

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Geriatric Oncology Group

Following on from the success at the 2019 COSA ASM in Adelaide, the second Geriatric Oncology breakfast session *'Improving the quality of care for older patients with cancer: Implementing comprehensive geriatric assessment and management from theory into practice'* was held virtually on 12 November as part of the 2020 COSA ASM, with a great virtual attendance. The COSA Geriatric Oncology Group thanks **Dr Darshit Thaker**, Consultant Medical Oncologist and Palliative Medicine Physician from Royal Brisbane and Women's Hospital, who organised and coordinated the session. Our *GO eNews* editor, **Dr Wee-Kheng Soo** gave an initial keynote lecture outlining recent research advances in the field of Geriatric Oncology including his 'INTEGRATE' trial and walked us through the choices

of assessment approaches. Expert Allied Health professionals from Queensland Health, **Ms Hermione Wheatley, Ms Stella Snape-Jenkinson and Ms Bernadette Kelly**, covered the practical use of screening and assessment tools of various domains including functional status, cognition, mood, nutritional status, fatigue, social support and carer strain. It encouraged us to start integrating geriatric screening into our practice and start seeing the benefits.

The panel discussion considered the care of an 86-year-old man with locally advanced cancer and complex social circumstances and medical comorbidity. **Dr Christopher Steer, Dr Penny Mackenzie, Dr Heather Lane and Dr Meera Agar** provided expert commentary on the principles of their approach from each of their perspectives (medical and radiation oncology, geriatrics and palliative care), how we need to work together with the person and their family in planning this care, and how the specific geriatric assessment outcomes direct the optimal choices in care. Dr Thakar crafted a tricky case story posing many dilemmas! The session concluded with lots of questions. It was excellent to be able to walk the audience through implementation of theory of geriatric assessment into clinical practice of managing older patients with cancer. If you registered for the COSA 2020 ASM and didn't have a chance to join this early morning session - or if you would like the chance to watch it again - then a reminder that you can access the recording for the next 12 months via your ASM registration. Also watch this space for the next breakfast session!

The GO Guideline Working Group has recently finished drafting the guideline for screening older adults for geriatric assessment. Great progress has been made despite COVID-19 slowing things down for a little while! The guideline has been accepted for publication and will be published on Cancer Council's Wiki platform in early 2021, and we look

forward to providing you with further updates on this initiative next year.

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Lung Cancer Group

Despite a very different year, filled with challenges arising of course in particular from the impact of the COVID-19 pandemic, I am pleased to report the Lung Cancer Group have continued to charge forward with the positive momentum we have seen mounting in recent years.

Despite physically distancing, the voice, interaction, ongoing education, clinical and translational research productivity from the Group has been strong.

I feel privileged to have this year joined COSA Council as Lung Cancer Group Chair and humbled to work with such a positive, supportive, inclusive and high achieving group.

The lung cancer year began with the great success of the Eighth Biennial **Australian Lung Cancer Conference (ALCC)**: A Time for Hope in Lung Cancer, held at the Melbourne Convention and Exhibition Centre, 19-21 February 2020. Key multi-disciplinary presentations from international and national experts, with many of our national experts renown on an international stage, were delivered on a variety of relevant topics including the impact of air pollution in the aftermath of our horrific Australian bush fire season, and on lung cancer screening, with the focus to introduce our Australian screening program high on the national agenda, targeting at risk individuals. Australia's only conference dedicated to lung cancer saw unprecedented consumer delegates, outnumbering

the clinician contingency which was fantastic and made for a balanced perspective and appropriately focused tone to the meeting.

Through COSA this year we updated our **Lung Cancer Optimal Care Pathway** for the Cancer Council, ensuring this important document is relevant to the current rapidly evolving lung cancer practice paradigm. This resource will be available live in early 2021, with details to follow.

Furthermore, through COSA we have provided **expert support** for the regulatory approval of emerging superior lung cancer companion diagnostic platforms and high impact novel therapeutics under review by our Therapeutic Goods Administration.

The highlight of the lung cancer year has been the establishment of the **Thoracic Oncology Group of Australasia (TOGA)**. TOGA is a multidisciplinary-patient centric group bringing together leading clinicians, nurses, allied health professionals, researchers and patient advocates within the community to conduct high quality, clinically relevant research in order to improve outcomes for patients with thoracic cancers. Effective from 4 November 2020 the Australasian Lung Cancer Clinical Trials Group (ALTG) discontinued its operations. TOGA is awaiting formal ratification by Cancer Australia.



With **November Lung Cancer Awareness month**, TOGA has released a brilliant **podcast series** with interviews from our leading lung cancer experts, patient interviews and clinical trial updates. **New members** are invited to join also through the website.



TOGA are also excited to conduct the Sixth Annual **Lung Cancer Preceptorship: 20-21 November, 2020** and first under the TOGA banner, also virtually. The intensive multidisciplinary training session is also a highlight on the lung cancer calendar, providing an in depth insight across the full management cycle of lung cancer, reviewing the latest published data facilitated by leading ANZ lung cancer specialists, catering for trainees, fellows, and a limited number of nurses, allied health professionals and consumers. This is an invaluable learning, critical appraisal development and networking opportunity.

TOGA investigators have continued all ALTG trial activities and are expanding their **clinical trial portfolio**. Most notably TOGA investigators are working tirelessly in collaboration with industry and the Australian Genomic Cancer Medicine Centre's (AGCMC trading as Omico) Molecular Screening and Therapeutics (MoST) study, co-ordinated through the NHMRC Clinical Trials Centre, to launch the **ASPIRATION** study in early 2021. ASPIRATION will evaluate the benefit of routine up-front comprehensive genomic profiling (CGP) in 1000 newly diagnosed metastatic, non-squamous, non-small cell lung cancer patients in Australia. The innovative umbrella design will enable intervention with and evaluation of active therapy arms in an array of oncogene sub-studies in an effort to

deliver personalised maximal impact therapy to all eligible Australians moving forward and contribute novel practice-changing scientific data to the international arena.

The positive outcome of the ALTG Phase II DREAM study evaluating the front-line combination of chemotherapy with immunotherapy (PD-

L1 checkpoint inhibition) in malignant pleural mesothelioma (publication reference below) has led to a successful collaboration with PreCOG, a US-based clinical trials group, to conduct a Phase III randomised study, **DREAM3R**. We are excited to see this study open, anticipated for early 2021, offering our patients an excellent treatment opportunity and evaluating a highly important therapeutic combination in this group with unmet need.

A final word on **further research** activities and endeavours, is provided with a small and certainly not all-inclusive list of collaborative practice changing and informing publications from our Group from 2020, listed below. As real world data, capturing treatment sequencing and patient reported outcomes and valuable patient tissue samples providing translational biomarker discovery research has emerged a highly valuable entity, we have seen the establishment of **AURORA, AUstralian Registry and biobank of thoRACic cancers**, with currently 11 tertiary referral centres collaborating, more planned to join in 2021. This platform will enable powerful local, national and international collaborative research opportunities to be conducted efficiently and with maximal impact. For more information please email the team at: AURORA@petermac.org.

Some key publications from the Australasian Lung Cancer Research Group 2020

- **Solomon BJ, Tan L, Lin JJ, Wong SQ, Hollizeck S, Ebata K, Tuch BB, Yoda S, Gainor JF, Sequist LV, Oxnard GR... Khoo C... Dawson SJ** et al. "RET solvent front mutations mediate acquired resistance to selective RET inhibition in RET-driven malignancies". *J Thorac Oncol.* 2020;15(4):541-549.
- Herbst RS, Tsuboi M, John T et al. "Osimertinib in resected EGFR-mutated non-small-cell lung cancer". *New Engl J Med.* 2020;383:1711-1723.
- **Nowak AK, Lesterhuis WJ, Kok PS, Brown C, Hughes BG, Karikios DJ, John T, Kao SC, Leslie C, Cook AM, Pavlakis N.** "Durvalumab with first-line chemotherapy in previously untreated malignant pleural mesothelioma (DREAM): a multicentre, single-arm, phase 2 trial with a safety run-in". *Lancet Oncol.* 2020;21(9):1213-1223.
- **Alexander M, Pavlakis N, John T, O'Connell R, Kao S, Hughes BG, Lee A, Hayes SA, Howell VM, Clarke SJ, Millward M, Burbury K, Solomon B, Itchins M.** "A multicenter study of thromboembolic events among patients diagnosed with ROS1-rearranged non-small cell lung cancer". *Lung Cancer.* 2020;142:34-40.
- Shaw AT... **Solomon BJ,** et al. "First-Line Lorlatinib or Crizotinib in Advanced ALK-Positive Lung Cancer". *N Engl J Med.* 2020;383:2018-29.

We have a lot to look forward to in 2021 as we continue to see precision and biomarker driven therapies deliver transformative survival gains in thoracic cancers. There is still much work to be done, assisted by the critical support of COSA, as we continue in our pursuit to

shift lung cancer from being the fourth most common cause of death worldwide, and biggest cancer killer.



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Neuroendocrine Tumours Group

What a year 2020 has been! Talking to my NET colleagues overseas, I am aware that the scope of devastation in other countries is (in most cases) even greater – but even in our own backyard there is the sense of dramatic change and lives uprooted over the past year, not to mention our colleagues and families who have been sick from COVID-19.

We have continued to be busy in the revision of the COSA NET guidelines. As most of the contributing authors also juggle clinical (and leadership) responsibilities, there have been some unavoidable delays in the revisions. Nevertheless, I am delighted to report that all first drafts are due for completion within the next few weeks. I am extremely grateful to all the writing group who have made this achievement possible among all that is going on! We plan to circulate this to COSA members for comment at the start of 2021 with a view to publishing the guidelines by late 2021.

As I write this report, we have just concluded the COSA Annual Scientific Meeting. There were several posters presented at the ASM on NET research, as well as a breakfast symposium regarding the future of NET care. There were 15 participants registered for the NET group AGM from different disciplines (radiation therapy, nuclear medicine, nursing, medical oncology, endocrinology to name a few), a testament to the ongoing interest in NET-related activities under the auspices of COSA. We look forward to what 2021 holds in terms of the COSA NET Group and potential new projects on the horizon. Please feel free to get in touch with any suggestions!

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Neuro-oncology Group

Neuro-oncology healthcare practitioners, consumer advocates and researchers across Australia and New Zealand continue to be a vibrant community, which has been bolstered by the funding opportunities offered through the Australian Brain Cancer Mission, MRFF and its funding partners. This has seen new partnerships form and strengthen and a number of important programmatic research initiatives especially that relating to Brain Cancer Survivorship care and research which are addressing the needs of patients across the age spectrum. The Mission has the overarching goal of doubling survival rates and improving the quality of life of people living with brain cancer over the decade to 2027, with the longer-term aim of defeating brain cancer.

The Cooperative Trials Group for Neuro-oncology's Annual Scientific Meeting needed to be postponed in 2020 in Melbourne and has been deferred until 2021. COGNO continues to oversee successful trial recruitment activity across a broad portfolio of glioma studies.

We look forward to another productive and busy year in neuro-oncology.

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Nutrition Group

While it has been a challenging year all round, there have been some positive achievements for the Nutrition Group. In August the Cancer-Related Malnutrition and Sarcopenia Position Statement was launched. The position statement has been endorsed by four organisations including Cancer Council Australia, Dietitians Australia, Cancer Nurses Society of Australia, and the Australia New Zealand Society for Sarcopenia and Frailty Research, and supported by a further 13 organisations including the Multinational Association of Supportive Care in Cancer. The position statement was published open access in the *Nutrition and Dietetics* journal and is available on the COSA website alongside supporting resources including an infographic and care pathway. The infographic is designed to be displayed in patient care areas to remind clinicians about malnutrition and sarcopenia during patient consultations. While the care pathway provides guidance at a health service level regarding the management of malnutrition and sarcopenia across acute, community and primary care settings. In December, a free webinar on the position statement will be available through Education in Nutrition, details of accessing this webinar will be provided to COSA members. The Nutrition Group will look to ways of supporting the implementation of the position statement recommendations through the course of 2021.

The recent COSA virtual ASM was a huge highlight of the year. The numerous sessions focused on implementation science were of great interest and applicable to all health professionals. The opening plenary provided a great overview of implementation science to set the scene. The session on implementation science for PROMS and PREMS

excellence later that day provided fantastic insight into some of the work in this space across Australia. Nutrition Group members contributed to several aspects of the program. Erin Laing, spoke at the morning symposium 'NExT Generation – The Management of NETs in 2020 and beyond' on the role of nutrition in a multidisciplinary approach to optimise patient outcomes. Irene Deftereos presented her PhD research in 'Variations in Care – it's not all about COVID19!' highlighting the substantial variations in nutrition practice for people with upper gastrointestinal cancer from results of an Australia wide study. Irene presented more of her PhD research in the 'Best of the Best Orals – Implementation Science' where she reported on the success and improved patient outcomes from implementation of a nutrition care pathway for upper gastrointestinal cancer surgery. Irene was also the recipient of the Dietitians Australia research prize for this research – congratulations Irene! The Nutrition Group would also like to extend their thanks to Katie Benton for representing the Group on the scientific program committee for the ASM.

This will be my last report as the Nutrition Group Chair as I will be stepping down from the role at the end of 2020. I have thoroughly enjoyed the past 6 years in the role, the opportunity to work with such a dynamic and supportive organisation and colleagues. A new Chair, to be announced shortly, will step into the role in 2021. Associate Professor Anna Boltong and Professor Liz Isenring have stepped down from the Nutrition Group Executive Committee and I'd like to thank them for their contributions to the Group over the many years they have been involved. Recently an EOI was circulated for new Executive Committee members with a great response. We are currently reviewing applications and will be able to announce the new members of the Executive Committee soon.

The Nutrition Group welcome new members and anyone with an interest in nutrition to get involved in our projects.

Nicole Kiss
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Psycho- Oncology Group

To say that 2020 has been a year like no other is an understatement. We have been challenged as a global community and, also, as an oncology community, in ways that we could not have anticipated at the beginning of the year. The COVID-19 pandemic has presented us with an opportunity to rethink how we deliver care to people who are considered amongst the most vulnerable to this virus. We have had to work harder than ever before and have had endless meetings and conversations about how to deliver care in the current environment. Our cancer community has had to contemplate the question: how do we provide a high-quality evidence based service that is effective, ethical, and, importantly, safe, while managing risk?

It was timely, then, that the themes of COSA ASM 2020 were Quality & Safety, Implementation Science and Cardio-oncology. There were plenty of interesting and thought-provoking presentations and certainly, as expected, there was a subtheme about COVID-19 and the implications of the pandemic. Special congratulations do need to go to the organising committee, including our psycho-oncology representative, Professor Jane Turner, and the COSA team, led by Marie Malica, for pulling together an engaging and stimulating conference program under the most difficult and uncertain of circumstances.

In attending the conference, it was hard not feeling some regret and sadness that we weren't able to gather to meet as usual. I certainly had thoughts such as "tonight I should be at the conference dinner." This experience has further consolidated my appreciation of our cancer community and the friendships we share, and I am optimistic about being able to meet at COSA ASM 2021.

As we head towards 2021, I would like to take this opportunity to wish you a wonderful Christmas and New Year period. If nothing else, 2020 has taught us to appreciate the people in our lives and the little things. As always, please feel free to get in contact with me.

Laura Kirsten
Chair, Psycho-Oncology Group
Laura.Kirsten@health.nsw.gov.au

Regional and Rural Group

2020 has been a phenomenal year. It will be indelibly tattooed into our memories for so many reasons. Whilst acknowledging the immense damage this pandemic has wrought, it is human nature to search for the light in times of darkness. I think for me it has either transformed or accelerated our models of cancer care in a very positive way. Whilst some of us were already practicing telemedicine this has now become the standard of care for both metro and rural practices. Our patients need to less frequently travel vast distances for short specialist appointments in the city as our metro colleagues have embraced this model. There have been reasonable investments in videoconferencing IT to enable the rapid uptake of this medium. Our Allied Health staff have been able to dial into patient's homes to deliver their services, something which was very rarely occurring pre-COVID.

For WA Country Health Cancer Services, COVID-19 and the subsequent regional border and Aboriginal community closures caused a rush on commencement of the planned TeleChemotherapy Units in Broome and Narrogin to enable people to receive treatment close to home. Significant Commonwealth funding received to implement the WACHS Cancer Strategy 2017-2022 has resulted in recruitment of additional cancer health service providers (nursing and allied health) across the WACHS regions. The TeleLymphoedema pilot service which is currently servicing Esperance and Katanning has also recently expanded to Kalgoorlie. This service has allowed breast cancer patients to receive lymphoedema care closer to home.

From the Regional and Rural workgroup perspective there have not been a huge amount of direct developments. I think this is mostly due to the immense additional work our members in the region have undertaken to prepare their services and patients to handle COVID-19. Having said that, Dr Kate Gunn and her team have performed an insightful review of the literature on the psychosocial impacts of cancer which particularly focused on the discrepancies in these domains between rural and metro patients. There is more to come on this once the manuscript has been published.

There was some wonderful news regarding the further expansion and deployment of Teletrials. Many members of the COSA Regional and Rural Executive Committee were heavily involved and hugely instrumental in the projects which secured Medical Research Future Fund (MRFF) money to improve Clinical Trial Access to regional and rural patients. The QLD led nationwide consortium received \$75million, the Victorians through the Border Oncology and Regional Trials network received \$18.6million and NSW Health received \$30.6 million. The major remit for these successful

programmes is to accelerate the uptake of the COSA Australasian Teletrials framework throughout Australia. This represents a **once in a generation funding boost** to deliver clinical trials (cancer and non-cancer) to every Australian no matter their postcode. It will transform clinical care in Australia through multiple mechanisms but for me the key mechanism will be to foster stronger networks amongst clinicians so patients can access even greater clinical expertise.

This brings me to another amazing project that will directly benefit the Regional and Rural clinicians and their patients. This project is the **Australian Rare Cancer (ARC) Portal**. The ARC Portal is an online referral service for cancer clinicians caring for patients with a rare cancer, including patients with an uncommon or rare molecular subtype of a common cancer. The Portal coordinates nation-wide review of the clinical care of patients with rare cancers, and can provide referrers with:

1. Specialist opinion on diagnosis or management through a network of rare cancer experts
2. A summary of existing literature and relevant clinical guidelines
3. Pathology interpretation
4. Germline/Tumour molecular testing options and advice on the interpretation of existing reports
5. Trials information and recommendations
6. Access to research opportunities for rare cancers, with nested sub-studies available for individuals with certain rare tumours

The Australian Rare Cancer Portal is supported by the Walter and Eliza Hall Institute (WEHI) Stafford-Fox Rare Cancer Research Program (SFRCP), which aims to explore new strategies for treating patients with a rare cancer diagnosis. Referrals can be entered by clinicians via the website

(<https://www.arcportal.org.au>) or sent via their Twitter handle @rare_arc. As of November 2020, 84% of ARC's referrals have come from regional and rural oncologists.

Please ensure you keep up your membership of COSA and the Regional and Rural Group in 2020. If you would like to participate in the Regional and Rural Group or be kept informed of our activities, login to your member profile on the COSA website and select Regional and Rural Oncology as either a COSA Group or Area of Interest. We strongly encourage members from all disciplines to get involved with our Group.

Rob Zielinski
Chair, Regional & Rural Group
Rob.Zielinski@health.nsw.gov.au

Survivorship Group

The Survivorship Group remains very active. Ultimately our goal is to see improved survivorship care and improved outcomes for cancer survivors.

The COSA Model of Survivorship Care (2016) and associated position statement (published in the *Australian Journal of General Practice* in December 2019) inform much of our work.

We are (1) progressing work to understand current survivorship care delivery, (2) exploring and advocating for improved models of care, (3) providing COSA members with a number of educational opportunities around survivorship care, (4) promoting survivorship research.

Exploring care delivery

The Survivorship Group are keen to consider how we can support greater roll out of the COSA Model of Survivorship Care. We recognise that there is

significant variation in the delivery of survivorship care across the country. Associated, there is likely variation in awareness of the issues experienced by cancer survivors and deficiencies with current care models. We are keen to understand more about the current situation. Several members of our Executive Committee are also members of the steering group for a project, funded by the Victorian Government, that seeks to better understand the situation at 15 public hospital sites in Victoria. This will include a survey of current survivorship practice, services, and models of care. Linking with this project may leverage work in other states, or indeed nationally.

New models of care

Consistent with the COSA Model of Survivorship Care, primary care providers should have a greater role in survivorship care. The Executive Committee are keen to consider COSA's and the Survivorship Group's role in better supporting primary care, including general practitioners (GPs), to provide ongoing, comprehensive care for survivors. There are a number of challenges to GPs providing survivorship care, including limited education and training, and a lack of adequate remuneration to support holistic care. The Executive have established a working group, together with representatives from peak GP groups, to consider COSA and the Survivorship Group's role, and next steps.

The COSA Model of Survivorship Care recognises the importance of understanding survivors' issues, concerns and needs, to inform patient-directed care. The COSA patient reported outcome (PRO) working group continues to push ahead. As previously noted, a 'call to action' paper is currently in press in the *Medical Journal of Australia*. As below, one of the COSA Cancer Survivorship Research Fellows will soon undertake work to develop consensus guidelines for the minimum implementation of PRO measures in routine cancer care in Australia.

The Survivorship Group was pleased to contribute to COSA's efforts to support retention of MBS telehealth reforms through and beyond the period of COVID-19. Telehealth can support improved survivorship care and provide benefits such as less travel time and lower costs (e.g. transport and parking).

Educational opportunities

A number of survivorship topics were included in the recent virtual COSA 2020 Annual Scientific Meeting. A detailed update will be included in the November Survivorship Group newsletter. We heard about the importance of incorporating evidence into practice. Examples include the known benefits of exercise for patients and survivors, use of PROs, and efforts to minimise harm from tobacco. We also heard about the growing focus on cardio-oncology. Many cancer treatments are cardio-toxic. As with many other therapies, the challenge is to better understand: who is at risk; how to screen those at risk; what are effective interventions, and how to disseminate these interventions.

The Survivorship Group had originally planned to host a pre-conference survivorship masterclass, focussed on implementing improved models of care. Unfortunately, with the move to a fully virtual Annual Scientific Meeting we had to cancel this. We hope to present this in 2021!

COSA partners with the Flinders University Health and Medical Research Institute to present the biennial Cancer Survivorship conference (alternating years with the Victorian Survivorship Conference). The 2021 meeting will be held 18-19 March 2021 as a hybrid meeting, online and face to face, in Adelaide. The theme is 'Life after cancer – redefined, reimagined and rebuilt.' It will include a mix of plenaries and workshops. Further details are at <https://www.survivorship2021.org/>.

In August, COSA partnered with the Australian Cancer Survivorship Centre (ACSC) and Cancer Council Victoria to deliver a webinar on the important role that

allied health plays in the care of cancer patients post-treatment. The session was very well attended, and well received. It's available at <https://www.petermac.org/education/survivorship-education>. We will look at opportunities to partner with aligned organisations to deliver further education.



We note also that ACSC has worked closely with eviQ Education to update and redesign the free Cancer Survivorship Education Course, which is hosted by eviQ: <https://education.eviq.org.au/courses/supportive-care/cancer-survivorship>

Survivorship research

Building capacity in survivorship research is a key element of the Survivorship Group's strategic plan. In July we were delighted to announce the appointment of three inaugural COSA Cancer Survivorship Research Fellows to help advance this agenda. Expressions of interest were initially sought for an early-career researcher to coordinate a study aiming to establish cancer survivorship research priorities within Australia. A number of high-quality applications were

received, and the review committee agreed to increase the number of Fellowships offered. Each project will help advance survivorship research and improve outcomes for all Australians after cancer treatment:

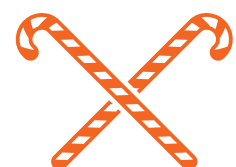
Fiona Crawford-Williams: Research priorities in cancer survivorship in Australia - this project will establish research priorities in cancer survivorship in Australia. In line with similar initiatives internationally, Fiona will lead a modified-Delphi survey to identify key priorities for future cancer survivorship research. Information will be gathered from our members and key stakeholders to develop a list of priorities for cancer survivorship research. We hope to complete this in 2020.

Carolyn Mazariego: Consensus guidelines on PROM implementation in Australia - this project will develop consensus guidelines for the minimum implementation of PROMs in routine cancer care in Australia. Carolyn receives additional expert guidance from the Survivorship Group's Patient PRO Working Group. The initial survey will launch in early 2021.

Julia Morris: Current survivorship-focused research in Australia. This project aimed to map current survivorship-focused research within Australia. The goal was to understand current research, as well as gaps in survivorship research, to inform and support future research efforts and collaborations. This work has been completed and we are now working to present and disseminate results.

Please don't hesitate to contact me with queries or for more information.

Michael Jefford
Chair, Survivorship Group
Michael.Jefford@petermac.org



CANCER SURVIVOR- SHIP

18-19 March
2021

Adelaide Convention
Centre and Online

20

A HYBRID
EVENT



LIFE AFTER CANCER
REDEFINED, REIMAGINED
AND REBUILT

Host Organisations



Welcome to Cancer Survivorship 2021

The 5th national Cancer Survivorship Conference will be a hybrid meeting, online and face to face, held 18-19 March 2021. The face to face components of the conference will be held at the Adelaide Convention Centre.

We are excited to create a collaborative forum to showcase innovation in survivorship care, research and policy. We hope to engage clinicians, researchers, policy-makers and consumers in insightful, bold and collegial conversations about life after cancer diagnosis.

The partnership between our host organisations, the Flinders University Health and Medical Research Institute (FHMRI) and the Clinical Oncology Society of Australia (COSA), ensures this conference reflects the latest and most relevant developments in cancer survivorship research and care.

As always, we want to push the envelope and in 2021 we hope to be more thought provoking and provocative than ever before! With the theme "LIFE AFTER CANCER – REDEFINED, REIMAGINED AND

REBUILT" the program will tackle some challenging concepts in survivorship including living with life limited disease, when cancer cannot be cured.

In feedback, delegates have told us they want more hands-on practical sessions, so we are dividing the 2021 program into a mix of plenaries and workshops. Some of the topics we'll cover include: Indigenous cancer survivorship; cognition, neurotoxicity and neuropathy; mental health; and practical issues such as finances, insurance and employment.

We also hope to provide ample meeting space and time for us to connect, recharge, and be inspired by being part of this like-minded community.

Help us make this meeting better than the last by joining us for discussions, deliberations and collaboration!



Professor Bogda Koczwara AM
BM BS FRACP MBioethics FAICD

Conference Convenor

Other Reports

The COSA Tele-Trials Project - A Pilot Implementation of the Australasian Tele-Trial Model



The COSA project to pilot the implementation of the Australasian Tele-Trial Model officially concluded on 30 September 2020. The pilot has demonstrated that tele-trials can be safely and ethically implemented and that an interconnected clinical trial system can be created through the Tele-Trial Model, resulting in more regional and rural sites acquiring clinical trial capabilities, and more patients accessing clinical trials closer to home without disrupting continuity of care. The pilot has also demonstrated that trial recruitment can be expedited and that a networked approach for rare cancer trials facilitated access to more patients.

At project commencement in August 2017 there were no tele-trials in Australia. The AGITG sponsored ASCOLT trial opened between Orange and Dubbo in November 2017 and the Eli Lilly sponsored MonarchE trial opened between Townsville, Cairns, Mackay, and Mt Isa in October 2018. There are now 10 tele-trials open to recruitment nationally and 3 closed to recruitment. A further 9 tele-trials are pending. 24 sites have

participated in tele-trials, 16 of which have been regional or rural. 150 patients have been enrolled in tele-trials. 135 of these patients live in regional and rural areas.

Significant regulatory reforms to support the implementation of the Model have been achieved in the last three years. Clinical trials are highly regulated and governments and regulatory authorities are risk adverse. Approval processes for NMA and SEBS took significantly longer than expected. Despite these challenges, tele-trials are now supported by both national SOPs and state specific tele-trial SOPs in NSW, Queensland, and Victoria. Queensland and Victoria have approved tele-trial subcontracts and a national tele-trial subcontract through MA is imminent.

The Tele-Trials Model was presented at major cancer and clinical trial conferences between 2018 and 2020 including ARCS, ACTA, COSA and ASCO Breakthrough. As mentioned in the December 2019 *Marryalyan*, a supplement to the *Asia-Pacific Journal of Clinical Oncology – The Australasian Tele-Trial Model: Lessons from Practice* was published in October 2019 on the Wiley Blackwell Online Library. The project also stimulated the Canadian Cancer Clinical Trials Network's initiative to create the Canadian Remote Access Framework for Clinical Trials which was released in May 2020.

Evidence from the COSA project to pilot the implementation of the Australasian Tele-Trial Model was used to support a MRFF grant application under the Rural, Regional and Remote Clinical Trial Enabling Infrastructure Program. In October the Federal Government announced grants totalling \$125 million over the next 5 years "to give patients access to clinical trials where they live" by bridging the metro-regional trials gap and addressing inequity in access to clinical trials for rural, regional and

remote patients. Included in this grant is \$75.2 million to the Department of Health, Queensland for the Australian Teletrial Program. The Australian Teletrial Program will oversee the establishment of Regional Clinical Trial Coordinating Centres (RCCCs) in Queensland, Western Australia, Victoria, Tasmania, South Australia and the Northern Territory. RCCCs will focus on removing the barriers to establishing tele-trials at satellite sites including infrastructure, equipment and training barriers as well as facilitate the coordination and operational activities of tele-trial clusters. Other grants also funded in the same round were \$18.6 million to the Border Medical Oncology Research Unit for the 'ReViTALISE Project', and \$30.6 million to the NSW Ministry of Health for the 'Improving access to innovative healthcare in rural, regional and remote NSW and ACT Project'. These projects also have a tele-trials component.

Tele-trials will now have the necessary funding, infrastructure, and government support to become mainstream in Australia increasing access to clinical trials for hundreds of patients living in regional and rural Australia and for patients with rare cancers.

We would like to thank MTPConnect which provided matched funding for the first two years of the project and our funding consortium partners for this project; Rare Cancers Australia, Cancer Voices NSW, Australian Institute of Tropical Health and Medicine, The Garvan Institute of Medical Research, The Walter and Eliza Hall Institute of Medical Research, Icon Group, St John of God Hospital, Medicines Australia, AbbVie, Jansen, Novartis, Pfizer, BMS, AstraZeneca, MSD and COSA.

**Sabe Sabesan and John Zalberg OAM
Co-Chairs, The COSA Tele-Trials
Project**

COSA Affiliated Organisation Reports

Australasian Gastro-Intestinal Trials Group



AGITG conducts clinical trials in gastro-intestinal (GI) cancer, and supports research through awards, grants, and events including our Annual Scientific Meeting.

Two new AGITG studies have been funded by the community this year. The first, FORECAST-1, was awarded the 2019 AGITG Innovation Fund grant. It is studying whether using new technology, known as Patient-Derived Tumour Organoids (PDTOs), can be used to model the effectiveness of anti-cancer therapies in the lab and better tailor each patient's treatment. It is enrolling patients with metastatic colorectal cancer.

The second study, RANDOMS, is a substudy of the MASTERPLAN trial for patients with pancreatic cancer. It is set to open in early 2021, aiming to uncover critical information on how to measure the impact of nutrition on survival outcomes for patients, and examine whether a fast and simple nutritional test called PGSGA can match the results provided by a complex and expensive CT body composition scan.

There has been incredible support from the community for GI cancer research this year. As a result our community-funded trials will grow in 2021, as we are able to offer three AGITG Innovation Fund Grants of up to \$200,000 each this year. The grant recipients will be announced in December.

AGITG event updates

Our first virtual **Annual Scientific Meeting** was held in August. A record number of attendees logged in to discuss the latest developments in GI cancer clinical research. International speakers Professor Kohei Shitara (National Cancer Center Hospital East, Japan) and Doctor Naureen Starling (The Royal Marsden Hospital, United Kingdom) delivered outstanding keynote addresses on gastric and colorectal cancer respectively.

A number of awards were presented at the meeting. We were pleased to congratulate:

- Professor Niall Tebbutt, recipient of the John Zalcberg OAM Award for Excellence in AGITG Research.
- Associate Professor Jeanne Tie, recipient of the Best New Concept Award.
- Doctor Fiona Paxton-Hall, recipient of the Merck-AGITG Clinical Research Fellowship at the Royal Marsden Hospital.
- Doctor Oliver Piercey, recipient of the Best Poster Award.
- Monash Health, recipient of the Outstanding Site Award.

Save the date for our 2021 Annual Scientific Meeting to be held in Melbourne on 12-15 October. For more information visit asm.gicancer.org.au.

The second **AGITG Idea Generation Workshop** was held in November, convened by Professor Martin Stockler and Associate Professor Lara Lipton. The workshop focused on early-stage oesophageal cancer research and four of the ideas presented at the workshop for new clinical research projects are now being progressed through the AGITG. Online, 450 AGITG members

and experts connected on the day, including members of the AGITG Scientific Advisory Committee and Upper and GI Working Parties. Despite the physical distance, there was a collegial, collaborative and interactive atmosphere to the Meeting.

AGITG trials open to recruitment

- ACTICCA-1: Adjuvant chemotherapy with gemcitabine and cisplatin compared to standard of care after curative intent resection of cholangiocarcinoma and muscle invasive gallbladder carcinoma.
- ASCOLT: Aspirin for Dukes C and high-risk Dukes B colorectal cancers: An international, multi-centre, double blind, randomised placebo controlled phase III trial.
- DYNAMIC-III: Circulating tumour DNA analysis informing adjuvant chemotherapy in stage III colon cancer: A multi-centre phase II/III randomised controlled study.
- DYNAMIC-PANCREAS: Circulating tumour DNA analysis informing adjuvant chemotherapy in stage III colon cancer: A multi-centre phase II/III randomised controlled study.
- DYNAMIC-RECTAL: Circulating tumour DNA analysis informing adjuvant chemotherapy in locally advanced rectal cancer: A multicentre randomised study.
- FORECAST-1: A study of the feasibility of organoid response assessment to define effective treatments for patients with colorectal cancer after failure of standard therapy.
- INTEGRATE II: A randomised phase III double-blind placebo-controlled study of regorafenib in refractory advanced gastro-oesophageal cancer.

- **MASTERPLAN:** A randomised phase II study of MFOLFIRINOX and stereotactic radiotherapy (SBRT) for pancreatic cancer with high risk and locally advanced disease.
- **MONARCC:** A randomised phase II study of panitumumab monotherapy and panitumumab plus 5-fluorouracil as first line therapy for RAS and BRAF wild-type metastatic colorectal cancer.
- **NABNEC:** A randomised phase II study of nab-paclitaxel in combination with carboplatin as first line treatment of gastro-intestinal neuroendocrine carcinomas.
- **RENO:** A prospective study of 'Watch and Wait' strategy in patients with rectal cancer who have developed a clinical complete response with concurrent chemo-radiotherapy.
- **SPAR:** A randomised, placebo-controlled phase II trial of simvastatin in addition to standard chemotherapy and radiation in preoperative treatment for rectal cancer.
- **TOPGEAR:** Trial of preoperative therapy for gastric and esophagogastric junction adenocarcinoma: A randomised II/III trial of preoperative chemoradiotherapy versus preoperative chemotherapy for resectable gastric cancer.

The Gutsy Challenge and Community Fundraising

The Gutsy Challenge is returning in 2021! This community fundraising program raises vital funds for the AGITG Innovation Fund grants and we are thrilled to be hosting treks again.

- In March 2021, Associate Professor Nick Pavlakis will lead the Mt Kosciuszko Gutsy Challenge to climb Australia's highest mountain at 2,228m. This one-day/two night trekking adventure will take you to the rooftop of Australia with sweeping 360 degree views across the Snowy Mountains.

- In September 2021, experience a stunning walk to the Twelve Apostles rock formations along the beautiful Victorian coastline. In this Gutsy Challenge led by Clinical Dietitian Belinda Steer and Associate Professor Lara Lipton, you will trek 46km of scenic coastline over four days.

There are places open on both treks for the unique opportunity to challenge yourself, take in some of the country's most iconic landmarks, and raise vital funds for GI cancer research.

A message from AGITG Chair, Dr Lorraine Chantrill

The AGITG has a rich history of conducting practice changing clinical trials and cutting edge translational research. We are a collaborative group that welcomes new ideas and out-of-the-box thinking.

I invite colleagues who are not currently members of the AGITG to join our Group. Our membership is strengthened by the range of specialists from varied disciplines including medical and radiation oncologists, surgeons, data managers, research nurses, gastroenterologists, biological scientists, pathologists, statisticians, trial coordinators and allied health specialists.

Membership is free. To apply for membership or refer a colleague contact the Chief Executive Officer, Russell Conley at russell@gicancer.org.au.

Lorraine Chantrill
Chair, AGITG

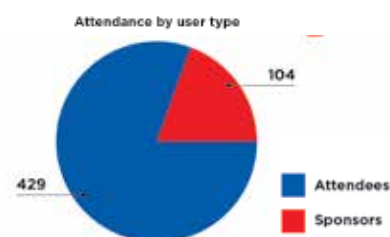


Australasian Leukaemia & Lymphoma Group



What a great success our second virtual Scientific Meeting was, spanning over the course of 12–16 October. It was a fantastic week of science and education for all ALLG and HSNZ members. This October Scientific Meeting we had a record number of 533 attendances, bringing ALLG Members, HSNZ Members, Staff, Sponsors and Foundation Supporters together as a blood cancer community.

Overall Attendance



The week in summary:

It was a fully packed five-day event for the Haematology community, with local key medical and scientific leaders as well as a broad range of guest and expert international presenters from all over the world. We welcomed to the Australia & New Zealand haematology community – Dr Katie Allen MP, Ajai Chari, Peter Borchmann, Gordon Cook, David Kurtz, and Konstanz Dohner.

We were thrilled to have Federal Liberal member Dr Katie Allen MP address the members live regarding current health affairs and offered a tremendous amount of her time to answer questions from the members. Co-chairs of the National Blood Cancer Taskforce, Prof John Seymour and Carrie Hillyard presented an update

on the progress of the National Action Plan within the opening session of the Scientific Meeting. We also heard the latest updates from ALLG Diamond, Gold and Silver sponsors.

The ALLG was very proud to be supporting the HSAZ Haematology Education Day and their presentation of the Pitney Fellow and the Baikie Symposium 2020. The ALLG congratulates Danielle Oh on receiving the 2020 Baikie Symposium award for best research.

The following day we had an ALLG first, the incredibly popular Classical Haematology Session chaired by Jeff Szer, exploring new opportunities in non-malignant haematology. Throughout the rest of the afternoon, the Clinical Trials Operations team presented on latest clinical trial updates, the NBCR and Tele-trials and their challenges, chaired by Aoife Dunne.

Thursday was a big day, with our best yet Plenary Program, spanning over the course of two full days. First up, we had the Lymphoma Working Party Plenary, chaired by Eliza Hawkes and Tara Cochrane and covering all things lymphoma. We heard a pre-recording from International Guest Speaker Prof Peter Borchmann from the University Hospital of Cologne, Germany.

Next was Supportive Care, chaired by Zoe McQuilten and Rob Weinkove, who brought members new updates on recent work in the area of IVIg research.

The ALLG AGM was held at 12 noon and had a significant number of members join to hear all about the ALLG's performance and its future directions.

The Laboratory Science Working Party Plenary took us into the afternoon, chaired by Jake Shortt who introduced research pioneer Prof David Kurtz from Stanford Cancer Centre who discussed MRD in Lymphoma.

The Myeloma Working Party provided a fulsome update of what's new, research in development and updates on trials in progress, chaired by Peter Mollee and with Prof Gordon Cook addressing members and providing an update on the establishment of the recent collaboration between the University of Leeds, UK, and the ALLG for clinical trial research.

The later afternoon held the ALLG Member Congratulations, chaired by Rob Weinkove who announced and congratulated the 10 year, 20 year and 30 year members.

To finish the night off, there was an update on national and international Vaccine Developments – including COVID-19 vaccines, chaired by Peter Mollee, Zoe McQuilten and Rob Weinkove who introduced the real game changers of vaccines and what the implications are for patients with haematological malignancies. The first speaker we heard from in this session was Damian Purcell, from The University of Melbourne, on Vaccines and emerging issues with immune

escape mutations. The second speaker was Paul Young from The University of Queensland, discussing the topic of Vaccine Development Australia – UQ/ CSL/Sequera. Finally, Zoe McQuilten from Monash University presented on Therapeutics, the Australian Convalescent Plasma Trial. Thank you to each of the speakers for their extremely informative presentations.

The Working Party Plenary session continued into Friday, with CLL updates being the first for the day, chaired by Stephen Mulligan and Mary Ann Anderson, who launched the new CLL08 trial proposal. Next up was the Transplantation and Cellular Therapies session, chaired by Nada Hamad and Duncan Purtil who brought forward a refreshing program that included six abstract presentations from the ABMTRR.

CML and MPN session was chaired by David Ross and David Yeung who launched the new CML13 Asciminib trial.

Our final Working Party session, ALL, AML and MDS was chaired by Andrew Wei who updated us on the latest INTERCEPT progress and who warmly welcomed Prof Konstanze Dohner from Ulm University, Germany, to the session. Prof Dohner spoke to Molecular Genetics of AML and provided an update of the HOVON/ AMLSG trial correlative research.

Fun Facts!

In the lead up to the Scientific meeting and throughout, we received:

133 PowerPoint Presentations
1821 Presentation Slides

ALLG May 2021
SAVE THE DATE

ALLG 2021 Virtual Scientific Meeting
10-14 May 2021

Delaine Smith
CEO, ALLG



Australia and New Zealand Sarcoma Association



With COVID-19 cases stable across Australia resulting in the easing of restrictions, the Australia and New Zealand Sarcoma Association (ANZSA) continues to operate in this “new normal” with our research and clinical trials as priorities.

ANZSA Virtual ASM 2020

While it was unfortunate that we were unable to organise a face-to-face Annual Scientific Meeting (ASM) this year due to COVID-19, we held our first virtual ASM via Zoom Webinar on 8–9 October.

It was a success as we hosted over 250 local and international delegates over the two days. This year’s ASM theme was “Sarcoma: What’s New in 2020”.

This year we had our inaugural “The Professor Martin Tattersall Lecture” delivered by Dr Angelo Paolo Dei Tos, Professor of Pathology, University of Padua School of Medicine and Director, Department of Pathology, Azienda Ospedaliera Universitaria di Padova, Italy.

This plenary lecture was named in honour of the late Prof Martin Tattersall AO, whose work and leadership was crucial to ANZSA and the sarcoma community.

Dr Paolo’s lecture, titled “What’s new in 2020 (WHO classification of soft tissue tumours)”, provided an update on the classification of soft tissue sarcomas which was followed by a panel discussion with pathologists from Australia and New Zealand.

On the second day of the ASM, Dr Kristy Weber, Chief of Orthopaedic Oncology at Penn Medicine and Director of the Sarcoma Program at the Abramson Cancer Center in Philadelphia, USA, and the first woman President of the American Academy of Orthopaedic Surgeons (AAOS), spoke on “Kids, dogs, lesions, and lumps: Current challenges and future directions in sarcoma”.

Throughout the two days we had local sarcoma specialists from various disciplines, and researchers, providing updates in their fields of expertise on the challenges and advancement of sarcoma diagnosis and treatment.

We thank all our ASM sponsors, the organising committee, speakers and delegates (local and international) for making this first virtual ASM a success.

Sarcoma Guideline Working Group

ANZSA is currently working on updating and refreshing the Sarcoma Guidelines for clinical practice using NHMRC and GRADE methodology to ensure high quality guidelines based on current evidence. The working group is represented by a multidisciplinary team of sarcoma specialists and consumers to provide a comprehensive take on the guideline topics.



Database Working Group

A Sarcoma Database Working Group (DBWG) was formed in Q1 2020 after a constructive discussion at the preceding Scientific Advisory Meeting,

acknowledging the importance of a committed driving force behind database-related projects and research output. This group consists of five medical oncologists, one surgeon, one radiation oncologist and four data managers from four sarcoma referral centres in Australia. The group will meet quarterly to generate research questions to build into multi-site study and to track the progress of active studies. As the sarcoma data from seven sarcoma services across five states and territory mature, many more opportunities will arise to generate patient-centred evidence on oncological care that can better guide treatment decisions and policies.

ANZSA Clinical Trials and Research

We have three ongoing clinical trials, two clinical studies and one database project open for patient recruitment:

- **SARC032** – A Phase II randomised controlled trial of neoadjuvant pembrolizumab with radiotherapy and adjuvant pembrolizumab in patients with high-risk, localised soft tissue sarcoma of the extremity. Open for recruitment across three sites in Australia.
- **NORTH** – A Phase II study of panobinostat in paediatric adolescent and young adult patients with solid tumours including osteosarcoma, malignant rhabdoid tumour and neuroblastoma. This clinical trial is funded by the NH&MRC and jointly run with ANZCHOG. It is now open for patient recruitment in 15 sites across Australia.
- **rEECur** – International randomised controlled trial of chemotherapy for the treatment of recurrent and primary refractory Ewing sarcoma. This clinical trial is funded by a grant from CanTeen and is now open for patient recruitment in both adult and paediatric sarcoma centres across ANZ. It is now open for patient recruitment in 15 sites across Australia.

- **ISKS** – The International Sarcoma Kindred Study: a global multi-site prospective cancer genetics study. This project aims to establish an international database and biospecimen repository to be used as a clinical and research resource. It is now open at five sites across Australia.
- **SMOC+** – A surveillance study utilising whole-body magnetic resonance imaging and other surveillance procedures in people with germline cancer gene mutations to investigate the prevalence and incidence of investigable lesions. It is now open at six sites across Australia.
- **RESAR** – Retroperitoneal Sarcoma Registry (RESAR): a prospective collection of primary retroperitoneal sarcoma patient's clinical, radiological and pathology data for the TransAtlantic Retroperitoneal Sarcoma Working Group. It is now open at two sites in Australia.

For more details about the projects, site locations or want to be involved in the patient recruitment process, write to us contact@sarcoma.org.au or visit sarcoma.org.au/projects.

Sarcoma Awareness Month

July was a busy month for ANZSA as we organised many initiatives in conjunction with Sarcoma Awareness Month. Our webinar topics on clinical trials, managing practical issues, and survivorship issues were well received by health professionals and consumers alike. Similarly, Dr Denise Caruso, ANZSA CEO, was interviewed by Rare Cancers Australia and the Cooper Rice-Brading Foundation to raise awareness for sarcoma and ANZSA. We are thankful to our partners and to all who participated.

Vale Prof Martin Tattersall AO

Lastly, we were saddened to hear about the passing of our friend, mentor and colleague Prof Martin Tattersall AO. Prof Tattersall was a founding member and Board Director of ANZSA (then known as ASSG). It was his vision to bring together the adult and paediatric sarcoma researchers around Australia and New Zealand to improve the outcomes of patients with sarcoma.

Prof Tattersall's work will continue to influence sarcoma care in Australia and globally. His desire to ensure progress in sarcoma biology and treatments, including paediatric types, ensures he is recognised as a holistic sarcoma pioneer for all.

Looking at the year we have had, we are grateful that ANZSA is in a fortunate position to work on our goals and vision, albeit with some minor disruption. We are thankful that the sarcoma community (clinical specialists, researchers, consumers, etc) stuck together in unity to ensure that our clinical trials and research goals were met.

We also want to thank all our partners, philanthropic groups and members for their continued support, generosity and trust in us and the work we do. Happy Holidays and Merry Christmas in advance!

Denise Caruso
CEO, ANZSA



Australian and New Zealand Children's Haematology Oncology Group



New ANZCHOG Chair

We are excited to announce the appointment of Professor Nick Gottardo as ANZCHOG Chair. Professor Gottardo is a highly experienced paediatric neuro-oncologist and Head of the Paediatric Oncology Department at Perth Children's Hospital. He is also an internationally renowned scientist, leading the Brain Tumour Research Team at the Telethon Institute and is the Study Chair of a number of investigator-initiated, multi-site clinical trials. Professor Gottardo also brings considerable national and international ties, and we look forward to working with him to further develop ANZCHOG's trial portfolio and our influence as the peak body for Australian and New Zealand paediatric oncology health care professionals.

Professor Gottardo steps into this role as Dr Chris Fraser has completed his term as Chair, having served in this role for six years and as an ANZCHOG Board member for 10 years. We would like to acknowledge Dr Fraser's significant achievements during this time, leading the expansion of the ANZCHOG Office and enhancing our collaborative ties with international trial consortia and key national stakeholders.

Clinical trial update

ANZCHOG's clinical trial portfolio continues to grow, providing national sponsorship to over 20 trials available throughout Australia and New Zealand. We are planning to open another three trials in early 2021; two are the first trials from two early phase paediatric brain cancer consortia based in the United States, further growing our strong international partnerships and providing further trial opportunities in the future. ANZCHOG will also open the TiNT trial, a phase II study of trametinib in paediatric, adolescent and young adult patients with neurofibromatosis type 1 associated plexiform neurofibromas or progressive optic pathway gliomas. TiNT was developed by Australian and New Zealand researchers, and will provide access to a promising investigational agent for these patients.

We gratefully acknowledge the support provided by our funding partners, which has enabled us to increase access to novel treatments for children diagnosed with a range of cancers. More information about our trials and our generous supporters can be found on our website: <https://anzchog.org>.

We have been very fortunate that COVID-19 has had minimal impact on our trial capacity throughout 2020, with all paediatric oncology centres continuing to recruit to open trials. To ensure we understand the impact of COVID-19 in higher risk cohorts of children (such as those with cancer, immunodeficiency or following a stem cell transplant), ANZCHOG is partnering with Murdoch Children's Research Institute and the Australian Centre for Infections in Cancer to undertake a surveillance study to evaluate symptoms and outcomes in these vulnerable children. The study, led by Dr Gabrielle Haeusler, is open at all Australian and New Zealand paediatric oncology centres, as well as a number of international sites. More information is available on ANZCHOG's website.

ANZCHOG ASM update

In 2021, ANZCHOG's Annual Scientific Meeting is expected to be held in June with dates and format currently being finalised. It will feature international and local keynote speakers. More information will be available in December.

Chris Fraser
Chair, ANZCHOG

Australian and New Zealand Head & Neck Cancer Society



The Australian and New Zealand Head and Neck Cancer Society (ANZHNCS) is the peak body in Australia representing the multidisciplinary health team who promote quality care for all head and neck cancer patients. Through leading a multi-disciplinary approach to education, research, clinical care and advocacy, we aim to minimise the impact of head and neck cancer on patients and their families. On a larger scale, the ANZHNCS is the Australian representative on the International Federation of Head and Neck Oncologic Societies (IFHNOS).

At the conclusion of 2020 we certainly have not achieved our original "to do" list for the year. A number of our members have been involved in the COVID-19 response in their respective states, territories and countries, as the procedures that we are involved in daily in the treatment of head and neck cancers are deemed as potentially aerosolising. As there is a higher risk of transmission with respiratory

viruses due to the anatomical area of our interest, a number of our members across the MDT have written COVID-19 policies for the clinical care of head and neck cancer patients. Thankfully, the majority of us have not needed to initiate these plans but we have been particularly mindful of our colleagues in Victoria and overseas — through their experience we have been able to modify our plans as more evidence became available. Although for most of our clinicians relatively normal operations have resumed, it will be interesting to see in the coming months whether there has been any impact on the timeliness of diagnoses of head and neck cancers. For most services, MDT meetings have continued remotely due to the number of clinicians that are required to treat head and neck cancer, ensuring compliance with the ongoing restrictions on physical spacing. The ANZHNCS strongly advocates that all patients be treated through an MDT and have a list of current MDTs available on our website.

Meetings and Education

As documented in our report earlier this year, the Executives of the ANZHNCS and New Zealand Association of Plastic Surgeons (NZAPS) decided early in the year to postpone our ASM which was planned to take place in Queenstown, 5–9 August. This decision was not made lightly as it is the major event on our calendar. However, we felt the responsibility to minimise financial loss and disruption for our invited speakers. Our current plan is to be able to meet in Queenstown in August 2021, if the Australia and New Zealand bubble allows. However, we are also looking at other contingencies should we need to have at least some of the meeting as a virtual event.

Although our meeting plans have been curtailed, we have arranged some Zoom meetings to enable collaboration between our members. We are delighted to be hosting an

Ethics evening in November with two guest speakers — Dr Linda Sheahan and A/Prof George Skowronski from South East Sydney Local Health District Clinical Ethics service. We have had great interest in this event and we are hoping to include education regarding ethical decision making as a regular event for our MDT members. Additionally, it appears likely that we will be unable to attend the American Head and Neck Society (AHNS) meeting in July 2021 with our colleagues. We are therefore looking at the possibility of running some webinars to promote cross learning in treatment of complex head and neck cancer malignancies.

We will continue to update our website with information regarding the plans for all our education events and warmly welcome any members of COSA who are interested to join us.

AGM and New Board Members

On a positive note, 2020 has ensured that we have all had an escalated learning curve and have had to embrace new technologies including Zoom! Ordinarily we have our Annual General Meeting at the Annual Scientific Meeting, this year we held it via Zoom the week that we all should have been meeting in Queenstown. Surprisingly, the meeting was our best attended and was completed without any hitches! It has led us to think that there are some advantages to separating it from the ASM and having it accessible through other mediums. One of the major aims of the Board is to review and appoint to vacant positions ensuring that we have representation where possible, of both the multidisciplinary members and geographical regions that we represent. Following our AGM we have welcomed three new members join our Board:

- Dr Julia Crawford, Head and Neck Surgeon, Sydney
- Dr Eric Khoo, Radiation Oncologist, Gold Coast
- Dr Felix Sim, OMFS, Melbourne

Research Awards

Like many charities this year, the Australian Research Foundation of ANZHNCs has certainly seen a reduction in donations, but pleasingly, following review of applications by the scientific panel, recommendations for funding new projects have been ratified by the ANZHNCs Board. The following are this year's recipients:

1. \$20,000 - Dr Charbel Darido, Profiling the Oral Microbiome in Novel Barrier Impaired Mouse Models of OSCC (General Fund)
2. \$10,000 - Associate Professor Ruta Gupta, Young Oral Cancer (Lauren Barrett Fund)

Become a member

The ANZHNCs is committed to a strong affiliation with COSA and are grateful that this allows us to ensure that the needs for head and neck cancer are represented on the national oncology agenda. We would like to invite any members of COSA who work in head and neck cancer to join the ANZHNCs and help guide the future for head and neck cancer services. Information can be found on our website www.anzhncs.org.

We remain mindful of our colleagues overseas who are currently dealing with ongoing high COVID-19 numbers and further lockdowns. As a Society, we will advocate to retain some of our new technology and service delivery models moving forward to allow better flexibility for our patients. Certainly travel and conference plans have been severely affected this year and we hope that it is not too long before we are able to collaborate with our multidisciplinary colleagues at international meetings and continue to share and learn together again.

Julia Maclean
Immediate Past President, ANZHNCs

Australian and New Zealand Urogenital & Prostate Cancer Trials Group



This has been a challenging year for ANZUP as for everyone else, requiring substantial changes in how we work, how we develop our trial concepts, how we support our members, and how our trials are conducted. It is a testament to everyone's commitment that we have been able to continue our programs very effectively.

The ENZAMET clinical trial (ANZUP 1304) continues to have an impact and to be recognised worldwide. Last year the trial featured in the ASCO main plenary session, and these practice changing results generated worldwide interest both through extensive media coverage and the medical community. In 2020 the achievements of this trial continued with ENZAMET featuring in ESMO's Clinical Practice Guidelines for 2020. This was as well as being named in the ASCO Annual Report on Progress Against Cancer earlier in the year as one of its Clinical Cancer Advances for 2020. ENZAMET contributed to registration of the agent for this indication by the FDA in December 2019, and has been incorporated into US and European treatment guidelines.

Another great achievement of 2020 was our TheraP trial (ANZUP 1603) that featured as an oral presentation at the ASCO 2020 virtual meeting on Friday 29 May 2020, with Michael Hofman presenting the interim results. TheraP

is the first randomised trial comparing ¹⁷⁷Lu-PSMA-617 (Lu-PSMA), a novel radioactive treatment, to the current standard-of-care chemotherapy called cabazitaxel for men with metastatic castration-resistant prostate cancer. TheraP is a partnership between ANZUP and the Prostate Cancer Foundation of Australia (PCFA) with support from the Australian Nuclear Science and Technology Organisation (ANSTO), Endocyte (now part of Advanced Accelerator Applications, the radioligand business of Novartis), Movember, The Distinguished Gentleman's Ride, It's a Bloke Thing and CAN4CANCER, and the University of Sydney's NHMRC Clinical Trials Centre provided central study coordination. We are very grateful to all the investigators, trial coordinators and patients and their families for their participation. You can read more about TheraP and all our other trials on the ANZUP website: <https://www.anzup.org.au/content.aspx?page=clinicaltrials>.

outstanding national and international faculty will lead discussions around the challenges and opportunities we face as we work together to improve access to clinical trials, particularly in light of the challenges of COVID-19.

We continue to plan and hope that our 2021 ASM will see us back to a face-to-face meeting. We are planning to hold the ASM in Adelaide on 18-20 July, ably led by our 2021 convener A/Prof Nick Brook. So save the date and we hope we can see you in person!

ANZUP's trial portfolio continues to expand. We currently have nine ANZUP-led and two co-badged trials in recruitment, including DASL-HiCaP, ENZA-p and #UpFrontPSMA that all opened during COVID-19.

DASL-HiCaP (ANZUP 1801) is an ANZUP-led randomised phase III trial of adding darolutamide to androgen

ENZA-p (ANZUP 1901) is an ANZUP-led randomised phase II trial using PSMA as a therapeutic agent (Lutetium-PSMA) and prognostic indicator (PSMA-PET) in men with metastatic castrate-resistant prostate cancer treated with enzalutamide (ANZUP 1901). This study is being led by A/Prof Louise Emmett from St Vincent's Hospital in Sydney. The study aims to recruit 160 patients across 12 sites, and so far has recruited 11 patients and opened at five sites.

#UpFrontPSMA is an ANZUP co-badged Randomised Phase 2 Study of Sequential ¹⁷⁷Lu-PSMA617 and docetaxel versus docetaxel in metastatic hormone-naïve prostate cancer. This study is being led by Prof Michael Hofman and the study aims to recruit 140 patients across 11 sites, and so far has recruited nine patients and opened at four sites.

On Monday 26 October ANZUP hosted the 2nd Advanced Prostate Cancer Consensus Conference (APCCC) Asia-Pacific (APAC) Satellite Symposium meeting, the first time held virtually. The meeting involved 25 multidisciplinary clinicians from 14 countries: Australia, Hong Kong, India, Indonesia, Japan, Malaysia, New Zealand, Philippines, Singapore, South Korea, Taiwan, Thailand, Turkey and Vietnam. Participants were selected based on their expertise in the management of advanced prostate cancer in their respective region.



The TheraP trial post ASCO discussion

As this publication goes to print ANZUP is preparing for our first ever virtual ASM. We have an impressive two day program planned, including a stellar international speaking line-up featuring Cristiane Bergerot, Alison Birtle, Robert Bristow, Felix Feng, Silke Gillissen, Alicia Morgans, Tom Powles, Chris Sweeney and Bertrand Tombal. Popular sessions include the Nurses and Allied Health Session, MDT Master Games, ANZUP Symposium, ANZUP in Conversation, trial updates, the hotly anticipated ANZUPx, as well as virtual poster discussant rooms. The

deprivation therapy and definitive or salvage radiation in high risk, clinically localised prostate cancer. Study Co-Chairs are Prof Chris Sweeney and A/Prof Tamim Niazi and the study aims to recruit 1100 patients from close to 100 sites across Australia, New Zealand, US, Canada, UK and Ireland. In April, in the midst of COVID-19 the study opened across Australia and is now open in 22 sites, and as of 19 November it has recruited an impressive 69 patients to date. We anticipate New Zealand to open shortly, and the US, Canada, UK and Ireland to open in early Q1, 2021.



Advanced Prostate Cancer Consensus Conference (APCCC)

The purpose of APAC APCCC 2020 was to:

- provide an opportunity for real-world consideration of the consensus recommendations from 2019 St Gallen Advanced Prostate Cancer Consensus Conference (APCCC) held in Basel, Switzerland, as they apply in the Asia-Pacific region;
- consider any additional evidence published since APCCC 2019 that may influence consensus recommendations;
- provide an opportunity to consider the impact of COVID-19 on management of advanced prostate cancer in the Asia-Pacific region.

The meeting was a great success and focused on five topics discussed at APCCC viewed as most critical for the Asia-Pacific region, as well as an additional discussion about the impact of COVID-19. We are in the process of preparing a paper from the discussions to be submitted for publication in the BJUI.

Due to COVID-19 we had to cancel both our Melbourne and Sydney Pedalthon events for 2020, and we decided to hold our inaugural virtual Below the Belt #YourWay Challenge. During the month of September, 237 challengers and 43 teams ran, walked, cycled and swam 72,783 kms across Australia, New Zealand, UK and beyond, and raised an extraordinary \$173,000 for ANZUP's clinical trial research via the Below the Belt Research Fund, to support the important work of ANZUP clinicians and researchers during isolation and into the future.

There were plenty of laughs and competitive mini challenges but everyone was dedicated to the challenge and to raise awareness and much needed funds for below the belt cancer research. And at the same time keeping both mind and body healthy.

Our membership base continues to grow and is now close to 1800, and these people all take time out of their busy work and personal lives to help support ANZUP and make a difference to the lives of people affected by GU cancers.

More than ever we are grateful to our dedicated and committed membership for both their ongoing support and dedication to ANZUP, even in the light of both personal and professional adversity that we have all faced this year.

Ian Davis
Chair, ANZUP

Australia New Zealand Gynaecological Oncology Group



Improving life for
women through
cancer research

2020 has been a good year for ANZGOG and its research portfolio, although definitely challenging at times coping with COVID-19. We have more trials underway than at any prior time. During the year we opened two new trials – STICs and STONES, and IGNITE – and completed recruitment on the MOCCA study. We were excited with the news that three ANZGOG-led studies were awarded grants totalling \$4.3m by the Medical Research Future Fund - HyNOVA, ADELE and PARAGON II. In addition to this, our translational research initiative TR-ANZGOG was officially launched in October with aims to accelerate future gynaecological cancer research.

ANZGOG also passed its 20 year milestone of conducting clinical trials in Australia and New Zealand, with a

number of other milestones achieved with over 1065 members; 60 studies supported over this time including 37 clinical trials with over 4000 patients.

TR-ANZGOG launches

Translational ANZGOG, 'TR-ANZGOG', is a significant ANZGOG research initiative and will support ANZGOG's goal to develop world-class translational research in gynaecological cancers. The initiative was officially launched by Professor Anna DeFazio at ANZGOG's first virtual Annual General Meeting on 22 October.

In consultation with sector experts across diverse specialities, TR-ANZGOG has developed the key processes, policies and resources needed to integrate TR-ANZGOG with prospective ANZGOG trials.

Find out more about TR-ANZGOG [here](#).

Ovarian Cancer National Action Plan

ANZGOG united with Ovarian Cancer Australia and the Australian Society of Gynaecologic Oncologists (ASGO) to develop and launch the **Ovarian Cancer National Action Plan (NAP) 2020 – 2025**. Collaboration is a strategic goal for ANZGOG and working with advocacy groups and other clinical and research organisation will ensure we raise awareness for ovarian cancer research, develop alliances and impact on improving life for women and their families.

AtTEnd opens to recruitment

The AtTEnd study is now recruiting in Australia. AtTEnd is a double blind randomized placebo controlled trial of atezolizumab in combination with paclitaxel and carboplatin in women with advanced/recurrent endometrial cancer. The trial is led internationally from Italy by Mario Negri Gynecology

Oncology Group (MaNGO) - Istituto di Ricerche Farmacologiche “Mario Negri” and is led by ANZGOG and Principal Investigator Yoland Antill in Australia. For more information on AtTend, visit our website.

ANZGOG’s research receives funding

It’s congratulations all round to a number of ANZGOG members for their successful Medical Research Future Fund (MRFF) grant initiatives in reproductive and gynaecological cancers to be conducted under the ANZGOG banner. Professor Linda Mileshekin, Associate Professor Rhonda Farrell, and Associate Professor Chee Khoon Lee achieved a total of \$4.3 million in funding, allocated to projects in the **recent MRFF grant announcement** via Health Minister Greg Hunt MP.

ANZGOG were also able to achieve philanthropic funding for Associate Professor Pamela Pollock, whose pre-clinical study into endometrial cancer has been awarded philanthropic grant funding.

Endometrial Cancer Workshop

ANZGOG held a stimulating Endometrial Cancer Research Workshop in September to identify its research goals for endometrial cancer. 55 researchers attended and demonstrated outstanding interest in driving a wide range of new research activities and collaborations. Attendees came from every state in Australia and also New Zealand, representing surgical, radiation oncology, physicians, quality of life and pre-clinical and translational researchers, as well as consumers. A steering committee has been formed with the goal of developing the initiative in 2021.

ANZGOG’s Annual Scientific Meeting 2021

ANZGOG invites you to join us at the ANZGOG Virtual Annual Scientific Meeting 2021. The conference will be held over two days, Friday 5 February for the popular Pure Science Symposium, and Friday 12 February for the main conference program.

Three distinguished international speakers will join from overseas:

- Dr Amit Oza (Medical Oncologist, Princess Margaret Cancer Centre, Toronto, Canada)
- Dr Wui-Jin Koh (Radiation Oncologist, National Comprehensive Cancer Network, Pennsylvania, USA)
- Prof Nicoletta Colombo (Gynaecological Oncologist, University of Milan, Italy).

The ANZGOG Virtual ASM 2021 program theme is:

From Research to Clinical Practice - Patient-Reported Outcomes in Gynaecological Cancers

We look forward to bringing this interesting and dynamic program to you virtually in 2021.

Early bird registration closes 21 December, register your place [here](#).

ANZGOG is celebrating 20 years of research in 2020 with the largest number of open trials and members in Australia and New Zealand and a strong focus on further new research development and collaborations, both locally and globally. Despite the difficulties this year presented, ANZGOG and its members have plenty to look forward to in 2021 with promising new trials in the pipeline, an exciting endometrial cancer initiative and our Virtual Annual Scientific Meeting.

I wish to thank our many committed members who give their time voluntarily and our staff for helping to ensure ANZGOG has continued to conduct its trials during this difficult time.

Philip Beale
Chair, ANZGOG



SAVE THE DATE

Friday 12 February 2021

*Plus Pure Science Symposium:
Friday 5 February 2021*

**From Research to Clinical Practice -
*Patient Reported Outcomes in Gynaecological Cancers.***

ANZGOG | **VIRTUAL ASM 2021**

Breast Cancer Trials



Our Response to COVID-19

It is hard to avoid superlatives when talking about 2020 but certainly a year that started out like any other became a challenging period for everyone in Australia and New Zealand.

Breast Cancer Trials (BCT) initiated a three-month work-from-home arrangement for all of our staff based in the head office in Newcastle from mid-March. At the height of the coronavirus pandemic we saw participating institutions suspend recruitment to trials, as resources in hospitals were required elsewhere, and attempts were made by everyone to minimise patient contact.

Our staff have worked very hard throughout the year to keep our core activities of research, fundraising and business going, and it provided us with time to reflect and initiate new ways of working, managing trials, fundraising and communicating, that we will continue to pursue into 2021.

As we approach the end of the year, we have seen recruitment to BCT trials return and, although there is still an 'unknown' factor in when a vaccine will be available for COVID-19 and safety measures still remain in place at institutions, we remain optimistic in the pursuit of our mission, to conduct the highest quality clinical trials research that improves outcomes for people affected by breast cancer.

We thank all of our members for their ongoing support and commitment, and hope that all of our friends and colleagues are able to have a well-deserved break over the holiday period.

New Clinical Trials

Breast Cancer Trials opened three new clinical trials in 2020:

- **CAPTURE** – This is an Australian clinical trial which will enrol 140 patients. It is open to both women and men diagnosed with Oestrogen-receptor (ER) positive and Human Epidermal Growth Factor Receptor 2 (HER-2) negative breast cancer that has returned after treatment with a CDK4/6 inhibitor (such as ribociclib, palbociclib, abemaciclib). The CAPTURE clinical trial will investigate if treatment with a PI3K inhibitor (alpelisib), in combination with fulvestrant, will improve outcomes for patients with metastatic breast cancer when compared with standard treatment. The Study Chair is Professor Sarah-Jane Dawson.
- **Breast MRI Evaluation** – This is an Australian study which will enrol at least 400 patients. It is open to women diagnosed with breast cancer and where the medical treatment team suggest that a Magnetic Resonance Imaging (MRI) of the breast will help plan treatment. This study aims to find out if having a breast MRI after being diagnosed with breast cancer might change plans for treating the breast cancer and how this might affect patient outcomes. The Study Chair is Professor Christobel Saunders.
- **Neo-N** – Neo-N is an international clinical trial which will enrol up to 108 participants. It is open to both women and men diagnosed with unilateral triple negative early breast cancer. The Neo-N clinical trial will investigate if using an immunotherapy drug alone prior to

the combination of immunotherapy and standard chemotherapy is safe and effective in treating breast cancer before surgery. The BCT Study Chair is Professor Sherene Loi.

New Board Director

Professor Sherene Loi was elected to the BCT Board of Directors this year and is a member of BCT Scientific Advisory Committee. Professor Loi is a Medical Oncologist specialising in breast cancer treatment as well as a clinician scientist with expertise in genomics, immunology and drug development. She is the Head of the Translational Breast Cancer Genomics and Therapeutics laboratory at the Peter MacCallum Cancer Centre, Melbourne, as well as Consultant Medical Oncologist in the Breast Service and head of the Breast Cancer Clinical Trials Unit. Professor Sunil Lakhani and Dr Richard Isaacs were re-elected to the Board.

Join the Breastolution

Breast Cancer Trials recently launched a new campaign called Breastolution, which aims to promote the game changing BRCA-P clinical trial. This is a world first study to prevent breast cancer in women who carry a BRCA1 gene mutation. The awareness campaign hopes to raise funds to conduct the trial in Australia and to encourage participation in the trial. Recruitment posters and brochures about the trial are available by contacting media@bctrials.org.au. To find out more about the BRCA-P clinical trial and the Breastolution campaign, visit www.breastolution.com.au.

Save the Date – Annual Scientific Meeting

The 2021 Annual Scientific Meeting will be held from 28-30 July 2021. More details about the event will be available in the New Year.



The Breast Cancer Trials Podcast

Stay up to date with research news and breast cancer topics by listening to the Breast Cancer Trials Podcast. You can search for BCT podcasts on Apple Podcasts or Spotify, or they are available on our website at www.breastcancertrials.org.au.

Bruce Mann
Chair, BCT

Cancer Nurses Society of Australia



The past six months has seen CNSA focused on stabilising and securing our membership base and reinvigorating our online engagement through our digital platforms – including our new newsletter, our weekly webinar series and a new mobile CPD app.

We have also seen five new Directors appointed to the Board following our AGM; and are excited to embark on the next 12 months with key focus areas being workforce planning and education frameworks.

Trial membership implemented

We all know the last six months have been a whirlwind of confusion, stress and anxiety as we've battled a global pandemic. It has impacted the economy, the healthcare system, families, patients, livelihoods and so much more.

As a nursing organisation that operates purely for the benefit of our members, we recognised this was a time to open up our community and provide support for any and all that needed to access education, information and resources.

The three month free membership saw close to 350 Cancer Nurses receive access to our online digital resources, including our new national webinar series, and has seen our voice shared across health organisations nationally.

National Webinar Series

As a result of COVID-19, CNSA also introduced a weekly webinar program – it is live and practical and delivered directly to our members every Tuesday evening.

The series has been a mix of practical online sessions to enhance our member's personal and professional development, combined with interactive webinars focused on specific cancer types to develop their clinical knowledge.

Recordings of every session are available online in the CNSA Member Centre – and we encourage members to watch them back in their own time or share with their staff to increase their knowledge. With topics covering telehealth, end of life planning, immunotherapy, medical legal issues, wellbeing, medicinal cannabis and so much more, we have seen fantastic engagement across the diverse offering.

All of our content has been curated for cancer nurses and there are nearly 30 videos currently available. These will be a mainstay of CNSA education going forward, to complement our face-to-face events and Annual Congress.

Australian Women's Health Diary

The Australian Women's Health Diary is one of key fundraising activities in the year and since the first edition in 1999, the diary has raised \$16.2 million in donations to support the research of Breast Cancer Trials. When you buy the diary, not only will you be helping people diagnosed with breast cancer every day, but you'll have the perfect organiser for the year ahead with all the latest expert health and wellbeing advice at your fingertips. Visit www.breastcancertrials.org.au/health-diary to find out more or to buy the diary for yourself or as a gift for someone special.



New CPD app launched

CNSA was very excited to launch our newest member benefit in August – a new Mobile CPD App and relaunch of the elearning platform. With thanks to AstraZeneca and in partnership with the WCEA (Partner of the ICN), the benefits include:

- Resources from internationally respected educators
- Download and study courses offline via the mobile
- An Education Tracker to store all your CPD certificates
- Access to a new healthcare community called AJA

AJCN Published

In May, 2020 we published Volume 21, Issue 1 of the Australian Journal of Cancer Nursing (AJCN), with the issue including:

- Standardisation of systemic anti-cancer therapy (SACT) prescription forms: a pre-post audit evaluation
- What cancer survivorship services do young people want?
- Implementing evidence-based supportive care for patients with skin toxicity associated with epidermal growth factor inhibitors in an ambulatory care setting

If you are passionate about cancer nursing and wish to contribute to the ongoing development of the cancer nursing profession, we invite you to consider becoming a peer reviewer of manuscripts submitted for publication.

Board Update

Following the Annual General Meeting, the CNSA was delighted to welcome Meredith Cummins, Anne Mellon,

Emma Cohen and Gabby Vigar as newly elected Directors and have Professor Kate White endorsed as an Appointed Director for a three year term. As per CNSA's constitution, the Board appointed the Officer Bearers for the next 12 months, with Lucy Gent and Carmel O'Kane retaining the President and Vice President positions respectively.

We also restructured and redistributed the Director portfolios that were implemented 18 months ago, after taking the time to reflect on what has worked and what can improve so that we can realise strategic and operational success.

Advocacy & Representation

From an advocacy point of view, we have been busy working on a range of consultations and position statements, and had active representation on two major taskforces – one in conjunction with Cancer Australia focused on the management of early breast cancer and the other in collaboration with the Leukaemia Foundation creating the National Strategic Action Plan for Blood Cancer.

In this time, Cancer Australia has launched a new, comprehensive digital resource, Guidance for the management of early breast cancer, providing health professionals with around 200 up-to-date, evidence-based recommendations and practice points to lead to optimal outcomes for women and men with breast cancer in Australia.

We have also seen the release of the National Strategic Action Plan for Blood Cancer - a blueprint to coordinate and accelerate national efforts to improve survival and quality of life for people diagnosed with blood cancer and to support their carers and families.

CNSA Survivorship Research Fellowship awarded

To further advance our advocacy agenda, the CNSA Board called for expressions of interest from an early-career researcher to take a coordination and leading role in a research study that aims to develop a position statement on the Role of Cancer Nurses in Cancer Survivorship.

We congratulate Amanda Robertson who was successful in receiving the Fellowship, and will receive mentorship, guidance and support from senior researchers including Professors Ray Chan and Mei Krishnasamy.

Life Fellow Patsy Yates honoured

A leader in education and research in the health sector, CNSA Life Fellow, Distinguished Professor Patsy Yates, was honoured with a Member (AM) in the General Division of the Order of Australia.

Patsy was recognised for her significant service to tertiary education, including in cancer and palliative care nursing and medical research. Her passion and energy for her work is the culmination of a long career dedicated to health, as a registered nurse with extensive experience as a leader in education and research.

On behalf of all CNSA's members, we congratulate Patsy on this incredible achievement and deserved recognition.

Annual Report published

Finally, for those wishing to know more about CNSA's position and priorities over the past 12 months, the CNSA's 2019-2020 Annual Report is now available on our website, with a PDF version available to download.

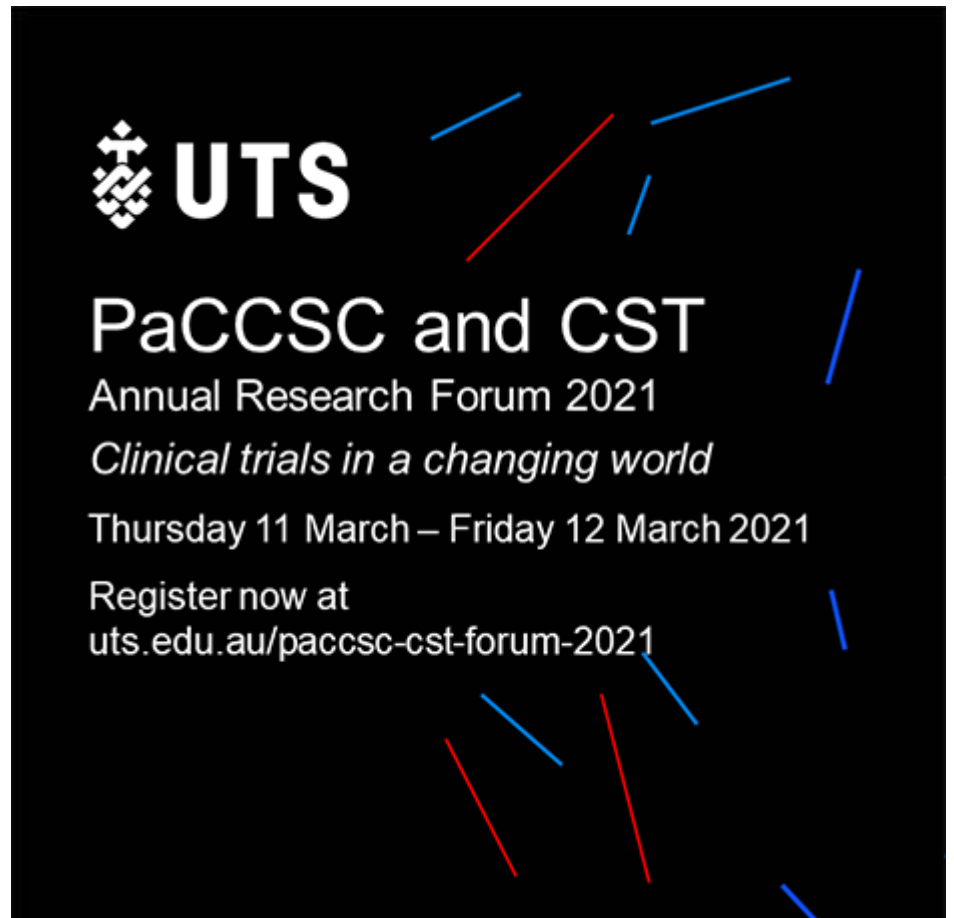
This report includes a snapshot of activity, education and advocacy efforts over the past 12 months, CNSA's detailed financial report and updates from the Chairs of our Standing Committees, State Groups and Specialist Practice Networks. Click here (<https://www.cnsa.org.au/documents/item/1133>) to read the document in full.

In closing, we are delighted to have seen an increase in membership despite the impact of COVID-19 on the workforce and the Australian economy – with our sights set on a record-breaking year.

We look forward to continuing to deliver significant benefits during what is a difficult time for many, and to supporting the Cancer Nursing workforce as we navigate a new terrain.

Lucy Gent
President, CNSA

Cancer Symptom Trials & Palliative Care Clinical Studies Collaborative

UTS

PaCCSC and CST
Annual Research Forum 2021
Clinical trials in a changing world
Thursday 11 March – Friday 12 March 2021
Register now at
uts.edu.au/paccsc-cst-forum-2021

Overview

It has been a period of adjustment for all of us as we adapt to a new way of working in 2020. For CST and PaCCSC, this means our whole team has been working remotely and embracing available technology to keep things running smoothly and continuing to provide the same high level of support to our members.

We have experienced some of the impacts of COVID-19 restrictions and lockdowns and had to temporarily suspend recruitment for several clinical trials. We are pleased to report that all are back up and running. In addition, some trials have now almost reached their recruitment conclusion during this period and we anticipate successfully closing another large phase 3 trial before Christmas.

The CST and PaCCSC teams continue to progress our program of research

including wonderful recognition of the work of our Postdoctoral Research Fellows. CST Postdoctoral Research Fellow Dr Rayan Saleh Moussa participated in the Australia and Asia Pacific Clinical Oncology Research Development Initiative (ACORD) 2020 Protocol Development Workshop. Rayan was joined there by Celia Marston, UTS PhD candidate and Coordinating Principal Investigator for the Rehabilitation in Palliative Care - OCTAA study. PaCCSC Postdoctoral Research Fellows Dr Slavica Kochovska and Dr Mariana Sousa have been accepted into the UTS Faculty of Health's Inaugural Early Career Researcher (ECR) Support Program. Slavica has also been nominated for the UTS ECR Women Mentoring Program 2020.

Cancer Australia Funding

CST has received funding from Cancer Australia for another 12 months from 1 July 2020. The CST Chair, Professor

Meera Agar, National Manager, Linda Brown, and the CST team are focused on the continuing program of work and building on the evidence base to improve outcomes for people living with cancer. We continue to receive and support study proposals that are innovative and focused as well as aligned with our goal to improve the lives of people living with cancer.

Events

We are working through a full program of events for the 2020-2021 year including four workshops as well as the PaCCSC and CST Annual Research Forum 2021, which is scheduled for 11 and 12 March 2021.

The workshops invite colleagues and consumers to submit study ideas around clinical challenges in cancer symptom management. We are also running workshops focused on particular challenges, including malignant wound management, pain, missing data, and new challenges faced in remote service delivery including telehealth, which has been highlighted by the advent of COVID-19 and social distancing requirements.

The first of the four workshops, Clinical challenges workshop, on 23 June explored areas of clinical practice in cancer symptom management that continue to burden patients and challenge clinicians. The outcomes of this workshop will inform research directions for CST and collaborators that will contribute to evidence in best practice for cancer symptom management and supportive care.

ACORD 2020

In September, CST Postdoctoral Research Fellow Dr Rayan Saleh Moussa participated in the Australia and Asia Pacific Clinical Oncology Research Development Initiative (ACORD) 2020 Protocol Development Workshop. Her participation was funded by a TCRN professional development grant. Rayan

used this opportunity to refine a delirium prevention study protocol.

Rayan said, "The workshop was an intense yet rewarding experience. I have emerged with a wealth of knowledge, a great sense of achievement and protocol v1.0. I feel better equipped to turn any study concept into a trial protocol. I highly recommend this workshop for investigators early in their clinical research career."

Delphi study – cancer symptom management priority setting

Working groups have been established to develop two Delphi Studies into setting priorities for cancer symptoms that have the biggest impact on daily life for those living with cancer and their caregivers. The outcomes will inform and direct future research and the type of clinical trials that are developed.

The study design includes two separate modified Delphi studies, one for adult cancer patients, and the other addressing the paediatric, adolescent, and young adult (AYA) populations. The studies include two online surveys followed by face-to-face consensus meetings. Consumers and health professionals will be surveyed to get the best picture of gaps that may become a research focus for CST.

Leading the way in health and medical sciences research

The Australian's 2020 Research Report has revealed Australia's leading researchers in the health and medical sciences. We are pleased to share that Professor David Currow, PaCCSC Chief Investigator, has been named the lead researcher in the field of Hospice and Palliative Care.

IMPACCT Rapid Program

In January this year, we undertook an evaluation of the IMPACCT Rapid Program and emailed a survey to all our site investigators. The response was overwhelmingly positive, and the results have been accepted for publication in a letter to the *Journal of Palliative Medicine*.

Telehealth – series 35

The advent of COVID-19 has necessitated the rapid adoption of new models of palliative care delivery to facilitate remote healthcare access. The IMPACCT Rapid Program has launched its 35th series, which will examine the acceptability and utility of telehealth with a focus on discerning if there are patient groups who may benefit from this approach. It will also consider if there are patient groups for whom other forms of consultation should be provided. New series are underway looking at Melatonin for Sleep and Temazepam for Sleep and we thank Dr Ruwani Mendis, Palliative Care Physician and Medical Oncologist at Western Health, for leading these series.

Rapid Program paediatric series

The IMPACCT Rapid Program paediatric series continues to grow. In August, we launched a new paediatric series, *Cyclizine for nausea and vomiting in children*, which aims to quantify the use, efficacy and adverse effect profile of cyclizine to inform its broad utility for children. We've also just launched the series *Paediatric telehealth*. We welcome enquiries about getting involved in both the Rapid and Rapid Paediatrics programs to rapid@uts.edu.au.

We are building a database of new study ideas and encourage anyone interested in cancer symptom management as well as palliative care to get in touch. We welcome your interest in membership of our collaboratives as well as interest in our focused Symptom Node Subcommittees. Find out more via email to CST@uts.edu.au.

Linda Brown
National Manager, CST/PaCCSC

Cooperative Trials Group for Neuro-Oncology



Grants and Trials

It has continued to be a busy and productive time for COGNO investigators and collaborators.

The I-WOT study, "Can we wait to treat lower grade glioma?" was awarded \$600,000 funding from Cancer Australia/The Mark Hughes Foundation, and will be led by Radiation Oncologist Associate Professor Mark Pinkham.

Trials in Progress

The **MAGMA** (Multi-Arm Glioblastoma Australasia) trial, led by Medical Oncologist A/Prof Criag Gedye, has commenced recruitment and will open in over 27 sites across Australia.

The **LUMOS trial**: Low and Intermediate Grade Glioma Umbrella Study of Molecular Guided Therapies, led by Medical Oncologist Prof Hui Gan is recruiting successfully to this important pilot study.

The **PersoMed-1 trial**, led by Medical Oncologists A/Prof David Ziegler and A/Prof Elizabeth Hovey, involving the personalised targeted therapy for adolescent and young adult medulloblastoma patients is planning to commence recruitment across Australian sites in 2021.

The results of the ACED study, a phase II randomised non comparative double blind trial of acetazolamide plus dexamethasone vs dexamethasone

alone in recurrent/progressive high grade glioma, led by Prof Meera Agar, has been accepted for a poster presentation at the major US Society of Neuro-oncology Scientific Meeting in November 2020.

Due to the COVID-19 pandemic, a decision was made to defer the 2020 COGNO ASM planned for Melbourne until later in 2021.

We would like to express our thanks to Professor Anna Nowak for her outstanding leadership of COGNO for the past three years. We also welcome incoming new COGNO Deputy Chair, Rosemary Harrup, Medical Oncologist based at the Royal Hobart Hospital.

Eng-Siew Koh
Chair, COGNO

Faculty of Radiation Oncology



The Royal Australian and New Zealand
College of Radiologists*

The Faculty of Radiation Oncology

2020 has been a challenging year due to the COVID-19 pandemic and it has had a significant impact on all of us. As I mentioned earlier in the year, we have seen much information provided by various organisations – for the professions and for our patients. The messaging for cancer patients was consistent and important, that our patients speak to their treating oncologists to get the most accurate information for their individual circumstance. Those who need treatment must still access it. This is particularly important as we move into the next phase of pandemic management.

Our radiation therapy centres remained open and our practices changed their procedural logistics to adapt to the "new normal". It has been reassuring to see the Government move to support telehealth services, including telehealth consultations where appropriate.

RANZCR formed a high-level COVID-19 Taskforce, chaired by our CEO. The Taskforce has been exceptionally busy (in addition to their day jobs) reviewing literature, developing advice and keeping our membership updated. RANZCR advice can be found at ranzcr.com/our-work/coronavirus.

Throughout this most challenging year, our members have still found time to continue business as usual activities for the Faculty, albeit some activities were slowed down or done differently.

Medical Benefits Schedule (MBS) Review

The work of the MBS Review Working Group continued. There has been regular engagement with the Federal Department of Health by RANZCR clinicians and officers during 2020 regarding the MBS review work. New MBS descriptors for radiation oncology practice have now been resolved and a data collection exercise mapping the new descriptors to the billing process commenced in September 2020. This work will conclude in January 2021 and analysis and modelling will occur in February 2021. At the Department's request, RANZCR has provided two expert nominees to provide feedback on the Department's proposed approach to the cost modelling and analysis.

Radiation oncology practices across Australia are participating in the data collection phase with good representation from both the public and private sectors.

Targeting Cancer

The Faculty's Targeting Cancer Management Committee and Reference Panel has focused its attention on a refresh of the Targeting Cancer website including updating content during 2020. Work has commenced on new patient journey material with a regional context focus where possible. Considerable effort has been put into FAQs and other material for the website in relation to COVID-19. The work of the Targeting Cancer campaign was spoken about at the recent Faculty Forum and in several external webinars by the Chair of the Targeting Cancer Management Committee, Associate Professor Sid Baxi, to promote and engage about this important consumer information initiative. May I remind COSA members again to use #targetingcancer on social media or recommend the website as a resource to colleagues and patients.

Theranostics

The RANZCR Theranostics Working Group co-chaired by Professor Liz Kenny AO and Dr Bill MacDonald has recently published a draft discussion paper and issued a landscape survey to RANZCR Fellows. The paper provides a simple outline of theranostics and explains the objectives and approach for RANZCR's recently established working group in relation to this rapidly developing field of cancer diagnosis and treatment. The paper can be found on the College website at <https://www.ranzcr.com/our-work/advocacy/position-statements-and-submissions/theranostics-the-fifth-pillar-of-cancer-care>.

Trainee Examinations in 2020

Like all educational institutions, the College and our Faculty contributed to the considerable effort put into liaising, communicating with and supporting trainees regarding examinations

in 2020. We also provided advice regarding logistical challenges and potential risks of exam options to the College exams team during the year. On a regular basis, the Chief Censor and I updated our trainees to allay their concerns and uncertainty. Regular communication has also been maintained with Directors of Training, acknowledging their role and their ongoing support of trainees during this most challenging of years, particularly in Victoria. I am pleased to report that the delayed phase I and phase II written examinations were conducted successfully.

A new CEO and a change of Dean

Natalia Vukolova, after a significant contribution to the work of the College has left to have her first child, and Mark Nevin, who would be familiar to many of you, has taken over as interim CEO.

As my term as Dean comes to an end, I would like to express my thanks to the Faculty and to COSA. I have enjoyed contributing to initiatives that influence our professions and improve patient outcomes. My message as I leave the role is to encourage all clinicians, trainees and other professionals involved in cancer care and treatment to embrace working in the regions of Australia. The challenges and opportunities to deliver high quality care to cancer patients, as well as enjoying the lifestyle benefits of living in regional Australia, is something worth contributing to and experiencing. Access to high quality and accessible medical care in regional and rural Australia remains a very important and ongoing imperative for our nation and we must demonstrate our commitment to that imperative.

The Faculty is fortunate that Keen Hun Tai, Deputy Director Radiation Oncology and Consultant Radiation Oncologist at Peter MacCallum Cancer

Centre, Melbourne, has been elected to take over as Dean. He will commence his role from 1 January 2021. He has contributed significantly to the College for many years and his expertise and wisdom are much valued by the College and the membership.

Madhavi Chilkuri
Dean, Faculty of Radiation Oncology

MASC Trials



As we venture out of a COVID dominated 2020, we are pleased to update the COSA members on the recent activity of MASC Trials.

Our Annual Meeting "Highlights" will take place virtually on Thursday 3 December, 5:00pm-7:30pm. At this event, members will have the opportunity to hear about research highlights from the last year and about our future directions. The program will engage representatives of the Scientific Advisory Committee, as well as the various Discipline Specific Advisory Groups, which work to develop our research portfolio.

MASC Trials members and staff continue to support existing trials and to develop new trials addressing important questions towards improving outcomes for people affected by melanoma and skin cancer. We have continued to expand activities throughout 2020 with more trials, sites, national and international engagement, partnerships and funding streams than ever before. Further, we have recruited a steady stream of new research participants, with 177 patients / 12 protocols / 78 sites / 11 countries at the end of October 2020.

We are delighted to confirm two first-in-world interventional trials have now launched for patients with Merkel Cell Carcinoma, as well as several other important trials including the Australian component of the international prospective registry for patients with ocular melanoma;

- **07.17 AOMA Uveal melanoma registry;** Investigator: A/Prof Anthony Joshua; NCT04588662: Currently open to US enrolment, now approved by ethics and will be opening across five Australian sites.
- **10.17 GoTHAM trial** (A phase Ib/II study of combination avelumab with peptide receptor radionuclide therapy or conventional fractionated radiotherapy in patients with metastatic Merkel cell carcinoma); Investigator: A/Prof Shahneen Sandhu; NCT04261855; now actively recruiting at three Australian sites.
- **02.18 I-MAT Trial** (A randomised, placebo-controlled, phase II trial of adjuvant Avelumab in patients with stage I-III Merkel cell carcinoma); Investigator: Dr Wen Xu; NCT04291885; now actively recruiting at six Australian sites.
- **02.19 IMAGE Trial** (Melanoma Surveillance Photography to improve early detection of melanoma in very high risk, or high risk, patients); Investigator: A/Prof Victoria Mar; NCT04385732; now ethics approved and will open across six to eight Australian sites.
- **11.19** Improving awareness and outcomes for Australians living in regional and remote areas; Investigator: A/Prof Victoria Mar; a national collaboration with consumers, advocacy groups and researchers.

Further, a number of trials continues to recruit well and a number of new sites nationally and internationally have recently joined including:

- **02.18 MelMarT-II** (A Phase III, multi-centre, multi-national randomised control trial investigating 1cm v 2cm wide excision margins for primary cutaneous melanoma); Investigators: Prof Michael Henderson and Prof Marc Moncrieff; NCT03860883; 10 sites / 78 patients / 4 countries. We expect 50+ sites to open across Australia, the UK, Canada, USA, Ireland, the Netherlands, Denmark, Sweden, Brazil and New Zealand.
- **02.12 RADICAL** (RADiotherapy or Imiquimod in Complex Lentigo Maligna); Investigator: A/Prof Pascale Guitera; ACTRN12615000266561; 124 patients are enrolled in the pilot study across Australia, NZ and Brazil. This month we have reapplied for extension funding to support the full protocol to expand activity in to the UK.
- **01.15 CHARLI** (A Phase Ib/II Trial of Ipilimumab-Nivolumab-Denosumab and Nivolumab-Denosumab in Patients with Unresectable Stage III and IV Melanoma); Investigator: Prof Shahneen Sandhu; ACTRN12617000772347; Currently recruiting at nine sites across Australia with 39 patients enrolled to date with a target of 72 patients.
- **04.17 SMARTI** (A Pilot Study of an Artificial Intelligence System as a Diagnostic Aide for Better Skin Cancer Management); Investigator: A/Prof Victoria Mar; NCT04040114; 95 patients enrolled from two sites in VIC are in lead-in phase; the active phase will commence shortly.

A number of trials have recently closed to recruitment and/or follow up, with final analyses underway and manuscripts in preparation. We look forward to sharing the results of these studies. These trials include:

- **02.09 Mel-D** (Vitamin D following primary treatment of melanoma at high risk of recurrence – a pilot placebo controlled randomised phase II trial); Investigator: A/Prof Robyn Saw; ACTRN12609000351213
- **02.14 CombiRT** (An open-label, single-arm, phase I/II, multicentre study to evaluate the safety and efficacy of the combination of dabrafenib, trametinib and palliative radiotherapy in patients with unresectable (stage IIIc) and metastatic (stage IV) BRAF V600E/k mutation-positive cutaneous melanoma); Investigator: Dr Tim Wang; ACTRN12615000292572. Congratulations to Dr Wang for his recent presentation of the toxicity data at ASTRO 2020 Annual Scientific Meeting hosted in Miami, USA.
- **01.12 EAGLE FM** (Evaluation of Groin Lymphadenectomy Extent for Metastatic Melanoma); Investigator: Prof Andrew Spillane; ACTRN12614000721606.
- **01.09 RTN2** (A randomised trial of post-operative radiation therapy following wide excision of neurotropic melanoma of the head and neck); Investigator: A/Prof Matthew Foote; ACTRN12610000478011.

Finally, I am delighted to announce the appointment of Aileen Boyd-Squires as Chief Executive of MASC Trials Ltd and Head of the MASC Research Centre at Monash University. Aileen is working closely with Libby Paton – who has led MASC Trials since 2008 – during our leadership transition through to December 2020. All of the team look forward to continuing to help our membership to develop and undertake



investigator-initiated clinical research in melanoma and skin cancer. There will be several new roles opening shortly, so please feel welcome to contact Aileen in case you would like to learn more about the new roles in our team.

MASC Trials is in a period of consolidation and growth, and I sincerely thank our members and funders (particularly Cancer Australia and Monash University) and look forward to continuing to deliver on the vision of the group to improve outcomes for melanoma and skin cancer patients and their families through clinical trials.

Mark Shackleton
Chair, MASC Trials

Medical Oncology Group of Australia



The Medical Oncology Group of Australia (MOGA), as the national professional body for Australian medical oncologists and a special society of the Royal Australasian College, has enjoyed a rewarding 2020 despite the extraordinary challenges and circumstances posed by COVID-19.

ACORD20 PDW

MOGA successfully presented our first online Asia Pacific Oncology Research Development (ACORD) Protocol Development Workshop from 27 September to 2 October with a record number of 101 participants and 45 faculty. The Workshop, led by Convenor Professor Martin Stockler, remained an intensive six-day workshop based on the education principles of active problem-based, collaborative learning. Working across many different time zones generated its own demands and required a complete recasting of how this international project was delivered.

Global Cancer Policy

In late October MOGA contributed to the effort in global cancer policy by supporting a research study being conducted in conjunction with the World Health Organization (WHO) by Christopher Booth, Professor of Medical Oncology, Canada Research Chair in Population Cancer Care and Clinician-Scientist, Division of Medical Oncology Queen's University, Canada. The study aimed to help determine which oncology medications are deemed most essential to cancer care. The Essential Medicines List (EML) aims to provide a consolidated

list of high value medications on which national formularies can be based. However, little is known on the degree to which the EML correlates to the views of front-line healthcare providers globally and notably to the medications they view as essential to oncology practice. The study was designed to discover the ten cancer therapeutics that front-line cancer physicians deem to be most essential and to discover whether there are any omissions from the EML list. The Study results will help to inform future WHO EML policy decisions and will be published in an academic peer reviewed journal.

ESMO Asia 2020 Virtual Congress, 20-22 November

MOGA was pleased to be an endorsing society and have a virtual exhibition booth in the International Societies' Village at the ESMO Asia Virtual Congress 2020. The ESMO Asia meeting has quickly achieved a place as the leading scientific platform in the region for updates on the most prevalent cancer types in the Asia-Pacific, presentations on the latest oncology advances and state-of-the-art education for oncologists.

Oncology Drugs and Treatments Advocacy

Dr Deme Karikios, Chair, MOGA Oncology Drugs Working Group and Deputy Chair, MOGA, convened the 2020 Oncology Drugs Roundtable Meeting on 4 December with key stakeholders. MOGA has been hosting this annual stakeholder meeting to consider broad oncology and practice issues for more than 16 years. The meeting provides a focus for oncology sector stakeholders to collectively review, improve and expand on key issues around oncology drugs, treatment access, advocacy and lobbying to make the patient experience better. Some of the key items considered included MOGA's submission to the House of



Representatives *Inquiry into Approval Processes for New Drugs and Novel Medical Technologies in Australia*; the need for legislative change to extend TGA and PBAC indications for older drugs; the requirement for a different regulatory framework for rare cancers; and changes to PBS listing of opioids for individuals with cancer. The recent recommendations for changes to MBS item numbers for the delivery of anticancer drugs which have posed many issues for clinical practice and been the focus of MOGA members communications over the last 6 months, were also discussed in detail.

Ethics Framework for Pandemics

MOGA working with the Royal Australian College of Physicians recently contributed advice on the National Health and Medical Research Council's Draft *Ethics Framework for Pandemics* via assistance from our Ethics Sub-Committee. Many medical, health and research professionals will find this document of value and the examples it provides make clear that there are other "actors" from the education sector, community services as well as journalists and the media, government and politicians, who have profound influence on these "ethical" situations. The MOGA Sub-Committee is chaired by Professor Ian Olver AM and includes Associate Professor Ian Haines, Professor Bogda Koczwara AM, Professor Linda Mileshkin and Professor Michael Millward. It recently appointed two new members, Associate Professor Catriona McNeil, from the Chris O'Brien Lifehouse and Dr Tam Bui based at the Concord Repatriation General Hospital. The Sub-Committee provides an invaluable resource for the Executive, members and the Australian medical oncology profession, by promoting ethics, ethical professional standards and developing specific advice in areas and issues that raise ethical considerations in policy and advocacy, education, clinical practice and health and medical research and working with industry.

MOGA Online 2021- Annual Scientific Meeting, Thursday-Friday 5-6 August

Given ongoing COVID-19 considerations and restrictions, the MOGA Executive made the difficult decision to not proceed with a hybrid Annual meeting in Perth as planned at the start of the pandemic. The first fully online, virtual MOGA Annual Scientific Meeting, *Future of Oncology: Improving Outcomes through Innovation*, has been scheduled for early August 2021. The Scientific Program, is being thoughtfully redesigned by Co-Convenors Dr Florian Honeyball and Dr Felicia Roncolato, to take into consideration the requirements of the virtual environment and will cover the most prevalent cancer types, with sessions designed to share best practice standards of care for oncology patients and many opportunities for a fruitful learning and networking experience.

Planned Educational Programs in 2021

MOGA's plan for next year's many initiatives and activities are well advanced including the following online programs: Communications Skills Training, Annual Scientific Meeting, Sciences of Oncology, and ACORD21 Protocol Development Workshop. An Immuno-Oncology Symposium, *Combination & Next Generation Immunotherapy*, is planned for Friday 5 November by Co-Convenors Dr Peter Manders and Dr Omali Pitiyarachchi. Other new initiatives include the OPAL-Oncology Professionals Advancing Leadership training initiative. In addition to the Cancer Achievement Award, in 2021 MOGA will launch a major new Award in honour of one of the founders of Australian medical oncology, Professor Martin Tattersall AO.

We look forward to another productive and rewarding year in 2021.

Prunella Blinman
Chair, MOGA

Oncology Social Work Australia New Zealand



As with most organisations this year, the activities of OSWANZ have been anything but normal. The year started with grand plans for the national conference to be held in Sydney in September. This was quickly scuppered when COVID restrictions took hold. The Executive group made a decision to defer the conference until September 2021, but there is still some trepidation about whether this will be feasible.

We have frequently heard in the media about how people need to "pivot" to accommodate the changes to the way we do business in the COVID environment. With this mindset OSWANZ decided to offer professional development in a Zoom webinar format. Two webinars have been held so far and they have been well received and positively evaluated; particularly as they offer the opportunity for learning opportunities that are accessible to social workers in regional and rural locations. They were offered free of charge for members, and with a cost for non-members. The result was that membership surged as people took the opportunity to join OSWANZ. As a result our membership numbers are at an all time high. The committee is busy planning further webinars for 2021, and if the uncertainty continues there may be a decision to continue with webinars for 2021 and further defer plans for a national conference.

Other activities have included participation in the review process for the Cancer Council Optimal Care Pathways for a range of cancer types and sites and ongoing work with Cancer Council Australia focusing on disadvantage, access to Centrelink payments and financial toxicity. In

addition to contributing jointly to a Cancer Council submission, OSWANZ members were granted an audience in Canberra with the policy advisor assisting the Minister for Social Security. A direct outcome of these advocacy initiatives has been a most welcome change to the process of approving Disability Support Pensions for people with terminal illness. The new streamlined application process and simplified medical report form ensure quick approval of payments, usually in a matter of days following lodgement of the application.

On the research front, Dr Rosalie Pockett from the University of Sydney and Kim Hobbs completed an audit with a group of oncology social workers at six oncology health sites in three states (Queensland, NSW and Victoria) to define and document the nature and range of social work interventions with cancer patients and their caregivers. The first article for this study has now been published in the journal *Australian Social Work* and a second manuscript is in progress. OSWANZ members are now contributing to a Special Issue of *Australian Social Work* with a theme of Oncology Social Work which will be ready for the first edition of the journal in 2022.

The OSWANZ Executive and Management Committees continue to be the dynamic forces behind the day to day administration of the organisation. Monthly meetings are now conducted via Zoom which allows us to see each other and has made the meetings more lively and interactive. I would like to acknowledge in particular, our current President, Nick Hobbs, and our long-serving secretary, Olga Gountras. Along with state representatives, there is a wealth of talent which will see the organisation continue to grow and prosper. As a group we look forward to a continuation of the fruitful collaboration with COSA and with our colleagues from all disciplines.

Kim Hobbs
Council Representative, OSWANZ

Primary Care Collaborative Cancer Clinical Trials Group



The Primary Care Collaborative Cancer Clinical Trials Group (PC4) has continued to support the advancement of high-quality cancer research in primary care.

What's been happening?

Ca-PRI Interactive Webinar "COVID-19, cancer and primary care"

Our first webinar in collaboration with the Cancer and Primary Care Research International Network (Ca-PRI) was held on Thursday 1 October and was a great success. The interactive event was an opportunity to connect with and hear from members about their research on the impact of COVID-19 on cancer diagnosis and care.

Speakers presented from the USA, Europe, and Australia and the event was facilitated by Professor of Primary Care Oncology at the University of Leeds, Richard Neal.

Associate Professor Sanja Percac-Lima spoke on *The impact of COVID-19 on patient navigation program for community health centers' patients*. Dr Koen Degeling spoke on *Estimating the mortality and health economic impact of delayed access to cancer services*. Professor Henk van Weert spoke on *Effects of COVID-19 on cancer care and early diagnosis*.

Podcast

Our monthly podcast, **Research Round-up**, returned after a COVID-19 induced hiatus. **Research Round-up** has had some excellent guests over the last six months with PC4's **Dr Kristi Milley** diving into current research and how this impacts primary care.

Guests have included:

Sibel Saya, a Genetic Counsellor and PhD student at University of Melbourne, on her paper in *Public Health Genomics* entitled "A Genomic Test for Colorectal Cancer Risk: Is This Acceptable and Feasible in Primary Care?"

Linda Denehy, the Head of School and Professor of Physiotherapy at the University of Melbourne, School of Health Sciences, as well as Professor of Allied Health Research at Peter

Interested in cancer in primary care research?

SUBSCRIBE TO PC4'S RESEARCH ROUND-UP

A monthly podcast conversation that deep dives into recently published cancer in primary care research.

VISIT PC4TG.COM.AU/PODCASTS



McCallum Cancer Centre, on her paper in in the *Australian Journal of General Practice* entitled “Probably better than any medication we can give you’: General practitioners’ views on exercise and nutrition in cancer”.

Dr Rebecca Bergin, research fellow at Cancer Council Victoria and member of PC4’s Early Researcher Career Network, on her paper in the *Journal of Cancer Policy* entitled “Optimal care pathways: A national policy to improve quality of cancer care and address inequalities in cancer outcomes”

Dr Karolina Lisy, a senior research fellow at Peter MacCallum Cancer Centre and the Australian Cancer Survivorship Centre, on her paper in the *Journal of Clinical Medicine* entitled “Sharing Cancer Survivorship Care between Oncology and Primary Care Providers: A Qualitative Study of Health Care Professionals’ Experiences”.

All of our research roundup episodes are available [here](#).

Annual report

The 2019/20 financial year was a huge success for PC4. We celebrated a record year of funding with over \$10 million received. This funding will support 15 new cancer in primary care studies.

Our report highlights PC4’s key achievements and milestones. It is also a celebration of our community. PC4 would like to thank all our committee members and consumers for their hard work in helping PC4 thrive and continue to grow. We look forward to another successful year in 2020/21. The report is able to be downloaded [here](#).



PC4 GP Practice Recruitment Guide – COVID-19 Edition

With the current climate of COVID-19 we have updated our recruitment guide for general practice clinics. It summarises the top tips and advice on how to recruit GP practices to your research while taking into account barriers or delays due to COVID-19. This is available exclusively to our members, as well a suite of other useful resources. Not a member? Join for free [here](#).

PC4 Scientific and Advisory Committees

In late 2020 we welcomed some familiar and some fresh faces on both committees. We’re looking forward to collaborating with our new members to develop new cancer in primary care research.

Kristi Milley
National Manager, PC4



NEW COMMITTEE MEMBERS				PC4
 Carolyn Ee Scientific Committee	 Hannah Wurdill Scientific Committee	 Isabella Zhou Scientific Committee	 Jasmine Yee Scientific Committee	
 Kate White Scientific Committee	 Meena Rafiq Scientific Committee	 Moira O'Connor Scientific Committee	 Nicolas Hart Scientific Committee	
 Pallavi Prathivadi Scientific Committee	 Jessica Roydlhouse Scientific Committee	 Deena Swiatek Advisory Committee	 Wikki McGrath Advisory Committee	
		 Belinda Goodwin Scientific & Advisory Committees	 Liz Halsom Scientific & Advisory Committees	

The Psycho-oncology Co-operative Research Group



With the impact of COVID-19 stalling a number of PoCoG research projects, in the second half of 2020 we focused on progressing a number of research studies exploring the impact of COVID-19 on cancer care in Australia. These studies explored the experiences and perspectives of cancer patients/survivors and their family members, health professionals working in cancer care, and non-government cancer services. They focused on treatment decisions during the COVID-19 pandemic and the longer term impact of COVID-19 and psycho-oncology clinicians' experiences delivering psycho-oncology services using telehealth to identify the barriers and enablers to implementation. This will inform future implementation strategies for use of telehealth as a model of care in psycho-oncology.

We're also proud to report that A/ Professor Dhillon has been successful in leading an MRFF grant application totalling almost \$5million, addressing the needs of people with brain cancer.

This outstanding achievement represents the largest research grant achieved by PoCoG and reflects the work of a partnership with the Cooperative Group in Neuro-Oncology (COGNO), Cancer Symptom Trials Group (CST) and Primary Care Collaborative Trials Group (PC4).

The BRAINS program (Brain cancer Rehabilitation, Assessment and Intervention for survivorship NeedS) will deliver care that encompasses implementing screening for needs assessment and symptoms; exploring optimal models of survivorship care; addressing information needs of patients and carers; caring for caregivers and examining rehabilitative and supportive care interventions in this population.

Professor Dhillon and her team will also create a national repository of information resources, a national care coordination service, and develop and roll out interventions to address gaps in care, including a collaboration with CanTeen, to support young adult brain cancer survivors to re-engage with life.

Over the last six months our special interest groups have hosted a lunchtime webinar series. This exciting and informative series has explored a wide range of topics.

The webinars have covered:

- New intervention models to boost access to FCR treatments
- Cutting edge South Australian ECR research
- Agility and adaptation: Expanding best practice palliative care to vulnerable groups among trying global times
- Maintaining track record for ECRs
- Implementation science in psycho-oncology
- Clinicians in psycho-oncology research
- Cancer prevention during and beyond COVID-19

All of these webinars are available to watch on the PoCoG YouTube channel.

The strong interest from PoCoG members as well as the wider oncology community highlights the importance of

our special interest groups as forums for building collaboration and setting the psycho-oncology research agenda.

If you are interested in joining one of our SIGS please contact the PoCoG office for further information: join groups focused on psychosocial research among AYAs, clinician's research, early career research, end of life care, fear of cancer recurrence, implementation science, cancer prevention as well as a dedicated group for researchers and clinicians working in South Australia.

To learn more about PoCoG activities and to join visit www.pocog.org.au.

Joanne Shaw
Executive Director, PoCoG



Royal College of Pathologists of Australasia



The Royal College of Pathologists of Australasia

The Royal College of Pathologists of Australasia (RCPA) principle objectives are to train and support pathologists and senior scientists to improve the use of pathology testing utilising the highest quality evidence and expert collaboration. The RCPA continues to progress pathology in Australasia with action and education in the areas of genomics, health data standardisation and promoting evidence-based best practice.

International Pathology Day

Recently, the RCPA celebrated the importance of pathology at International Pathology Day (IPD), and recognised the prodigious work of pathology trainees, Fellows and scientists.

International Pathology Day (IPD) is an annual awareness day dedicated to highlighting the fundamental role of pathology in addressing global health challenges and improving the health outcomes of communities around the world. This year's RCPA IPD event, held via live webstream at the RCPA headquarters on 11 November 2020, was hosted by Sophie Scott, National Health Reporter for the ABC. This year's topic was COVID-19, and the RCPA welcomed RCPA Fellows, Prof Deborah Williamson, Clinical Microbiologist and Deputy Director of the Microbiological Diagnostic Unit Public Health Laboratory; Prof Bill Rawlinson AM, Senior Medical Virologist and the Director of Virology at South Eastern Sydney and Illawarra Health Service; A/Prof Paul Griffin Infectious Diseases Physician and Microbiologist and Director of Infectious

Diseases at Mater Health Services Brisbane; A/Prof Rob Baird, Director of Pathology, Infectious Diseases Physician, Royal Darwin Hospital; and Prof Peter Collignon, Infectious Diseases Physician and Microbiologist, Australian National University.

Pathology testing has made a critical contribution to the wellbeing of the community during this COVID-19 pandemic. The entire healthcare system has been able to wisely use the knowledge gained from COVID-19 testing to locate the virus and protect the community. This year's IPD event celebrated the pivotal role that pathology has played in guiding us safely through this pandemic. Speakers who have been at the very forefront of the country's response to COVID-19 provided behind the scenes insights and outlined the fundamental role of pathology to lead the public health testing response.

All over Australasia and the world, IPD activities were held to recognise and celebrate the important role of pathology. To view the videos from the event, please visit our [website](#).



RCPA's International Pathology Day event

Successful application for MBS listing of genetic tests for heritable mutations relating to colorectal and endometrial cancer

The RCPA was recently successful in applying to the Medical Services Advisory Committee (MSAC) for genetic tests for heritable mutations relating to colorectal and endometrial cancer to be listed on the

Medicare Benefits Schedule (MBS). The College is very proud of all the Fellows and staff involved in this achievement.

An open letter to Australians: Put your health first

The RCPA was a signatory on an open letter published to all Australians released in April 2020. This open letter was shared across multiple social media platforms. The RCPA continues to encourage the wider community to heed the message in putting health first, attending appointments and collection centres – to ensure they are safe.

Awards and Honours

Tony Henwood, Principal Scientist at the Westmead Children's Hospital in Sydney, and the author of over 50 publications, has received the Jules Elias Award for his extensive research in IHC. His publication during the onset of the COVID-19 pandemic on Coronavirus disinfection in histopathology, has also received special recognition.

Professor Phoebe Joy Ho (FRCPA, FFSc) and Professor Andrew Roberts (FRCPA) each were awarded an AM in the Order of Australia, General Division, Queen's Birthday 2020 Honours List for significant service to medical research, to haematology and to professional bodies.

Pathology Update Conference & Exhibition 2021

The next RCPA Annual Scientific Meeting, **Pathology Update**, will be a hybrid format, combining an onsite component at the International Convention Centre, Sydney, as well as a live-streamed event on 2-4 July 2021. The conference will feature extraordinary international and Australian speakers who are leaders in their fields, in the disciplines of Anatomical, Chemical, Forensic, Genetic, General, Haematology, Immunopathology and Microbiology.



Structured Pathology Reporting of Cancer Project

The Structured Pathology Reporting of Cancer (SPRC) Project produces highly-regarded resources, having now published 46 protocols, guides, proformas, request forms and typist templates. Recent additions include updated protocols for gastrointestinal cancer.

SPRC protocols are the result of expert multi-disciplinary input and independent peer review and are authored by a volunteer group of expert pathologists, clinicians and scientists. The resources can be accessed on the RCPA [website](#).

Looking to the future, a digital software pilot is planned to help pathologists implement SPRC structured reporting protocols and progress the use of highest quality, interoperable, “atomic” pathology data.

International Collaboration on Cancer Reporting

The International Collaboration on Cancer Reporting (ICCR) project has produced standardised reporting templates for cancers available to all countries of the world. Four new ICCR Gastrointestinal Datasets have been published and are available to download on the [ICCR website](#).

Pathology Information, Terminology and Units Standardisation (PITUS) 18-20 Project

Over the past 25 months, five working groups have been striving to improve health outcomes for Australians by advancing the following key pathology concepts: Information structures, Common terminology, Common understanding, and Behavioural alignment. With respect to cancer reporting, PITUS 18-20 aims to align terminology development and cancer dataset development efforts to create truly computable, standardised and interoperable cancer reporting tools.

The RCPA Standards for Pathology Informatics in Australia (SPIA) Terminology Reference Sets and Information Models have recently been updated on the National Clinical Terminology Service (NCTS) website for authorised users. Terms of Use, Release Notes and updated Terminology Reference Sets are now **available**. Fast Healthcare Interoperability Resources (FHIR) terminology resources (Code Systems, Value Sets and Concept Maps) are also available for **download** using JSON, XML or TSV. Please note, access to these resources requires users to register with the Australian Digital Health Agency to accept the **license agreements** in place.

The RCPA Board of Directors have officially endorsed the latest updates for the **RCPA SPIA information models and terminology reference sets** following internal and public review and endorsement from all of the main stakeholders.

Kenneth Lee
Council Representative, RCPA

Trans-Tasman Radiation Oncology Group



TROG 15.01 SPARK trial a breakthrough in prostate cancer research

With over 16,000 Australian men estimated to be diagnosed with prostate cancer in 2020, TROG Cancer Research is proud to share its latest breakthrough with the **TROG 15.01 SPARK Trial**.

The clinical trial, led by Professor Paul Keall and Associate Professor Jarad Martin, proposed the use of kilovoltage intrafraction monitoring (KIM) technology in addition to stereotactic body radiation therapy (SBRT) to provide more accurate results when targeting cancer cells.



A/Prof Jarad Martin, who led the TROG 15.01 SPARK trial alongside Prof Paul Keall

Patients were recruited across five different sites - Calvary Mater (Newcastle), Royal North Shore Hospital (Sydney), Liverpool Hospital (Sydney), Westmead Hospital (Sydney) and the Peter MacCallum Cancer Centre (Melbourne).

The trial followed each patient for 24 months after completing treatment to ensure success and to check that the disease did not re-occur. The last patient to have completed the two year follow up was in March 2020.

The goals of the clinical trial were to:

- Test KIM's cancer targeting accuracy
- Analyse the impact of the targeting accuracy on the radiation dose received by a patient
- Assess the clinical outcomes, side effects and cancer control when using these treatments

The use of KIM technology is what makes this trial stand out, as it is the first-ever cancer treatment with real-time motion and rotation monitoring. This Australian-developed method is perfect for finding the position of cancer targets in real-time during the radiation therapy process.

For prostate cancer patients, this trial presents the opportunity for larger doses of radiation therapy to be given at each treatment session. Ultimately, this means that the number of treatments needed are significantly reduced. For example, a patient who previously required 40 visits may need as few as five.

In addition to reducing the amount of treatments required, the KIM technology reduced the side effects commonly experienced after treatment due to the lower toxicity and less frequent treatment.

To learn more about the TROG 15.01 SPARK 15.01 trial, check out the journal publication in the *International Journal of Oncology*.



The TROG Cancer Research team at their headquarters, the Calvary Mater, Newcastle

Lifetime membership at TROG Cancer Research awarded to Associate Professor Tomas Kron

TROG Cancer Research earlier this year announced **A/Prof Tomas Kron** as the recipient of the Lifetime Membership Award at the TROG Cancer Research AGM.

A/Prof Kron has worked alongside the TROG Cancer Research team for over twenty years. In this time, he has played a key role in the success of multiple clinical trials and important cancer research for the organisation.

He was one of the first Physicists to provide support on TROG activities and first served as the Physics Advisor between 1999-2001. A/Prof Kron has

also played an important role as an Advisor on the New Techniques and Technology Committee, helping TROG Cancer Research maintain leading quality assurance systems and processes.

The Lifetime Membership Award is awarded to late-career researchers who have made significant contributions in the field of radiation oncology and/or in the development of emerging technology/techniques that have advanced oncology treatments, and have demonstrated service to TROG Cancer Research.

Professor Kron is to be congratulated on this huge achievement from TROG Cancer Research.

New trials closed to accrual, a reason to celebrate at TROG Cancer Research

With 2020 presenting many challenges across the nation for cancer research organisations, TROG Cancer Research are proud to say their team has closed accrual on multiple trials.

The **RAIDER (TROG 14.02)** trial, led by **Professor Robert Huddart** at the Institute of Cancer Research in the UK achieved accrual in April, with 345 participants recruits across 31 different clinical sites.

Among these sites was the team at Christchurch Hospital, led by **Dr Ben Hindson**, who recruited 14 patients in the study. Participant follow-ups are still underway, with primary endpoint analysis expected to be completed by December 2021.

In addition, the **PET LABRADOR (TROG 12.02)** trial closed to accrual with 24 participants randomised. Trial Chair, **A/Prof Verity Ahern** from Westmead Hospital is to be commended for her role in recruiting patients for this trial.

Patient follow-ups for TROG 12.02 are ongoing, with an analysis of MRI/PET imaging planned for quarter one 2021.

Exciting publication highlights featuring TROG Cancer Research work

TROG Cancer Research would like to celebrate and acknowledge the time, effort, and dedication that goes into each manuscript and abstract submitted and/or published by their team and members.

In 2020, these manuscripts and abstracts have demonstrated the tireless work of TROG members and the breakthroughs they are making in cancer research using radiation medicine.

A full list of **publications** and **abstracts** detailing TROG Cancer Research's work, can be viewed online.

TROG Cancer Research prepare for another successful virtual ASM

With the **success of their first virtually held Annual Scientific Meeting (ASM)**, TROG Cancer Research is preparing to host its ASM event online again from 23-24 March 2021.

There will also be a SMART Workshop that will be hosted virtually as a pre-ASM event on 22 March 2021.

This announcement comes off the back of ongoing COVID-19 updates, demonstrating the need for easy and accessible events to remain a priority going into the New Year – especially for health and research professionals.

The virtual ASM format will provide delegates from around the world with an exciting opportunity to share educational and scientific content, without the need to meet face-to-face.

The program for 2021 is being developed to enable high interaction with guests from around the world.

The ASM will include engaging keynote presentations and panel sessions, with topical content and networking opportunities, showcasing both national and international presenters and ideas.

The full and extensive program will include two days of scientific sessions showcasing radiation oncology clinical trials, discussion of new trial concepts, future research directions and technological advancements.

The theme of the TROG 2021 Virtual ASM will be "Online and Onwards", with **registration now open** until 18 January 2021.

Puma Sundaresan
Council representative, TROG



2020 COSA ASM – ON DEMAND!

A reminder that presentation recordings are now available to all registered ASM delegates online. Delegates can access on-demand content on the virtual platform for the next 12 months via: <http://cosa.delegateconnect.co/>.

To view a recording, please go to the "Program" tab and click on the relevant presentation within a session.

Calendar of Events

Date	Event	Venue
2021		
12–14 January	SIOG Advanced Course – Canberra app.glueup.com/event/siog-2021-advanced-course-canberra-14744	Virtual meeting
2–5 February	ICCN 2021 iccn2021.org	Virtual conference
4–5 February	Better Care Everywhere: Healthcare Variation in Practice Program Series safetyandquality.gov.au/our-work/healthcare-variation/better-care-everywhere-program-series	Online program
5 February	ANZGOG Annual Scientific Meeting: Pure Science Symposium anzgog-asm-2021.w.yrd.currinda.com	Virtual ASM
12 February	ANZGOG Annual Scientific Meeting: Main Conference Program anzgog-asm-2021.w.yrd.currinda.com	Virtual ASM
11–12 March	PaCCSC and CST Annual Research Forum 2021 uts.edu.au/about/faculty-health/events/paccsc-and-cst-annual-research-forum-2021	Online forum
18–19 March	COSA Flinders 2021 Cancer Survivorship Conference 'Life after cancer – redefined, reimagine, rebuilt' survivorship2021.org	Adelaide, SA & online
23–24 March	2021 TROG Annual Scientific Meeting asm.trog.com.au	Virtual ASM
27–28 March	ARGANZ 2021 Annual Meeting arganz.org/index.php/annual-meeting/home/welcome	Virtual conference
18–21 April	2021 Australian Pain Society 40th Annual Scientific Meeting (APS 2021) dcconferences.com.au/aps2021	Canberra, ACT & online
10–14 May	ALLG Scientific Meeting allg.org.au	Melbourne, VIC, or virtual
19–21 May	ANZSGM Annual Scientific Meeting 2021 anzsgmconference.org	Melbourne, VIC
27–29 May	IPOS 2021 World Congress ipos2020.com/ipos2021	Virtual congress
27–28 May	Value Based Healthcare Conference ciccancer.com/vbhconf	Perth, WA
4–8 June	ASCO 2021 meetings.asco.org/am/virtual-welcome	Chicago, USA
10–12 June	ANZCHOG Annual Scientific Meeting anzchog.org/asm	Melbourne, VIC
17–19 June	CNSA Annual Congress cnsacongress.com.au	Brisbane, QLD

Calendar of Events

Date	Event	Venue
24–26 June	MASCC/ISOO Annual Meeting on Supportive Care in Cancer 2021.masccmeeting.org	Seville, Spain
2–4 July	Pathology Update 2021 rcpa.edu.au/Events/Pathology-Update	Sydney, NSW & online
18–20 July	ANZUP Annual Scientific Meeting anzup.org.au/content.aspx?page=asm-preview2020	Adelaide, SA
28–30 July	BC Trials 2021 Annual Scientific Meeting breastcancertrials.org.au	Check website
4–8 August	ANZHNC/NZAPS Joint Scientific Meeting anzhncsnzaps2020.w.events4you.currinda.com	Queenstown, New Zealand
5–6 August	MOGA 2021 Annual Scientific Meeting moga.org.au	Virtual ASM
6–8 August	RANZCR 2021 New Zealand Annual Scientific Meeting ranzcr2021.co.nz	Wellington, New Zealand
14–17 August	HGSA 44th Annual Scientific Meeting aacb.eventsair.com/hgsa-44th-annual-scientific-meeting	Adelaide, SA
25–27 August	MOGA Annual Scientific Meeting 2021 moga.org.au	Perth, WA
16–19 September	RANZCR Annual Scientific Meeting 2021 ranzcr.com/whats-on/events/ranzcr-annual-scientific-meeting-2021	Melbourne, VIC
17–21 September	ESMO Congress 2021 esmo.org/meetings/esmo-congress-2021	Paris, France
4–6 October	25th Human Genome Meeting hugo-hgm2021.org	Tel Aviv, Israel
12–15 October	AGITG 2021 Annual Scientific Meeting asm.gicancer.org.au	Melbourne, VIC
24–26 October	13th COGNO Annual Scientific Meeting cogno.org.au/content.aspx?page=cognoasm-home	Melbourne, VIC
24–27 October	ASTRO's 63rd Annual Meeting astro.org/Meetings-and-Education	Chicago, USA
3–6 November	18th World Congress of Cancers of the Skin wccs2020.com	Buenos Aires, Argentina
8–10 November	ESSO 40 esso40.org	Lisbon, Portugal
16–18 November	COSA's 48th Annual Scientific Meeting Save the date!	Melbourne, VIC
7–11 December	San Antonio Breast Cancer Symposium 2021 sabcs.org	San Antonio, USA

For additional events please see the COSA website.

COSA'S 48TH ANNUAL SCIENTIFIC MEETING



Clinical
Oncology
Society of
Australia

16-18
November 2021
**SAVE THE
DATE**



Melbourne
Convention
& Exhibition
Centre

2021



2021