



Clinical  
Oncology  
Society of  
Australia

CCOSA

ANNUAL  
REPORT  
2021

EDUCATION

COLLABORATION

ADVOCACY

RESEARCH

# SECTION INDEX

COSA BOARD + COSA REPORTS	3
COSA GROUP REPORTS	13
AFFILIATED ORGANISATION REPORTS	25
OTHER REPORT	54
FINANCIAL STATEMENTS	55

## PRESIDENTS OF COSA

1973-1976	<b>Mr WB Fleming AM</b>	MBBS FRACS FRCS(Eng) FACS	(Deceased)
1976-1979	<b>Professor L Atkinson</b>	FRCS FRACS FACR	(Deceased)
1979-1981	<b>Dr RP Melville</b>	MBBS FRCS FRACS FACS	(Deceased)
1981-1983	<b>Professor MHN Tattersall AO</b>	MA MD MSc FRCP FRACP	(Deceased)
1983-1985	<b>Professor GJ Clunie</b>	CHM(Ed) FRCS(Ed) FRCS FRACS	(Deceased)
1985-1987	<b>Dr JVM Coppleson AO</b>	MBBS(Hons) MD FRCOG FRACOG	(Deceased)
1988-1989	<b>Dr JA Levi</b>	MBBS FRACP	
1990-1991	<b>Professor RM Fox AM</b>	BSc(Med) PhD MBBS FRACP	
1992-1993	<b>Professor WH McCarthy AM</b>	Med FRACS	
1994-1995	<b>Professor AS Coates AM</b>	MD FRACP	
1996-1997	<b>Professor RJS Thomas</b>	MBBS MS FRACS FRCS	
1998-1999	<b>Professor H Ekert AM</b>	MBBS MD FRACP FRCPA	
2000-2001	<b>Professor J Zalberg OAM</b>	MBBS PhD FRACP GAICD MRACMA	
2002-2003	<b>Professor L Kenny AO</b>	MBBS FRANZCR	
2004-2005	<b>Dr S Ackland</b>	MBBS FRACP	
2006-Jul 2006	<b>Professor D Currow</b>	BMed FRACP MPH	
Jul 2006-2008	<b>Professor D Goldstein</b>	MBBS FRACP FRCP	
2009-2010	<b>Professor B Mann</b>	MBBS PhD FRACS	
2011-2012	<b>Professor B Koczwara AM</b>	BM BS FRACP MBioethics FAICD	
2013-2014	<b>Professor SV Porceddu</b>	BSc MBBS (Hons) MD FRANZCR	
2015-2016	<b>Professor M Krishnasamy</b>	BA RGN DipN MSc PhD	
2017-2018	<b>Professor P Butow AM</b>	BA(Hons) Dip Ed MCLinPsych MPH PhD	
2019-2020	<b>Professor N Pavlakis</b>	BSc MBBS MMed (ClinEpi) PhD FRACP	
2021-2022	<b>Professor F Boyle AM</b>	MBBS FRACP PhD	

# COSA VISION AND MISSION

## QUALITY MULTIDISCIPLINARY CANCER CARE FOR ALL

The overarching mission of COSA is to improve cancer care and control through collaboration.

### **COSA achieves this by:**

- supporting the professional and educational needs of cancer health professionals
- enhancing cancer care and control through network development
- advocating for improvements in cancer care and control
- facilitating research across the spectrum of cancer

# COSA MEMBERSHIP

As at 31 December 2021 there were 757 registered members of COSA. Members are drawn from the many disciplines in medicine engaged in cancer treatment and from associated research, patient care and support areas. They come from universities, private practice, government and private laboratories and other health services.

### **There are 2 types of COSA membership:**

Individual membership – COSA members

Organisational membership – Affiliated and Associated Organisations

### **The categories of membership of COSA are:**

#### **1 ORDINARY MEMBERS**

A person with a specific interest in oncology and with professional qualifications is eligible for admission as an ordinary member.

- Medical members are qualified clinical practitioners or scientists with a specific interest in oncology. Medical members hold a

postgraduate degree or fellowship from a recognised College or Society that is relevant to the vision and mission of COSA.

- Allied Health members have a specific interest in oncology and a professional qualification relevant to COSA's vision and mission.

#### **2 RETIREE MEMBERS**

A person who has retired from their professional employment, who has held COSA membership for 10 years prior to retirement, and who has a continued personal interest in cancer care is eligible as a retiree member, subject to Board approval.

#### **3 HONORARY MEMBERS**

A person who has made significant and sustained contributions to COSA or to cancer care in general is eligible

for admission as an honorary member. This membership category is offered to past Presidents of COSA and nominees and must be approved by the COSA Board.

#### **4 STUDENT MEMBERS**

A person who is undertaking full-time undergraduate or post-graduate studies with a stream of cancer care is eligible as a student member. Documented evidence of their status is required upon application annually and membership is subject to Board approval.

#### **5 AFFILIATED AND ASSOCIATED ORGANISATIONS**

Affiliated and Associated Organisations include not-for-profit companies, institutions or organisations that have a similar vision to COSA.

# COSA BOARD

**Professor Fran Boyle AM**  
President



**A/Professor Dion Forstner**  
President-Elect



**Ms Sandie Angus**  
Director



**Professor Judy Bauer**  
Director



**Dr Tanya Buchanan**  
Director  
Appointed July 2021



**Mr Peter Dowding**  
Director



**Ms Hollie Harwood**  
Director  
Resigned July 2021



**Dr Malinda Itchins**  
Director  
Appointed July 2021



**Professor Michael Jefford**  
Director  
Appointed July 2021



**Dr Wayne  
Nicholls**  
Director  
Retired July  
2021



**Professor  
Timothy  
Price**  
Director



**Professor  
Sabe  
Sabesan**  
Director



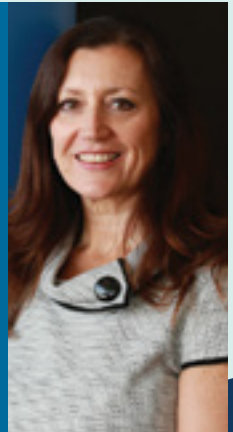
**A/Professor  
Christopher  
Steer**  
Director  
Appointed July  
2021



**Professor  
Nik Zeps**  
Director  
Retired July  
2021



**Ms Marie  
Malica**  
Chief Executive  
Officer



**AUDITORS**  
BDO  
Level 11  
1 Margaret St  
Sydney NSW  
2000

# COSA COUNCIL

Council comprises the President, President-Elect, Immediate Past President, Chair of each COSA Group, the nominee of each Affiliated Organisation, and other appointed positions.

## COSA GROUP AND APPOINTED REPRESENTATIVES

### ADOLESCENT AND YOUNG ADULT GROUP

Chair: Dr W Nicholls  
MBChB FRACP

### BREAST CANCER GROUP

Chair: Dr S Fraser  
MBBS FASBP

### CANCER BIOLOGY GROUP

Chair: Professor N Zeps  
BSc(Hons) PhD

### CANCER CARE COORDINATION GROUP

Chair: Distinguished Professor P Yates  
AM PhD RN FAAN FACN

### CANCER GENETICS GROUP

Chair: (Jan-Oct) Ms L Salmon  
BSc GradDip Genetic Counselling  
FHGSA

(Oct-Dec) Mr S Troth  
BSc Grad Dip Genetic Counselling  
FHGSA

### CANCER PHARMACISTS GROUP

Chair: (Jan-Oct) Mr D McKavanagh  
BPharm DipClinPharm CHIA

Co-Chair: (Nov-Dec) Mrs M Ryan  
BPharm MHLthMgt GradDipClinPharm

Co-Chair: (Nov-Dec) Dr G Sandhu  
BPharm(Hons) DipClinPharm PhD

### CANCER PREVENTION

Chair: Professor B Stewart  
AM MSc PhD FRACI DipLaw  
GradDipLegalPract

### CLINICAL TRIALS RESEARCH PROFESSIONALS GROUP

Chair: (Jan-Oct) Ms A Cubitt RN  
GradCert (Clinical Trials Management)

(Oct-Dec) Mr A Stoneley

### EPIDEMIOLOGY GROUP

Chair: Dr H Tuffaha  
BPharm MBA MSc PhD

### EXERCISE AND CANCER GROUP

Chair: (Jan-Oct) Mr A Murnane  
BAppSci GradDip MAppSci

(Oct-Dec) Dr D Mizrahi  
BExPhys MSc PhD

### GASTROINTESTINAL ONCOLOGY GROUP

Chair: (Jan-Oct) Professor D Yip  
MBBS FRACP

(Dec) Dr C Diakos  
BSc(Hons) PhD MBBS FRACP

### GERIATRIC ONCOLOGY GROUP

Chair: Professor M Agar  
MBBS FRACP FACHPM MPC PhD

### GLOBAL ONCOLOGY GROUP

Chair: (Oct-Dec) Professor D Yip  
MBBS FRACP

### GYNAECOLOGICAL ONCOLOGY GROUP

Chair: Position vacant

### INTEGRATIVE ONCOLOGY GROUP

Chair: A/Professor J Lacey  
MBBS FRACGP FACHPM (FRACP)

### LUNG CANCER GROUP

Chair: Dr M Itchins BMedSci MBBS  
(HonsI) FRACP PhD

### MELANOMA AND SKIN CANCER GROUP

Chair: A/Professor A Menzies  
BSc(Med) MBBS(Hons) FRACP PhD

### NEUROENDOCRINE TUMOURS GROUP

Chair: Dr D Chan  
BSc(Med) MBBS ClinDipPallMed  
FRACP PhD

### NEURO-ONCOLOGY GROUP

Chair: A/Professor ES Koh  
MBBS FRANZCR

### NUTRITION GROUP

Chair: Dr M Findlay  
PhD AdvAPD

### PAEDEIATRIC ONCOLOGY GROUP

Chair: Position vacant

### PALLIATIVE CARE GROUP

Chair: Professor J Phillips  
BSc PGDip PhD RN FACN

### PSYCHO-ONCOLOGY GROUP

Chair: Dr L Kirsten  
BSc(Psych) MAppSc(Beh Hlth Sc)  
DPsyc(Clinical) PhD

### RADIATION ONCOLOGY GROUP

Chair: Position Vacant

### RARE CANCERS GROUP

Chair: A/Professor C Scott MBBS PhD  
FRACP FAHMS

### REGIONAL & RURAL ONCOLOGY GROUP

Chair: A/Professor R Zielinski  
MBBS Hons (Sydney) BE Hons (Sydney)

### SURGICAL ONCOLOGY GROUP

Chair: Dr S Nightingale  
MB ChB MS FRACS

### SURVIVORSHIP GROUP

Chair: (Jan-Nov) Professor M Jefford  
MBBS MPH MHLthServMt PhD  
GCertUniTeach GAICD FRACP

(Nov-Dec) Professor R Chan  
PhD GAICD FACN NHMRC Investigator  
Fellow

### UROLOGIC ONCOLOGY GROUP

Chair: A/Professor A Azad  
MBBS PhD FRACP

### ABORIGINAL AND TORRES STRAIT ISLAND REPRESENTATIVE

(May-Dec) Professor G Garvey  
BEd MEd PhD

### ADVANCED TRAINEE REPRESENTATIVE

(Jan-May) Dr A Parsonson  
MBBS MMed (ClinEpi) FRACP

(May-Dec) Dr A Knox  
BSc MBBS

### CONSUMER REPRESENTATIVES

(Sep-Dec) Ms K Bell  
BA(Hons) GradCertHealthEcons MPH  
GAICD

(Sep-Dec) Ms L Young Duniv



#### **PRESIDENT**

Professor F Boyle AM  
MBBS FRACP PhD

#### **PRESIDENT-ELECT**

A/Professor D Forstner  
MBBS (Hons) FRANZCR

#### **IMMEDIATE PAST PRESIDENT**

Professor N Pavlakis  
BSc MBBS MMed (ClinEpi) PhD FRACP

## AFFILIATED ORGANISATION REPRESENTATIVES

#### **AUSTRALASIAN GASTRO-INTESTINAL TRIALS GROUP**

Professor T Price  
MBBS DHlthSc (Medicine) FRACP

#### **AUSTRALASIAN LEUKAEMIA & LYMPHOMA GROUP**

A/Professor P Mollee  
MBBS(Hons) MMedSc FRACP FRCPA

#### **AUSTRALASIAN METASTASIS RESEARCH SOCIETY**

Dr N Pouliot  
PhD

#### **AUSTRALIA AND NEW ZEALAND SARCOMA ASSOCIATION**

Professor A Hong  
MBBS MMed PhD FRANZCR

#### **AUSTRALIA NEW ZEALAND GYNAECOLOGICAL ONCOLOGY GROUP**

A/Professor P Beale  
BSc MBBS FRACP PhD

#### **AUSTRALIAN AND NEW ZEALAND CHILDRENS HAEMATOLOGY ONCOLOGY GROUP**

(Jan-Mar) Dr C Fraser  
FRACP MBBS MPH

(Mar-Dec) Professor N Gottardo  
FRACP MBBS MPH

#### **AUSTRALIAN AND NEW ZEALAND HEAD & NECK CANCER SOCIETY**

(Jan-Aug) A/Professor J Maclean  
BAppSc (Speech Pathology) MSc  
(Med) PhD

(Aug-Dec) Dr B Stein  
MBBS(Hons) FRACP

#### **AUSTRALIAN AND NEW ZEALAND UROGENITAL & PROSTATE CANCER TRIALS GROUP**

Professor I Davis  
MBBS (Hons) PhD FRACP FChPM

#### **BREAST CANCER TRIALS**

Professor GB Mann  
MBBS PhD FRACS

#### **CANCER NURSES SOCIETY OF AUSTRALIA**

(Jan-Mar) Ms C O'Kane  
RN NP DipMgmt DipProjMgmt MNsg  
MCNSA MCOSA

(Mar-Dec) Ms G Vigar  
BN, PGDipOncNurs MNsc (Onc Nurs)  
RN MCNSA MCOSA MACN CHIA

#### **CANCER SYMPTOM TRIALS**

Professor K Clark  
MBBS MMed PhD FRACP FChPM

#### **COOPERATIVE TRIALS GROUP FOR NEURO-ONCOLOGY**

A/Professor ES Koh  
MBBS FRANZCR (from October 2020)

#### **FACULTY OF RADIATION ONCOLOGY**

Dr Keen Hun Tai  
MBBS FRANZCR

#### **HUMAN GENETICS SOCIETY OF AUSTRALIA**

(Jan-Oct) Ms L Salmon  
BSc GradDip Genetic Counselling  
FHGSA

(Oct-Dec) Mr S Troth  
BSc Grad Dip Genetic Counselling  
FHGSA

#### **MEDICAL ONCOLOGY GROUP OF AUSTRALIA**

(Jan-Aug) A/Professor P Blinman  
BMed FRACP PhD

(Aug-Dec) Dr D Karikios

BSc MBBS FRACP PhD

#### **MELANOMA AND SKIN CANCER TRIALS**

Professor M Shackleton  
MBBS PhD FRACP

#### **ONCOLOGY SOCIAL WORK AUSTRALIA & NEW ZEALAND**

Ms K Hobbs  
MSW MAASW

#### **PRIMARY CARE COLLABORATIVE CANCER CLINICAL TRIALS GROUP**

Dr C Ee  
MBBS FRACGP BAppSci (Chinese  
Medicine) Grad Cert Med Acup MMed  
PhD

#### **PSYCHO-ONCOLOGY COOPERATIVE RESEARCH GROUP**

A/Professor J Shaw  
BAppl Sc BPsych(Hons) PhD

#### **ROYAL COLLEGE OF PATHOLOGISTS OF AUSTRALASIA**

A/Professor K Lee  
MB ChB FRCPA

#### **THORACIC ONCOLOGY GROUP OF AUSTRALASIA**

Professor M Millward  
MBBS MA FRACP

#### **TROG CANCER RESEARCH**

Dr P Sundaresan  
BSc (Hons) MBBS FRANZCR PhD

# PRESIDENT'S REPORT



**Fran Boyle**  
COSA President  
2021-2022

**When I was nominated for this role back in June 2018, I had quite different ambitions for the first year of my COSA Presidency. Adjustments due to the COVID-19 pandemic continue to affect the way we live and work throughout 2021. Whilst it was not the year I anticipated, I am still very proud of what we have achieved.**

I certainly did not expect to spend the last two weeks of 2021 advocating for changes to telehealth, when in fact it was what we had been asking for throughout the pandemic. Telehealth was seen as one of the “silver linings” of COVID-19 for vulnerable people with cancer and other illnesses, with most patients accessing their specialist consultations by phone. But the government saw fit to remove MBS funding for phone, in favour of video only consultations. We believed this was the wrong decision at the wrong time with the Omicron variant causing havoc. So the week before Christmas saw the COSA team and myself working with our members and stakeholders to advocate heavily for the decision to be reversed. We were pleased to learn the changes have been deferred to 1 July 2022, allowing time to negotiate for more flexibility, with the help of Cancer Australia and other stakeholders. I would say that's a major win for us and our patients, one which I am very proud to have facilitated even if only in part.

## Achievements in 2021

Some of our other noteworthy achievements throughout 2021 include:

- Our second very successful virtual ASM
- First virtual, and third COSA-Flinders Cancer Survivorship Conference
- Webinars held in partnership with the Australian Cancer Survivorship Centre, Cancer Council Victoria and Cancer Nurses Society of Australia
- Continued advocacy work around COVID-19, including vaccination for cancer patients, cessation of screening services and the utilisation of tele-health in ongoing cancer care
- Completion and final report of the Australasian Tele-trial Model pilot implementation project, which ultimately saw the Federal Government invest more than \$124 million in tele-trials projects
- Updated Exercise and Cancer position statement
- Breast density facts and issues statement launched
- Fertility preservation guidelines finalised, expanded from adolescents and young adults to include all patients with cancer, ready for formal launch in early 2022
- Seven submissions to government and other bodies
- Appointment of three Cancer Survivorship Fellows who received mentorship, guidance, and support from the COSA Survivorship Executive Committee
- Establishment of the new COSA Global Oncology Group

## Annual Scientific Meeting

COSA held its second virtual ASM in 2021, and it was another highly successful event. Early in the year I shared Marie Malica's enthusiasm for a face-to-face conference, but obviously the Board made the difficult decision to move to event to virtual. By late August, it became obvious that travel and border restrictions would prevent us all from confidently and safely planning for in-person attendance. Luckily, we had the experience of 2020 behind us – that experience coupled with the great online platform we had used the year prior, and the experience of the team at ASN Events to ably support a seamless delivery, all came together flawlessly.

Over the three days of the ASM, delegates had access to all content from plenaries and five concurrent sessions in each time block, as well as breakfast sessions and dinner symposia. All registered delegates also have access to the content on demand for up to 12 months after the ASM.

On behalf of the COSA Board and Council I extend our sincere thanks to Kate Webber and the Program Committee for pulling together a stand-out educational program.

Whilst I enjoyed the virtual ASM very much, I am yearning to see you all again in person in Brisbane in November 2022.

## Governance

2021 saw a number of changes to the COSA Board membership with some director terms expiring and vacancies created due to others retiring and Dion Forstner stepping up as President-Elect. The retirements included Hollie Harwood (the Cancer Council Australia nominee), Wayne Nicholls, Nick Pavlakis, and Nik Zeps. The new appointments were Tanya





**I hope to see you all  
on the dance floor at  
the ASM in Brisbane  
in November.**



Buchanan (Cancer Council), with Malinda Itchins, Michael Jefford, and Christopher Steer being the new Council elected directors.

The Board met five times in 2021, with a focus on governance, finance, strategy and risk. The Audit, Risk and Finance Committee (AR&FC), a sub-committee of the Board, also met five times. Once again, our co-opted director Peter Dowding deserves a special mention for his outstanding job of chairing the AR&FC. Together with our CEO, Peter and the Committee continued to lead us through the challenges of COVID-19. Sadly, Peter announced his retirement from the COSA Board, effective March 2022, following eight years of valuable service. A recruitment process is underway for another co-opted director with financial expertise. I hope to introduce the successful candidate appointed by the Board at the 2022 AGM.

COSA Council is our main Clinical and Scientific Advisory Group, and consists of the COSA Group Chairs and a representative from each of the Affiliated Organisations. Council met three times in 2021 – all virtually due to the disruptions and travel restrictions caused by the pandemic. These virtual meetings were still very well attended, with highly engaged participation and informative agendas. As with the ASM, we hope the Board and Council will have the opportunity to meet in person in 2022.

We all have high hopes for 2022, but in closing out 2021 I extend my sincere thanks to the COSA Board and Council for their continued guidance; to Cancer Council Australia for the ongoing mutually beneficial relationship; and to our CEO Marie Malica and her team for leading the organisation through another challenging year.

I hope to see you all on the dance floor at the ASM in Brisbane in November.



Fran Boyle presenting the  
Tom Reeve Award to the  
2021 recipient Michael  
Barton OAM

# CHIEF EXECUTIVE OFFICER'S REPORT

**At the start of 2021 I did not expect to be writing another annual report from my "home office" (ie dining room!). Earlier in the year, the team and I commenced a gradual return to our Sydney CBD office, but the Omicron variant quickly quashed that pipedream. As always, the COSA team has achieved an enormous amount with our limited resources, and we all banded together despite being physically distanced.**

## **Annual Scientific Meeting**

Whilst I tried to maintain my optimism for a face-to-face event, in late August it became obvious that was not going to be possible as the pandemic once again forced the COSA Annual Scientific Meeting (ASM) online. However, following the experience of a successful virtual ASM in 2020, I was confident we could deliver another great event.

We chose the theme "Cancer care and research: Learning from the past and improving the future" because we wanted to implement the learnings from the first year of the pandemic and not ignore the challenges of 2020. Secondly, we received feedback from the delegate evaluations that our members wanted us to build on previous ASM topics rather than introduce all new themes each year.

In terms of clinical themes, the program had a focus on immunotherapy. This theme was very well received when we last featured it in 2017. There has been a lot of progress since, and in multiple disease areas, so we featured new research and ground-breaking treatments for diseases such as mesothelioma and rare cancers. Building on the excellent presentations from the 2020 program, we also had a focus on patient-reported outcome measures (PROMs) and patient-reported experience measures (PREMs). We wanted to move

the discussion from why to how, to the implementation of PROMs and PREMs into routine cancer care, and discuss the barriers and enablers to making this happen.

We utilised the same online platform as in 2020, Delegate Connect. Clearly they listened to our feedback and made lots of improvements, ensuring a positive delegate experience with 97 per cent of respondents in the evaluation survey stating the platform was user friendly. Delegates were highly engaged over the course of the three days with 215,053 minutes of live stream views! And the added bonus of the online platform is that all content is available on demand for 12 months after the ASM.

Given 2021 was the second year of the pandemic, surprisingly 19 per cent of survey respondents stated this was the first virtual event they had attended (compared to 45 per cent in 2020). Once again, a noteworthy number of respondents (19 per cent) suggested they would prefer to attend a virtual COSA ASM in future, compared to 64 per cent who prefer the face-to-face format under normal circumstances. Whilst there is appetite for online content, it will not replace the desire to network and engage in person, which was very evident from the overall feedback.

Whilst this was another highly successful virtual ASM, I remain hopeful we can be together in person for the 2022 COSA ASM in Brisbane.

## **Trainee events**

Unfortunately the pandemic forced us to postpone many of the Advanced Trainee educational events COSA traditionally hosts throughout the year, but we did manage to sneak one in – the ACT and NSW Oncology Weekend (ACTNOW). This event is not just for Trainees, we also welcome

consultants. The big change to ACTNOW in 2021 was opening it up to radiation oncologists as well as medical oncologists. Given the paucity of in-person events, registration quickly filled once we opened it.

ACTNOW is a residential weekend educational program hosted by COSA in Bowral every second year. Traditionally sponsored by Roche, the 2021 event was also kindly supported by GenesisCare. Over 60 delegates participated and benefitted from presentations focused on: cardio-oncology; treatment updates in rectal cancer; skin toxicity management from systemic and radiation therapy; treatment of oligometastatic disease; technology, telehealth and tele-trials; heritable cancer basics for oncologists – mainstreaming and identifying potential germline mutations on tumour profiling; COVID-19 impacts on cancer care; and career planning including a talk to demystify the "dark side" of private oncology.

## **Changing of the guard**

COSA Council is responsible for COSA activities and provides advice to the COSA Board. Council membership comprises the President and President-Elect, the Immediate Past President, the Chair of each COSA Group and the nominee of each Affiliated Organisation. COSA Council meetings present an excellent opportunity for networking, education and professional development.

There were several new appointments to COSA Council in 2021:



**I cannot thank the COSA team enough for their dedication and efforts during another strange year**



**Marie Malica**  
Chief Executive  
Officer

Group or Appointment	Outgoing	Incoming
*Aboriginal & Torres Strait Islander representative	New position	Gail Garvey
Advanced Trainee representative	Andrew Parsonson	Andrea Knox
Cancer Genetics	Lucinda Salmon	Simon Troth
Cancer Pharmacists	Dan McKavanagh	Marissa Ryan (co-Chair) Geeta Sandhu (co-Chair)
Clinical Trials Research Professionals	Annette Cubitt	Adam Stoneley
Consumer Representatives	Vacant	Kathy Bell Leonie Young
Exercise and Cancer	Andrew Murnane	David Mizrahi
Gastrointestinal Cancer	Desmond Yip	Connie Diakos
*Global Oncology	New position	Desmond Yip
Nutrition	Nicole Kiss	Merran Findlay
Affiliated Organisations	Outgoing Representative	Incoming Representative
ANZCHOC	Chris Fraser	Nick Gottardo
ANZHNCs	Julia Maclean	Brian Stein
CNSA	Carmel O'Kane	Gabrielle Vigar
FRO	Madhavi Chilkuri	Keen Hun Tai
MOGA	Prunella Blinman	Deme Karikios
PC4	Joel Rhee	Carolyn Ee
*TOGA	New member	Michael Millward

\* New Group/appointment

## Membership

The Board approved 119 new members in the 2020/21 financial year. There was however a decrease in overall membership subscriptions, with 188 members from 2020 not renewing. As a member-based organisation, these fluctuations in membership can present some challenges for COSA. We urge all members to renew every year, and to encourage their colleagues to join and become involved in the range of COSA activities as demonstrated in the Group reports.

## Team COSA

2021 saw a few changes to the COSA team for the first time in many years. Sadly, COSA Project Managers Chantal Gebbie and Jessica Harris left as they chose not to renew their contracts, and our Social Media Coordinator Olivia Hart took up a full-time role with Cancer Council Australia. In October we welcomed Project Manager Hayley Griffin back from parental leave. And in December we appointed a new Communications Manager, Rosannah Girdlestone (née Snelson). Some COSA members may have crossed paths with Rosannah when she supported the team at COSA ASMs 2012-2016, or in her role as the Executive Editor of *Cancer Forum* at Cancer Council Australia during that time. Rosannah commenced in this newly created role in January 2022, and

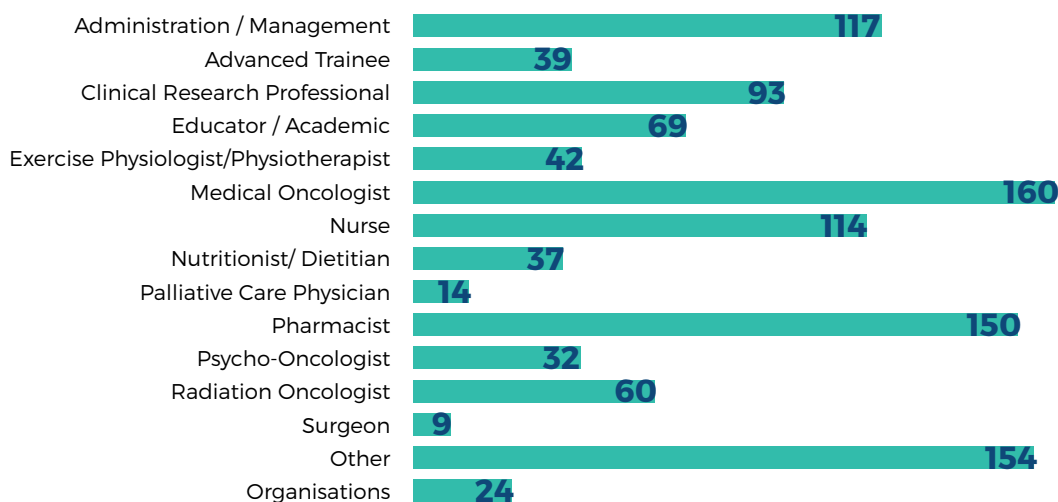
she is passionate about lending her communications skills and experience to COSA and will be involved in projects such as our publications, website, social media channels and communications campaigns.

I cannot thank the COSA team enough for their dedication and efforts during another strange year. In addition to those mentioned above the other Project Managers – Rhonda DeSouza and Gillian Mackay – worked tirelessly to facilitate the great projects reported by their Groups. We are all skilfully supported by our highly-efficient admin team in Fran Doughton and Peter Robinson.

# COSA SNAPSHOT



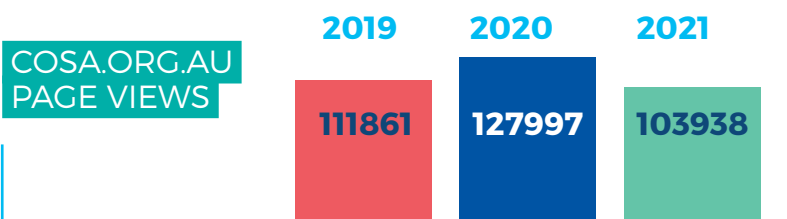
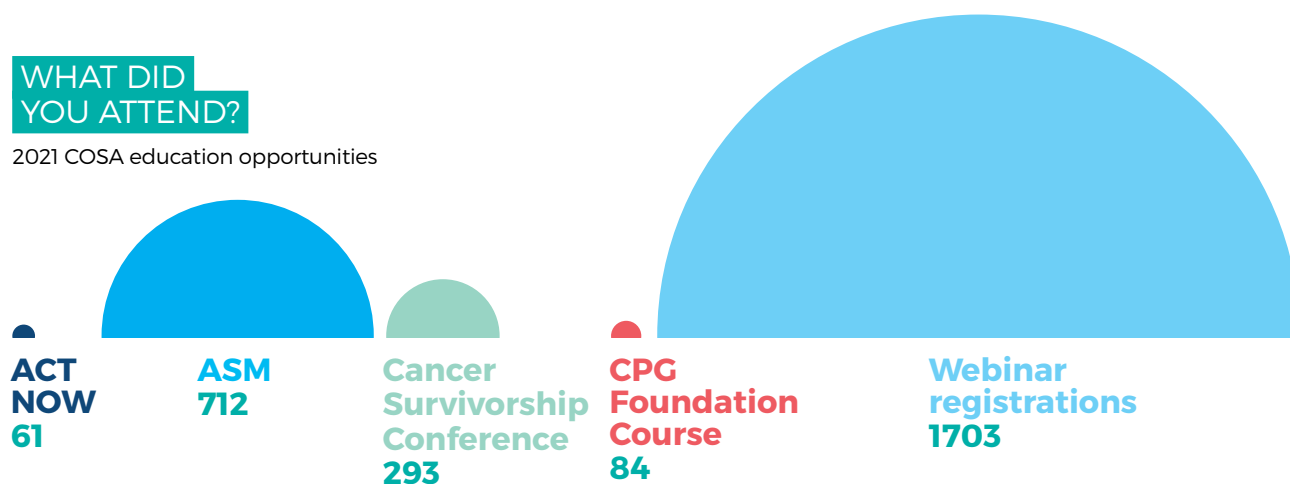
## WHO ARE YOU?



\* Members can indicate more than one profession

## WHAT DID YOU ATTEND?

2021 COSA education opportunities





## SOCIAL MEDIA REACH

Key 2019 2020 2021



## ASM

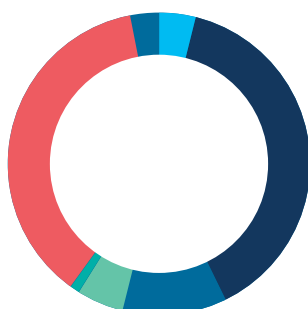
2021

### Registrations

725

#### Registration state breakdown

ACT: 26 (4%)  
NSW: 277 (39%)  
QLD: 77 (11%)  
SA: 36 (5%)  
TAS: 5 (1%)  
VIC: 258 (37%)  
WA: 21 (3%)



### Abstracts

297

#### Why attend the ASM?



77% broaden my knowledge



43% present new research

#### Rate the program



Content:  
55% excellent

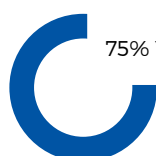


Standard:  
57% excellent



Relevance:  
61% excellent

#### Will we see you at the 2022 COSA ASM in Brisbane?



75% YES

### Hashtag tweets

#COSA21 1,275

### Hashtag impressions

2.303m



(L-R) Fran Boyle, Adam Spencer (hot topic panel discussion facilitator) and Marie Malica at the COSA ASM HQ



# COSA GROUP REPORTS

## CANCER GENETICS GROUP



*This report is also on behalf of the Human Genetics Society of Australasia (HGSA)*

**There have been several changes within the COSA Cancer Genetics Group's Executive Committee. The Committee, on behalf of the COSA Cancer Genetics Group, would like to acknowledge Lucinda Salmon for her dedication and hard work as Chair for over three years. As the new Chair, I would like to welcome new members to the Group and thank those who have taken on the important roles of Deputy Chair, Secretary and Treasurer.**

The Executive Committee continues to manage the needs of our members working in somatic and germline cancer genetics. To do this, the Executive has two subgroups (familial and somatic) who meet monthly and come together bi-monthly to plan events and discuss involvement in various projects.

Although 2021 continued to bring ongoing challenges, the COSA Cancer Genetics Group managed to deliver on many activities. Much of the Committee's work has been on providing education to our members. The group contributed to the following conferences, educational events, and projects in 2021.

### **Conferences and educational activities**

#### **Familial Cancer Clinical Professional Day**

Although we were hoping for a face-to-face meeting, the COSA/Human Genetics Society of Australasia (HGSA) Familial Cancer Clinical Professional Day was held virtually on 31 August 2021.

The day featured four sessions on palliative cancer care, somatic cancer in the familial cancer clinic, paediatric cancer, as well as a session presenting cases of special interest. The session on palliative cancer care provided evidence and information on the treatment, management, and psychosocial aspects of palliative cancer care. The pancreatic cancer session provided current research and updates on paediatric cancer syndromes, and psychosocial challenges of paediatric cancer genetics. The day also included session on managing patients with unclassified variants and uncertain cancer risks, germline mutations in prostate cancer, multi-organ cancer predisposition and surveillance, and the ever-evolving nature of genetic risk.

### **The 2021 COSA ASM**

The COSA Cancer Genetics Group was very pleased to present a session on the first day of the ASM focused on Inherited Cancer Risk and Risk Management. Prof Paul James began by providing a comprehensive overview of moderate-risk breast cancer genes and the management implications for individuals found to carry a pathogenic variant or likely pathogenic variant. Prof Alison Trainer discussed how non-genetic health professionals who request genetic testing can manage the complexity of a variant of uncertain significance identified in a cancer predisposition gene. Dr Ainsley Campbell presented a detailed overview on risk management for male prostate cancer susceptibility mutation carriers given the rise in clinical genetic testing in families with prostate cancer. The session was closed by Dr Mandy Ballinger who presented the latest data from SMOC+ (The Australian Surveillance Study in Multi-Organ Cancer prone syndromes) demonstrating the impact of whole-body MRI for individuals who carry a mutation in a multi-organ cancer susceptibility gene.

### **Webinars**

A key part of meeting the needs of our members has been the delivery of webinars on topics relevant to both somatic and familial cancer.

- neurofibromatosis type 1
- the SEQC2 oncopanel sequencing working group
- how germline and somatic cancer variants collide in the clinical cancer space
- the germline contribution to haematological malignancies

Although most of the Executive's efforts were focused on the above events, members of the Executive also contributed to the 2021 HGSA ASM scientific program ensuring representation at this meeting for those working in cancer genetics.

The Executive thanks all the speakers who gave their time. We also acknowledge the support provided by COSA and HGSA to support the registration and running of the various events.

#### **Additional activities**

The COSA Cancer Genetics Group's Executive Committee has been involved in several projects throughout 2021.

The statement Universal tumour screening for evidence of mismatch repair deficiency: A national strategy to identify families with Lynch Syndrome was first developed in 2018. The Executive has reviewed and updated this document. The updated statement will be available on the HGSA website.

We have been involved in reviewing Medical Services Advisory Committee (MSAC) submissions and reviews at the request of our members. This included a revision of the breast and ovarian cancer genetic testing Medicare item numbers and an MSAC application for whole body MRI. We also surveyed our members to guide our involvement in these projects. The respondents provided overwhelming support for the Group to be involved.

In 2021 the Executive introduced new travel and professional grants. Grants are available for members of the Cancer Genetics Group to attend a conference or educational event either in person or virtually. In our first year we awarded one grant. We welcome members of the Cancer Genetics Group to contact us if they want to find out more and apply for a grant.

I wish to thank the members of the Cancer Genetics Executive Group for all their hard work and contributions in

2021. I thank the members who have stepped down from the Executive in 2021, Fiona Webb, Mathilda Wilding, Susan Dooley and welcome our new members who have already significantly contributed. Again, I would like to acknowledge Lucinda Salmon for her contributions and dedication as Chair over the three plus years.

We look forward to delivering on education and on projects in 2022. We encourage any member of COSA with a special interest in somatic or familial cancer to join the Group.



**Simon Troth**  
Chair,  
Cancer Genetics  
Group

## CANCER PHARMACISTS GROUP



### CPG Membership and Committee

Currently our group membership stands at 137, and additionally, there are 19 other COSA members who have registered as having an interest in cancer pharmacy, which is an improvement on both figures, over the last 24 months.

The second half of 2021 saw some changes with the Committee, with Marissa Ryan and Geeta Sandhu coming in as co-Chairs, after Daniel McKavanagh stepped down from Chair responsibilities to focus on other professional activities. Dan has been a very active contributor to Cancer Pharmacists Group (CPG) over the last 13 years, and we are very grateful for all his enthusiasm and leadership to advance cancer pharmacy. Dan plans to step down from his long tenure with the Committee in early 2022. In November 2021 we welcomed our four newest committee members, Kate Wright, Zainab Reslan, Marliese Alexander and Sonia Cuan.

The CPG Executive Committee currently consists of the following members:

- Marissa Ryan (co-Chair)
- Geeta Sandhu (co-Chair)
- Kimberley-Ann Kerr (Deputy Chair)
- Gail Rowan
- Courtney Oar
- Chi Hao La
- Kate Wright (new)
- Zainab Reslan (new)
- Marliese Alexander (new)
- Sonia Cuan (new)
- Daniel McKavanagh (stepping down early 2022)

### Educational activities

We would like to thank all CPG members, and in particular, the CPG Committee, for their continued support for and involvement in the planning, attendance and delivery of various CPG activities, during another challenging year impacted by the pandemic. The three main educational events held in 2021 were:

#### **Foundation Clinical Practice for Cancer Pharmacists Course: 5 and 12 June 2021**

The Foundation course returned this year (13th year) and was delivered for the first time as a hybrid of pre-recorded lectures and live video conferenced group workshops. The course conveners (Geeta Sandhu, Courtney Oar, Marissa Ryan, Daniel McKavanagh) who were also speakers, in addition to speakers Chi Hao La, Gail Rowan and Kimberley-Ann Kerr, did an amazing job of adjusting to the revised format. The desire for such an educational course was high with the course being sell-out! The recorded footage is planned to be repackaged for the potential virtual delivery of shorter learning modules in 2022.

#### **COSA ASM: 16-18 November 2021**

The ASM was held virtually, with the clinical themes of immunotherapy, PROMs and PREMs. A big thank you to Gail Rowan and Chi Hao La who were the CPG representatives on the ASM organising committee. The ASM was a remarkable success, notably, the "Medicines Matters" session provided an informative update on onco-nephrology and included international and national speakers discussing anticancer drug dosing in kidney dysfunction from a multidisciplinary perspective. Overall, we had high engagement by CPG members, including several members of the Committee, presenting orals and posters, as well as chairing sessions and judging abstracts.

#### **CPG pre-ASM Clinical Development Workshop: 15 November 2021**

Thank you to Gail Rowan and Helen Gougougiannis for their hard work in organising the virtual clinical development workshop held the day before the COSA ASM. Over 40 attendees used the opportunity to further their knowledge and develop their skills over three interactive sessions. The first session outlined educational resources available for developing our own practice, but also for training pharmacists new or in the early stages of their cancer pharmacy career. The second session saw new immunotherapy trials being discussed as well as an in-depth look into the treatment of lung malignancies with immunotherapies. The final session addressed how we can respectfully discuss with our patients, the use of complementary and alternative medicines (CAMs) and availability of best evidence-based CAMs resources. This session was incredibly interactive, with cancer pharmacists discussing their practical experiences of common concerns with CAMs and cancer therapies. Following the workshop conclusion, the CPG Annual General Meeting was held virtually.

#### Other activities

- The CPG Executive Committee collaborated with British Oncology Pharmacy Association (BOPA) to co-host a “My Research Session” webinar in October. Australian Bone Marrow Transplant pharmacist Julian Lindsay showcased his research on Cytomegalovirus management in allogenic haematopoietic stem cell transplantation. There are plans to continue the virtual collaborative effort in elearning for 2022, by sharing education modules and expanding to include international cancer pharmacist groups on regular basis
- Representation by CPG members on behalf of COSA at:
  - PBS Efficient Funding of Chemotherapy Roundtable Consultation (Daniel McKavanagh and Marissa Ryan)
  - TGA repurposing of medicines (Geeta Sandhu)
  - Potential for allergy related to same/similar ingredients in systemic anticancer therapy and COVID-19 vaccines (Marissa Ryan and Daniel McKavanagh)
  - Participation in the review of the National Medicines Policy
  - Feedback and input into the ACSQH requirements for a PBS Electronic Chemotherapy Medication Chart



**Marissa Ryan**  
co-Chair,  
Cancer  
Pharmacists  
Group



**Geeta Sandhu**  
co-Chair,  
Cancer  
Pharmacists  
Group

## EXERCISE AND CANCER GROUP

**2020 was a year unlike any other and despite the challenges of a global pandemic it was encouraging to see how resilient and adaptable clinicians and patients were, as they continued to deliver high quality exercise interventions in a number of novel ways.**

2021 again presented many challenges for exercise-oncology clinicians and researchers, however many services were able to return close to "normal". We have widely seen that telehealth is now being integrated into many services as an integral component of care. This is great for many reasons, including that patients can safely exercise under supervision in the comfort of their own homes, particularly if they are immunocompromised (or if there is an increased wave of COVID-19 cases!). This has been important to ensure that patients can still receive exercise services.

As a reminder, you can find the updated COSA position statement on Exercise in Cancer Care at [www.cosa.org.au/media/332757/cosa-position-statement-v3-dec2020-web-final.pdf](http://www.cosa.org.au/media/332757/cosa-position-statement-v3-dec2020-web-final.pdf)

### 2021 COSA ASM

Members of the COSA Exercise Group were well represented at the 2021 COSA ASM with a number of excellent presentations. There were seven key presentations covering prehab (ie exercise prior to surgery) trials during treatment, in survivorship and in the palliative care phase. There were also 10 fantastic exercise-oncology poster presentations, particularly with some exciting new researchers presenting. Please check out the conference website for all the exercise related work: [cosa2021.org/program](http://cosa2021.org/program).

### COSA Exercise and Cancer research update

There was new publication in *Asia Pacific Journal of Clinical Oncology* by members of the COSA Executive Committee (David Mizrahi, Andrew Murnane, Sharni Quinn, Di Adams, Morgan Atkinson) titled "Physical activity referral patterns and physical fitness levels of Clinical Oncology

Society of Australia (COSA) conference delegates" ([onlinelibrary.wiley.com/doi/epdf/10.1111/ajco.13594](https://onlinelibrary.wiley.com/doi/epdf/10.1111/ajco.13594)). Data was collected from delegates of the last face-to-face ASM (in 2019). Investigators conducted a cross-sectional study that explored referral habits to exercise professionals and attitudes to exercise-based interventions. Secondary aims looked at individuals' fitness levels and the relationship between fitness and exercise referral habits. The study was set up and run during conference breaks at a booth sponsored by COSA, Exercise and Sport Science Australia and the Australian Physiotherapy Association.

67 delegates completed the survey and 49 completed fitness assessments. 60 per cent of Oncology Health Professionals met physical activity guidelines and 92 per cent agreed that physical activity is important among cancer survivors to attenuate treatment-associated symptoms. Most understand the role of exercise physiologists (67 per cent) and physiotherapists (70 per cent) in cancer care. Health professionals believe exercise physiologists (54 per cent) and physiotherapists (22 per cent) are best placed to increase survivors' physical activity levels. Two-thirds of health professionals were aware of the COSA Exercise and Cancer position statement, with 54 per cent referring patients to exercise professionals. 75 per cent of health professionals had above-average aerobic fitness levels, although fitness was not associated with referrals to exercise professionals. Health professionals with higher self-perceived fitness were more likely to provide their own physical activity recommendations ( $r=0.29$ ,  $p=0.02$ ). Conclusion: Overall, there was good awareness of the benefits of physical activity in cancer care among health professionals. However, there remains a large proportion that do not refer patients to exercise professionals, despite good awareness of the COSA Exercise and Cancer position statement. Efforts should be focused on implementing referral pathways from oncology centres to increase the number of active survivors.

### Executive Committee updates

Andrew Murnane stepped down as the Exercise and Cancer Group

Chair in October 2021, after two years in the position and six on the committee. Andrew said "The opportunity to work with such a diverse and dynamic group of cancer clinicians all working towards the promotion of the role of exercise in cancer care in such a supportive organisation has been a real pleasure". David Mizrahi, Research Fellow at the Daffodil Centre (a new venture between Sydney University and Cancer Council NSW), has been appointed as the new Chair and Andrew wishes him all the very best. Also stepping down from the Executive Committee is Elysia Thornton-Benko as the GP representative. We have greatly appreciated the important perspective Elysia has brought to our work. Expressions of interest for new Executive Committee members will be circulated shortly and I highly encourage everyone with an interest and passion for Exercise and Cancer to apply.

The Exercise Group welcomes new members and anyone with an interest in exercise to get involved in our projects. 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 as a COSA Group or Area of Interest. We encourage members from all discipline areas to participate in our group.

### 2022 plans

The Exercise and Cancer group met for the AGM on 6 December 2021 to review the year and discuss plans for 2022. These include:

- **Exercise Implementation Working Group:** This remained on hold in 2021 pending the relaunch of the updated position statement and due to COVID disruptions. The group will reconvene in Q1 of 2022 to finalise the implementation plan for the position statement and develop new resources. These will include a clinician handout, patient handout and FAQs. The COSA Exercise Executive Committee will liaise closely with the Exercise Implementation Working Group on this project.



- **Education:** Numerous seminars were held on exercise-oncology including to Cancer Nurses Society of Australia, and Exercise & Sports Science Australia, while ABC held a segment on "Fighting Cancer with Exercise".
- **Advocacy:** Lobbying will continue between COSA and other organisations including Exercise and Sport Science Australia to champion the role of exercise in cancer care. Stakeholders will be identified (hospitals, state and federal departments of health) to lobby for MBS support (increased number of exercise sessions available for cancer patients) and/or more exercise specialists in oncology hospitals.
- **Research:** The small study published in *Asia-Pacific Journal of Clinical Oncology* in 2021 from data collected at the 2019 COSA ASM showed what is possible from the group. In 2022, the group will explore other opportunities for collaborative to promote exercise-oncology research.



**Andrew Murnane**  
Outgoing Chair,  
Exercise and  
Cancer Group



**David Mizrahi**  
Incoming Chair,  
Exercise and  
Cancer Group

## GASTROINTESTINAL CANCER GROUP

**The year 2021 has again been overshadowed by the ongoing impacts of the COVID-19 pandemic with lockdowns and recurrent waves of the pandemic. Australia Institute of Health and Welfare (AIHW) data from 2020 surprisingly found that the National Bowel Screening Program with home faecal occult blood screening kits were not impacted by the pandemic in that year. However, there were the effects on diagnostic activity and cancer surgery in colorectal cancer surgeries in 2020 which will likely be seen in 2021 figures. The impact on survivals will not be known for some time. [onlinelibrary.wiley.com/doi/10.1111/ans.17071](https://onlinelibrary.wiley.com/doi/10.1111/ans.17071)**

The COSA Gastrointestinal (GI) Cancer Group participated in the reviews of the updated Cancer Council Optimal Care Pathway for People with Hepatocellular Carcinoma (2nd edition), Colorectal Cancer (2nd edition), Oesophagogastric Cancer (2nd edition) and Pancreatic Cancer (2nd edition) which were all published in June 2021 at [cancer.org.au/ocp](https://cancer.org.au/ocp)

The anti-vascular endothelial growth factor (VEGF) monoclonal antibody bevacizumab for metastatic colorectal cancer became available as a biosimilar in June 2021 on the PBS as an unrestricted benefit and the original Roche Avastin was delisted.

In August 2021 the anti-PD1 immune checkpoint inhibitor pembrolizumab was PBS listed for the front-line treatment mismatch repair deficient (dMMR) metastatic colorectal cancer which is the first reimbursement in this country of immunotherapy for gastrointestinal cancers on the basis of the KEYNOTE-177 study: [nejm.org/doi/full/10.1056/NEJMoa2017699](https://nejm.org/doi/full/10.1056/NEJMoa2017699)

On 30 December 2021 it was announced that the oral BRAF inhibitor encorafenib was to be PBS subsidised for the treatment of BRAFV600 mutated metastatic colorectal cancer in combination with the anti-EGFR monoclonal antibody cetuximab as subsequent line systemic therapy. This molecular subgroup is a poor prognostic type of colorectal cancer that was in great need of new treatment options: [nejm.org/doi/full/10.1056/NEJMoa1908075](https://nejm.org/doi/full/10.1056/NEJMoa1908075)

Finally I would like to welcome Connie Diakos from Royal North Shore Hospital who will be taking over from me as the Chair of the COSA Gastrointestinal Group in 2022.



**Desmond Yip**  
Outgoing Chair,  
Gastrointestinal  
Cancer Group

## GERIATRIC ONCOLOGY GROUP

**2021 has been another productive year for the Geriatric Oncology Group. We delivered an educational webinar series ([cosa.org.au/groups/geriatric-oncology/activities/](https://cosa.org.au/groups/geriatric-oncology/activities/)) in collaboration with CNSA focused on cancer in the older adult. These five webinars were led by recognised leaders in geriatric oncology and were very well received. Sessions focused on optimising medicines, immunotherapy, the value of the multidisciplinary team in caring for the older person with cancer, screening tools and identifying frailty in older adults, and an overview of the OlderCan resource and the Older and Wiser study. This webinar series has helped increase knowledge and provide practical guidance to enhance the critical skills required to advance care and improve outcomes for older adults affected by cancer.**

We were pleased to join another geriatric oncology breakfast session at the 2021 COSA ASM – “Enhancing geriatric care in the lung cancer MDT” ([cosa.delegateconnect.co/events/sessions/enhancing-geriatric-care-in-the-lung-cancer-mdt](https://cosa.delegateconnect.co/events/sessions/enhancing-geriatric-care-in-the-lung-cancer-mdt)). Meera Agar, Polly Dufton, Divyanshu Dua, and Heather Lane discussed the impact of geriatrician involvement in multi-disciplinary teams on outcomes for patients with stage III unresectable non-small cell lung cancer, shared their perspective on what best practice looks like when caring for geriatric patients, and shared insights into treatment and management considerations for the geriatric patient. If you registered for the 2021 COSA ASM you can access a recording of this session for the next 12 months.

We continued our work developing the Australian Geriatric Oncology Guidelines, and have been pleased with the level of engagement from a broad range of interdisciplinary clinicians from across Australia. Guidelines in progress include screening older adults for geriatric assessment, and guidelines for referring older adults with cancer for systemic anti-cancer therapy, surgery, and radiotherapy. The screening guideline was published in *JAMA Oncology* in January 2021: Screening Tools for Identifying Older Adults with Cancer Who May Benefit from a Geriatric Assessment – A Systematic Review ([jamanetwork.com/journals/jamaoncology/article-abstract/2774872](https://jamanetwork.com/journals/jamaoncology/article-abstract/2774872)). The team hopes that this review and online guidelines will support clinicians to routinely screen older adults with cancer for vulnerabilities, and to complete a geriatric assessment for those patients that might benefit.

We were very pleased to support the creation of a new subgroup in 2021 – Geriatric Oncology Emerging Experts and Researchers (GOEER), an initiative led by Michael Krasovitsky. GOEER is drawing together an interdisciplinary range of “emerging experts and researchers” from across Australia with an interest in geriatric oncology. GOEER is aimed at expanding and deepening the field of geriatric oncology amongst trainees and early career clinicians, and has a number of active projects underway including

research endeavours, advocacy programs and geriatric oncology implementation reviews.

During 2021 we surveyed our membership to build information on the landscape of geriatric oncology initiatives across Australia. We hope this information will help us to offer more tailored opportunities to meet the needs of both emerging and more established geriatric oncology services and connect like-minded people who want to improve care and outcomes for older adults affected by cancer.

We have also been working to ensure geriatric oncology principles and priorities are considered in the development of the Australian Cancer Plan by Cancer Australia. Two of our Executive members provide important linkages with international geriatric oncology initiatives, which provides valuable insights that inform our recommendations to the Australian Cancer Plan. Heather Lane continues in her role as Australia’s International Society for Geriatric Oncology (SIOG) representative, and Christopher Steer is working with the Cancer and Aging Research Group (CARG). This work highlights the importance of collaborating and sharing learnings on the same issues that face geriatric oncology both in Australia and internationally, and working together on our common goal to improve outcomes for older adults with cancer.

We have also continued to keep members updated on the latest information and research in the geriatric oncology space through our twice-yearly *GO eNews* ([cosa.org.au/groups/geriatric-oncology/resources/](https://cosa.org.au/groups/geriatric-oncology/resources/)) and we thank our editors Wee-Kheng Soo and Polly Dufton for their editorial leadership. We would also like to thank all members who are involved with our initiatives to improve outcomes for older adults with cancer, and we hope there are opportunities for engagement during 2022 as we work towards building a community of practice in geriatric oncology

### SIOG 2021 update

SIOG ([siog.org](https://siog.org)) has continued to promote geriatric oncology and deliver educational opportunities during 2021, despite major disruptions to health services due to the COVID-19 pandemic for many SIOG members

internationally. Whilst face-to-face conferences have not been possible, they have hosted well-run virtual events. The SIOG 2021 Annual Conference was held in a virtual format from 4-5 November, providing comprehensive and concise updates across the disciplines, alongside more detailed updates on current research activities. The multidisciplinary discussion sessions enabled consideration of the latest research in a clinical context. The second edition of the Canberra Advanced Course was held virtually on the weekend of 22-23 January 2022. Again, international SIOG members with impressive research credentials were amongst the many speakers. Day one focused on key principals in geriatric oncology, while day two focused on multidisciplinary case-based discussions, to enable participants to consider these principals in a clinical context. SIOG has continued to produce a range of guidelines ([siog.org/resources/resources-siog/siog-guidelines/](http://siog.org/resources/resources-siog/siog-guidelines/)) including updated recommendations regarding the management of older patients with breast cancer; and recommendations on the rollout of COVID-19 vaccines among older adults with cancer; and a position statement on oncology and cancer nursing of older adults and cancer. SIOG also provides a range of educational opportunities and information including webinars ([siog.org/programmes/education/learning-demand/](http://siog.org/programmes/education/learning-demand/)) and a regular blog ([siog.org/resources/news-and-features/siog-blog/](http://siog.org/resources/news-and-features/siog-blog/)) providing a broad variety of articles ranging from expert opinions on specific aspects of care of older adults with cancer to more practical view on the role of oncogeriatrics in an ageing world.



**Meera Agar**  
Chair, Geriatric  
Oncology Group

## LUNG CANCER GROUP

**I was privileged to represent COSA recently for the first of three planned Cancer Australia lung cancer screening key stakeholder workshops. The meeting engaged in robust discussion around scoping of program tools, information and communications to support the early design of a potential lung cancer screening program in Australia. At COSA we are very supportive of this movement.**

The focus outside of the screening commitment, is in working with our now formally COSA-affiliated Thoracic Oncology Group of Australasia (TOGA), and Prof Michael Millward as the newly appointed TOGA Chair on COSA Council. Welcome Michael.

I will be working in the coming months with the TOGA Steering Committee for the Annual Scientific Meeting (ASM) to be held in Sydney 21-22 July 2022. For Interested members please keep this exciting multi-disciplinary meeting on your radar.



**Malinda Itchins**  
Chair, Lung  
Cancer Group

## NEUROENDOCRINE TUMOURS GROUP

**I shall endeavour to start this annual report by mentioning something other than COVID. We have finished writing the draft COSA Neuroendocrine Tumours (NET) guidelines which are ready for circulation. Thank you to the working group members who have put in time and effort to ensure that the drafts and revisions have occurred in a timely manner. I continue to be inspired and humbled by the collaboration that has proved possible under the COSA banner, and look forward to future interdisciplinary projects with this lovely group of colleagues.**

Yet, like much of the last year, the guidelines project has also been beset by unforeseen events. Whilst we are ready to upload the guidelines, the Wiki platform is in the process of being upgraded by Cancer Council Australia. The process of website migration has meant an inevitable delay to the consultation process. I am grateful to the writing group for their ongoing patience and support despite this minor setback. I look forward to the consultation process in the coming months, and the publication of the final version by the end of 2022.

As the world "restarts" in 2022, there will be more opportunity to access trials and input on policy matters relevant to patients affected by NETs. I look forward to seeing how the COSA NET Group can continue to collaborate and advocate for improved patient care in Australia.



**David Chan**  
Chair,  
Neuroendocrine  
Tumours Group

## NUTRITION GROUP

**A new year is a time to reflect on the past achievements and look forward to new opportunities, and while 2021 certainly didn't unfold as many would have hoped, the Nutrition Group members have continued to deliver excellence in cancer care and research worth celebrating.**

In our first report since 2021 wrapped, it's fantastic to reflect on the outstanding nutrition expertise showcased at the 2021 COSA ASM. We were thrilled to welcome Prof Vickie Baracos, University of Alberta, internationally-renowned expert in pathophysiology of skeletal muscle atrophy and cachexia. Prof Baracos delivered two incredible presentations on "Global advances in pre-habilitation" and "Cancer-related malnutrition and sarcopenia", vital information for every cancer clinician. There was a high standard of cancer nutrition research featured in the program and we thank Jenelle Loeliger for her contribution to the organising committee and also congratulate her on receiving the Dietitians Australia Research Prize in well-deserved recognition of her leadership in improving nutrition care and information for cancer patients.



Recipient of the Dietitians Australia Research Prize, Jenelle Loeliger, AdvAPD, presented her research titled "How do we improve nutrition care and information for cancer patients? Exploration of patient, carer and health professional access, perceptions and practices: A mixed-methods study" in the "Best of the Best Orals - Translational Research" at the COSA 2021 ASM.

In the coming year, the Nutrition Group will be undertaking further work focusing on the implementation of the COSA position statement of Cancer-Related Malnutrition and Sarcopenia and progressing the updates to the COSA evidence-based guidelines for nutritional management of adult patients with head and neck cancer. We hope to continue our

partnership with Dietitian Connection for Malnutrition Week and Dietitians Australia to again offer the Research Prize at this year's ASM in Brisbane for which we are fortunate to have Dr Teresa Brown representing the nutrition group.

While 2022 and a number of exciting projects are already underway, it's a time to also acknowledge the caring, compassion and kindness our multidisciplinary cancer colleagues continue to provide through challenging circumstances, no doubt inspired by the resilience of our patients and caregivers. Come November, we hope to see you in person at COSA 2022.

In the meantime, the Nutrition Group would love to hear from anyone interested in becoming involved with our projects and about opportunities for collaborating with other groups where nutrition expertise can value-add to their initiatives.



**Merran Findlay**  
Chair, Nutrition  
Group



## PSYCHO-ONCOLOGY GROUP

**Reflecting on 2021, it has been a year of challenges but also opportunities. One opportunity we have seen in our clinical cancer world has been the continued use of technology to provide high-quality and safe clinical services using telehealth, and it has raised the need to consider in greater depth how we provide sustainable and robust telehealth. For those involved in research, 2021 has been an opportunity to work on exciting projects including those which consider COVID-19 and its impact on cancer care.**

The COSA Psycho-Oncology Group were successful in a proposal to rename the new investigator award, the Professor Phyllis Butow New Investigator in Psycho-oncology Award. This is in recognition of the enormous contribution that Prof Butow has made in teaching, encouraging, supporting and mentoring new psycho-oncology researchers. This

award, co-sponsored by the Psycho-oncology Co-operative Group, sits alongside the Melanie Price Psycho-oncology Award. It was an absolute delight to be able to award Prof Gail Garvey the Melanie Price Psycho-oncology Award in recognition of her huge contribution to psycho-oncology, especially in the area of Indigenous psycho-oncology. It was wonderful also to have Dr Joanna Fardell win the inaugural Professor Phyllis Butow New Investigator Award for her amazing accomplishments to date.

The 2021 COSA ASM again was an opportunity to highlight and showcase the research activity of our Psycho-Oncology Group. Thank you to A/Prof Lesley Stafford who represented psycho-oncology on the organising committee. Despite not being able to meet in person, the ASM had a stimulating program with great content and thought-provoking discussions.

The 2022 COSA 49th Annual Scientific Meeting will be 2-4 November 2022 at the Brisbane Convention & Exhibition

Centre. Maree Grier, Senior Clinical Psychologist, has kindly agreed to be our psycho-oncology organising committee representative.

As 2022 progresses, I look forward to ongoing collaboration and communication with our COSA Psycho-Oncology Group members. As usual, please feel free to contact ([laura.kirsten@health.nsw.gov.au](mailto:laura.kirsten@health.nsw.gov.au)).



**Laura Kirsten**  
Chair,  
Psycho-Oncology  
Group

## REGIONAL AND RURAL GROUP

**The Regional and Rural Group's major activity and success this year was being a very active voice and considerable player in convincing the Federal Government to continue telephone tele-health consultations for a further six months.**

Just two weeks prior to Christmas there was a rather sudden announcement that all but one telephone-based telehealth consultation would no longer be funded by Medicare. The Regional and Rural Group worked closely with the COSA Executive, Private Cancer Physicians of Australia (PCPA), Breast Cancer Network Australia (BCNA) and many other concerned oncologists and organisations over the Christmas period to highlight the disproportionate and inequitable effect the elimination of telephone consultations would have on regional and rural patients. One of our patients spoke of how she would need to drive

to the top of a nearby hill in order to access internet speeds sufficient to participate in a video consultation with her oncologist. Following the concerted effort, Minister Hunt reversed the decision to abolish many telehealth item numbers and agreed to continue all telehealth until June 2022. This was a welcome win for advocacy which lies at the core of COSA's mission. However more work remains to be done to embed full telehealth permanently into our cancer care models. We also need to focus on ensuring regional and rural patients can access sub-specialist services (cancer genetics) via telehealth without substantial out-of-pocket expense. This telehealth item was unfortunately not re-instated in January 2022.

In 2022, the Medical Research Future Fund (MRFF) Regional, Rural and Remote clinical trials grant will finally see clinical trial infrastructure and trial staff begin the expansion of the COSA Tele-trial Model. Members of the Regional and Rural Executive

Committee continue to play major roles in shaping the projects that have been funded by the MRFF. This once in a generation investment of funds into regional clinical trials will be transformative to rural Australia. I am eager to report the numbers of new trials, patients recruited and tele-trial enabled trials that will open as a result of this program. Stay tuned.



**Rob Zielinski**  
Chair,  
Regional and  
Rural Group



## SURVIVORSHIP GROUP

**We are pleased to report on the Survivorship Group's excellent work which has continued during 2021. Our work over the last three years has been guided by our 2019-2021 Strategic Plan, and we are very proud of our achievements during this period (achievements can be found on [cosa.org.au](http://cosa.org.au)).**

We drafted the 2022-2024 Strategic Plan to help guide our priorities for the coming years and appreciate the feedback provided by our members. We look forward to sharing the new strategic plan with you in 2022.

Many of our Group members were able to join us at our virtual Annual General Meeting (the minutes can be found at [cosa.org.au](http://cosa.org.au)) in November, at which the Chair role was handed over from Michael Jefford to Ray Chan. Our Group's success is due to the commitment and dedication of our members, and we would like to express our sincere thanks to all – our Executive providing leadership, our many working group members, and all our other members who support our projects and engage with our activities.

Working groups have been driving several initiatives that have made great progress over the last year:

The **Patient Reported Outcomes (PRO) working group** (Chaired by Bogda Koczwara) published its value proposition in the *Medical Journal of Australia* "Patient reported outcomes and personalised cancer care" ([mja.com.au/journal/2021/214/9/patient-reported-outcomes-and-personalised-cancer-care](http://mja.com.au/journal/2021/214/9/patient-reported-outcomes-and-personalised-cancer-care)). This paper provides the foundation for an advocacy approach and outlines the principles of clinical use of PROs in cancer care. The working group are now working collaboratively to map the use of Patient Reported Outcome Measures (PROMs) in clinical practice across Australia and New Zealand. Together with a mentorship group, the working group also provided support to one of our COSA Survivorship Research Fellows, Carolyn Mazariego. Carolyn led a successful funding application to progress this work. The team will be developing an implementation toolkit for PRO collection at the health service team level, working collaboratively with researchers from the University of Toronto.

PROMs also featured as a theme at the 2021 COSA ASM, and we congratulate the convenor Kate Webber and the ASM program committee for delivering such an excellent program. Many of our members contributed to the success of this virtual conference and helped promote the importance of survivorship to attendees.

The **Financial Toxicity working group** (Chaired by Ray Chan) conducted a national survey of multidisciplinary health professionals to help better understand the current beliefs and practices regarding financial toxicity for cancer patients. This information will inform development of a care pathway to support the delivery of consistent, safe and evidence-based care, and the prevention or minimisation of financial toxicity for people with cancer. The working group is currently drafting two manuscripts for submission to peer reviewed journals. In late 2021, the working group also delivered a webinar in collaboration with Cancer Nurses Society of Australia (CNSA) that challenged the misconception that nothing can be done to address financial toxicity (available at: [cosa.org.au/groups/survivorship/education](http://cosa.org.au/groups/survivorship/education)).

Two new working groups were formed focusing on **Primary Care** (Chaired by

Joel Rhee) and **Survivorship Policy** (Chaired by Michael Jefford). A single working group was initially established to consider how to integrate primary care more effectively in survivorship. These deliberations evolved and the new working groups were created as there was a need to separately inform primary care and survivorship considerations within the development of the Australian Cancer Plan by Cancer Australia.

Our inaugural **Survivorship Research Fellowship** initiative was a great success. Carolyn Mazariego's study developed priority recommendations for the service level implementation of PROs into clinical cancer care. Carolyn was awarded Best of the Best Orals: PROMs and PREMs at the 2021 COSA ASM and a paper has been published in the *Journal of Cancer Survivorship* ([link.springer.com/content/pdf/10.1007%2Fs11764-021-01135-2.pdf](http://link.springer.com/content/pdf/10.1007%2Fs11764-021-01135-2.pdf)).

Fiona Crawford-Williams led a project to establish research and infrastructure priorities for cancer survivorship in Australia. Fiona's paper has been published by *Supportive Care in Cancer* ([rdcu.be/cE15c](http://rdcu.be/cE15c)), and provides direction on research priorities for anyone planning to conduct or fund survivorship research. *See right.*

We also welcomed back our third Fellow, Julia Morris, who returned from parental leave at the end of 2021. Julia has been investigating current Australian survivorship research activity, assessing population groups and research designs, as well as perceived gaps in research and barriers. We would like to congratulate our three Fellows on their commitment to their projects and their achievements. We also thank everyone who provided mentoring support to help ensure this program's success. You can find about more about our Fellows on the COSA website: [cosa.org.au/groups/survivorship/fellows/](http://cosa.org.au/groups/survivorship/fellows/)

**Collaborative survivorship webinars** continued during 2021 in partnership with the Australian Cancer Survivorship Centre, CNSA and Cancer Council Victoria. We delivered educational opportunities focused on Nurses integrating optimal survivorship care, and Allied health providing cancer survivorship care (view both webinars at: [cosa.org.au/groups/survivorship/education/](http://cosa.org.au/groups/survivorship/education/)).

A one-page summary of Fiona Crawford Williams's study of research priorities in cancer survivorship in Australia

# CANCER SURVIVORSHIP RESEARCH PRIORITIES IN AUSTRALIA



Fiona Crawford Williams, Bogda Koczwara, Raymond Chan, Janette Vardy, Mahesh Iddawela, Karolina Lisy, Julia Morris, Gillian Mackay, Michael Jefford on behalf of the COSA Survivorship Group

The number of cancer survivors, defined as people living with and beyond a diagnosis of cancer, continues to grow. Research plays an integral role in providing the evidence to support best practice cancer survivorship care.

In 2020, the Clinical Oncology Society of Australia's Survivorship Group undertook a research study to establish expert consensus on the key priorities for cancer survivorship research in Australia.

## Background

Australian and international literature was reviewed to identify existing research priority items and research gaps relevant to cancer survivorship<sup>1,2,3,4</sup>. Items were mapped across five distinct categories adapted from the Quality of Cancer Survivorship Care Framework<sup>5</sup> and National Institutes of Health focus areas of grant funding<sup>6</sup>. These included four research categories: physiological outcomes; psychosocial outcomes; population groups; and health services, and one category regarding priorities around research infrastructure.

## Methods

A two-round online, modified-Delphi study was conducted between November 2020 and February 2021. The panel of experts included cancer survivors, academic researchers, health professionals, advocacy organisations, and policymakers. In round one, participants ranked the importance of 77 items on a five-point scale, could make comments on wording and relevance, and suggest additional items. In round two, participants ranked the top five priorities within each category. The type of research needed for each priority, such as biological, exploratory,

intervention development, or implementation, was also selected.

## Results

Response rates were 76% (63/82) and 82% (68/82) for rounds one and two, respectively. Participants were predominantly female (74%) and had been working in cancer survivorship for an average of 15 years. After round one, 12 items were added, and 16 items combined or reworded. The top five priorities from each category and corresponding types of research required are shown below.

## CANCER SURVIVORSHIP RESEARCH PRIORITIES

Physiological Outcome Priorities	Psychosocial Outcome Priorities	Population Group Priorities	Health Services Priorities
1 Cancer progression or recurrence	1 Fear of cancer recurrence	1 Rare or under-represented cancers	1 Quality of care
2 Management of comorbidities	2 Economic issues	2 Advanced or recurrent disease	2 Models of care
3 Fatigue	3 Distress, anxiety and depression	3 Rural, regional, remote populations	3 Self-management
4 Exercise and physical activity	4 Adaptation and adjustment	4 Paediatric and childhood cancer survivors	4 Communication
5 Cognitive function	5 Work and study issues	5 Survivors with lower socio-economic status	5 Patient navigation

Research Infrastructure Priorities				
1. Data availability and data linkage	2. Rigorous reporting standards	3. Collaborative research	4. Funding opportunities	5. Investment in researchers

### Legend – Types of research

  = Biological/aetiological
   = Exploratory
   = Intervention development
   = Implementation and dissemination

## References

1. Jacobson, P.B., et al. Identification of key gaps in cancer survivorship research: findings from the American Society of Clinical Oncology Survey.
2. Lagergren, P., et al. Cancer survivorship: an integral part of Europe's research agenda.
3. Takahashi, W. Cancer survivorship: current status of research, care, and policy in Japan.
4. Unpublished, R., et al. A Pan-Canadian Framework for Cancer Survivorship Research.
5. Neikhydylo, L., et al. Developing a Quality of Cancer Survivorship Care Framework: Implications for Clinical Care, Research, and Policy.
6. Rowland, J.H., et al. Survivorship science at the NCI: lessons learned from grants funded in fiscal year 2016.

## The Flinders-COSA Survivorship Conference

took place in early 2021 as a virtual event with the theme "Life after cancer. Redefined, Reimagined and Rebuilt". The conference tackled important topics and some challenging concepts including survivorship in the context of incurable cancer, neurological toxicity including peripheral neuropathy and cognitive changes, and survivorship for Aboriginal and Torres Strait Islander people. We thank Bogda Koczwara as convenor and the conference team for creating another stimulating program.

A Roundtable on Cancer Survivorship for Aboriginal and Torres Strait Islander people ([tactics-cre.com/resources](https://tactics-cre.com/resources)) preceded the Survivorship Conference, co-hosted with Menzies School of Health Research. The Roundtable was the beginning of an important discussion about cancer survivorship

and care for Aboriginal and Torres Strait Islander people, which included consideration of existing survivorship models and their relevance, and identifying priority areas to progress.

Our Group is proud to be engaged with international survivorship initiatives, and are mindful of how these may inform or be adapted to promote and complement our model of care agenda. These include the Multinational Association of Supportive Care in Cancer (Exercise Oncology, and Survivorship), American Society of Clinical Oncology, the International Psycho-Oncology Society, and the Global Partnership on Self-management in Cancer.

Our Group has also continued to keep everyone informed with our regular Survivorship eNews (you can read the latest here: [cosa.org.au/groups/](https://cosa.org.au/groups/)

survivorship/resources/). You can also follow our work on Twitter @COSA\_Surviv. Many thanks to Fiona Crawford-Williams and Carolyn Mazariego for their editorial leadership and helping us to stay informed.

We look forward to continuing our work in 2022 and hope there will opportunities for us to connect at the 4th Victorian Cancer Survivorship Conference, as well as at future COSA events.



**Ray Chan**  
Chair,  
Survivorship  
Group

# AFFILIATED ORGANISATION REPORTS

## AUSTRALASIAN GASTRO-INTESTINAL TRIALS GROUP



**Since the formation of the Australasian Gastro-intestinal Trials Group (AGITG) in 1991, our key priority has been to undertake patient-centric research to improve medical care and practice in the treatment of gastro-intestinal (GI) cancer. What started with a small group of researchers coming together to improve GI cancer survival rates, has over 30 years grown to a network of over 1,500 dedicated health professionals, seeking to improve patient care and medical practice.**

This year, the impact of COVID continued to disrupt the lives of many, cancer didn't stop and neither did we. This year's achievements reflect just how far we've come and the dedication of our researchers even when working in some of the most challenging times.

### **Our trial achievements**

Our INTEGRATE IIb stomach cancer trial and RoLaCaRT-1 colon cancer trial both opened to patient enrolment. INTEGRATE IIb is an international clinical trial that is part of our larger INTEGRATE study. This clinical trial is testing the combination of chemotherapy and immunotherapy, which researchers hope can prolong overall survival and improve quality of life for those with stomach cancer.

RoLaCaRT-1 is a new surgical clinical trial comparing robotic surgery to laparoscopy for colon cancer patients and is the first of its kind in the world to determine the benefits of robotic surgery to laparoscopy.

Two international AGITG clinical trials achieved full patient enrolment and moved to the analysis phase. The multidisciplinary TOPGEAR study involved the collaborative efforts of radiation oncologists, medical oncologists and surgeons to determine the optimal adjuvant regimen for potentially curable gastric cancer. The ASCOLT trial is evaluating the safety and efficacy of aspirin in improving overall survival in colorectal cancer patients.

Two AGITG Innovation Grant funded trials also closed to patient enrolment. The FORECAST-1 colorectal cancer trial reached its patient recruitment target in November and the MONARCC colorectal cancer trial closed to patient enrolment in October. Thank you to the GI cancer community supporters who made these trials possible, through their generous donations.

Both the SSGXXII GIST trial and VADER colon cancer trial received Medical Research Future Fund (MRFF) grants. Both these trials are due to open to patient enrolment in 2022.

### **Continuing to fund new research**

Over the past six years, we have awarded over \$1.8 million in grants to further GI cancer research, all thanks to the generous donations from our dedicated GI cancer community supporters. In 2021, we were fortunate enough to award four community-funded grants.

### **Innovation Grant**

Prof Eva Segelov and Dr Shehara Mendis were awarded the 2021 Innovation Grant for their new research projects. Prof Segelov's project is seeking to investigate if DNA found in colorectal cancer patient's tumour can be used as a way of predicting disease reoccurrence.

Dr Mendis' project focuses on the use of immunohistochemistry to predict who might benefit most from Epidermal Growth Factor Receptor inhibitors in advanced colon cancer patients.

### **Gastric Cancer Research Grant**

The Gastric Cancer Research Grant (including Linitis Plastica) was awarded to Prof Niall Tebbutt. This trial will develop and apply artificial intelligence (AI) based image analysis for scoring of PD-L1 immunohistochemistry in GI cancer.

This \$100,000 grant was made possible as a direct result of the generous donations from our dedicated GI cancer community of supporters. Special thanks must be given to Trine Kirkegaard-Simpson who tragically lost her husband Matt to Linitis Plastica. Trine has fundraised tirelessly to ensure more research focuses on rare cancers like Linitis Plastica and Signet Cell Ring Carcinoma.

### **Cholangiocarcinoma Idea Generation Workshop Grant**

After presenting his research concept at the Cholangiocarcinoma Idea Generation Workshop Grant, Dr Daniel Croagh has been named the recipient of the AGITG-Pancare Cholangiocarcinoma Idea Generation Workshop Grant. The \$100,000 grant will go towards developing Dr Croagh's comprehensive molecular profiling of advanced biliary cancer study. This community-funded grant was made possible by supporters of the GI Cancer Institute and Pancare Foundation.

### **2021 Annual Scientific Meeting**

The 23rd AGITG Annual Scientific Meeting (ASM) boasted a record number of attendees, held virtually over four days, on 12-15 October. Over 500 delegates joined the many workshops, presentations, panel discussions, award presentations and Q&A sessions. This ASM also marked a special occasion, commemorating the 30th anniversary of the AGITG, by recognising pioneers, and looking to future leaders.

As well as keynote presentations by the invited faculty and updates on AGITG trials, the work of AGITG members was recognised at the annual awards presentation. It was the first time as well that the inaugural Christine Aiken Memorial Site Award was presented

in Christine Aiken's honour. Christine worked exclusively on AGITG research at the University of Sydney NHMRC Clinical Trials Centre for 16 years as a Trial Coordinator and Associate Oncology Project Manager and passed away in 2020.

With all the positive feedback received, it's safe to say the virtual ASM was a successful one. It also served as the perfect platform to be able to recognise achievements over the past 30 years and look towards a bright future.

### **The Gutsy Challenge**

AGITG Innovation Grants are funded through community support from the GI Cancer Institute. These important pilot and translational research studies are made possible thanks to the support of AGITG members and the community who take on the Gutsy Challenge to raise funds and awareness for GI cancer research.

In 2021, we were able to host the Mt Kosciuszko Gutsy Challenge Trek in March. Over 60 fundraisers, including CEO Russell Conley, joined trek leader, Prof Nick Pavlakis along the 17km

summit walk. The trekkers raised an incredible \$140,000 for the Innovation Grant to fund new research concepts.

### **30 years later**

Our achievements and progress made over the last 30 years, while commendable, has not been accomplished alone. The dedication of our members, and the commitment of the patients, and their families, who take part in our trials has allowed us to make the impact we have. We look forward to 2022 and continuing to improve treatments for the 28,600 Australians diagnosed with a GI cancer every year.



**Lorraine Chantrill**  
Chair,  
AGITG



## AUSTRALASIAN LEUKAEMIA AND LYMPHOMA GROUP



### Remaining present with a purpose

We have seen a strong drive of new clinical trials, with the success of new Medical Research Future Fund (MRFF) grants allowing us to boost capacity for international collaboration and the ability to work without boundaries.

Innovating new models to break barriers, we have continued to make progress to navigate the pandemic, remaining present with a purpose and keeping on target to deliver better treatments, and better lives in every way possible. This is exemplified in our two Scientific Meetings in 2021, which both drew record attendance and saw international engagement move to an exciting new scale.

While we couldn't attend the American Society of Hematology (ASH) Conference in person this year, we were still able to present the success of our trials, as well as having trials such as Prof Harry Iland's APML5 trial presented at the European Hematology Association (EHA) virtual conference and Prof Hang Quach's MM23 trial at the American Society of Clinical Oncology (ASCO).

The Australasian Leukaemia & Lymphoma Group (ALLG) continued strong engagement in the National Blood Cancer Taskforce and we thank the Leukaemia Foundation for their continued efforts to administer the grant and the secretariat services.

In April 2021, the ALLG presented on the topic of real-world evidence to the Medicine Australia partners forum where we were able to showcase the value and national asset that the National Blood Cancer Registry (NBCR) has become.

The ALLG with our Haematology Society of Australia and New Zealand colleagues submitted to the

Government "Inquiry into approval processes for new drugs and novel medical technologies in Australia" (see our statement at [ALLG.org.au](http://ALLG.org.au) [tinyurl.com/3zj33ds8](https://tinyurl.com/3zj33ds8)) We were subsequently invited to speak at the public hearing on the 23 April 2021 where we were able to, from our submission, reiterate that quality evidence informs decision making, and we believe that clinical trials provide the best evidence base for access to new novel therapies. The inquiry report has resulted in 31 recommendations and many of these relate to the importance of improving the clinical trial and research environment in Australia.

### ALLG Scientific Working Parties are our engine room

The ALLG's Scientific Working Parties form the engine room of the organisation from a membership perspective. They are active forums for workshopping ideas from their infancy, developing protocol for clinical trials and then publishing and acting upon their findings.

By continuing to develop trials from within the Working Parties, the groups align to allow broader reach, increased feasibility, and faster facilitation, all with a view to getting trials to market more quickly as demonstrated in the NHL31 TREBL1 lead by Prof Maher Gandhi; which achieved reaching its target accrual a year ahead of schedule.

### Nurturing our future leaders

The year has also seen young investigators stepping up to take leading roles in trials. The ALLG supports the industry's future leaders with mentoring across our research endeavours. We welcome their opportunity to participate in the various committees and subcommittees of ALLG to set the research agenda and strategies, inviting fresh thinking and new knowledge from the best and brightest.

We have created new opportunities in the Scientific Meeting program for more members to be engaged, and we have been able to put forward new advocacy efforts for our New Zealand members through strong engagement lead by the Chairs of the Medicines Access Committee NZ Prof Claire

Hemmaway and Dr Travis Perera.

In addition, we hosted a special session during the October 2021 Scientific Meeting to engage with early career clinician researchers about a new mentee program with ALLG's Scientific Advisory Committee. The initiative for ALLG member trainees, fellows and registrars, interested in research, encouraged them to apply for the mentee position to draw on the experience of our Scientific Advisory Committee, so that together they can elevate and progress great ideas in research for patients with blood cancer.



Peter Mollee  
Chair, ALLG  
Scientific Advisory  
Committee



## AUSTRALIA AND NEW ZEALAND SARCOMA ASSOCIATION



**Australia and New Zealand Sarcoma Association (ANZSA) looks forward to the opportunities that 2022 brings as we move forward to deliver impactful research and improved outcomes for the sarcoma community. While working from home due to COVID-19 is not ideal, the ANZSA team continues to focus on delivering high-quality sarcoma research and clinical trials by working closely engage with our clinicians, researchers and consumers.**

### ANZSA ASM 2021

While it was unfortunate that we were unable to organise a face-to-face Annual Scientific Meeting (ASM) for the second year in a row due to COVID-19, we were grateful that over 180 local and international delegates were able to join us virtually via Zoom Webinar.

The ASM 2021 theme was "Coming together", and we were honoured to have five esteemed international sarcoma specialists deliver their talks to our delegates.

The ASM kicked off with an excellent presentation by Dr Alda Tam, Professor in the Department of Interventional Radiology at the University of Texas M.D. Anderson Cancer Centre, who presented on interventional techniques for soft tissue and desmoid ablation.

Dr Sebastian Foersch from the Institute of Pathology, University Medical Centre Mainz, gave a very interesting talk on the use of artificial intelligence in pathology for diagnosis and survival prediction in soft tissue sarcoma.

This was followed by an engaging orthopaedic session which featured The Great Debate on "Old school vs new technology in orthopaedic surgery" by orthopaedic surgeons, Dr Gerard Powell and Dr Richard Boyle.

Our keynote session for day one was delivered by Prof Michiel van de Sande,

Professor in Orthopaedic (paediatric) oncology in the Leiden University Medical Centre (LUMC), who spoke about personalised care from an orthopaedic perspective.

Day two of our ASM started with "The Professor Martin Tattersall Lecture", delivered by Dr Jeffrey Toretsky, chief of MedStar Georgetown University Hospital's Division of Paediatric, Adolescent, and Young Adult Haematology/Oncology. 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 Toretsky gave a wonderful talk on his lifelong work titled "From design on a napkin to a clinical trial: a 20-year quest to improve survival for Ewing sarcoma patients".

Throughout the two ASM days, we had local sarcoma specialists from various disciplines and researchers sharing case studies. We also had robust discussions on patient's involvement and perspectives when it comes to treatment and life after treatment.

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

If you would like to watch the recording of the ASM sessions, please email us ([contact@sarcoma.org.au](mailto:contact@sarcoma.org.au)).

### Save the date

Our ASM for 2022 will be a hybrid meeting held 4-5 November.



**ANZSA Sydney Sarcoma Experts Meeting**

### ANZSA Strategic Plan 2022-2024

We are pleased to announce that our ANZSA Strategic Plan 2022-2024 has been launched. You can download it from our website. We are grateful for the involvement of various internal stakeholders such as ANZSA members, the scientific advisory committee (SAC), the consumer advisory panel (CAP) and the orthopaedic committee for their input.

### Sarcoma guidelines working group

The Sarcoma Guidelines project is well underway. We have over 40 members in the working group consisting of surgeons, medical oncologists, radiation oncologists, general practitioners, pathologists and consumer representatives with ANZSA Director, Prof Angela Hong, as the working group Chair. The guidelines will cover three main topics: Does Treatment at Specialised Sarcoma Centres Improve Outcomes, Retroperitoneal Sarcoma and Paediatric and AYA Sarcoma. We are currently conducting several systematic reviews of the literature to answer specific research questions within those mentioned topics. We aim to finalise the guidelines for submission to the National Health and Medical Research Council (NHMRC) in July 2022.

### Database manager workshop

The annual ANZSA ACCORD sarcoma database workshop for data managers was held virtually in October 2021. This workshop covered site updates, current and upcoming data projects, site reporting and data quality as well as addressing specific data entry questions and project data cleaning. It was a productive meeting and we hope to be able to conduct this meeting in person next year.

Lastly, while COVID-19 continues to be challenging for many in our sarcoma community, we are thankful for our patients, collaborators, donors and members for their continued support, generosity and trust in us and the work we do.



**Denise Caruso**  
Chief Executive  
Officer,  
ANZSA

## AUSTRALIA NEW ZEALAND GYNAECOLOGICAL ONCOLOGY GROUP



### **Australia New Zealand Gynaecological Oncology Group (ANZGOG) has achieved significant research outcomes in 2021 and celebrated a number of recruitment milestones:**

- iPRIME, an ovarian cancer study part of the OASIS Initiative, reached 100 per cent recruitment
- TIPS reached 50 per cent recruitment, an ovarian cancer surgical feasibility study
- ECHO, an exercise intervention ovarian cancer study, reached 400/500 patient accrual
- SOLACE2, an ovarian cancer study part of the OASIS Initiative, reached 75 per cent recruitment

ANZGOG's IGNITE study received approval to expand one of its cohorts – the Cyclin E1 over-expressed without gene amplification cohort – doubling the total number of planned patients in that cohort (now 64 patients). This was the result of positive signalling from an interim analysis in this OASIS Initiative study.

Following the launch of TR-ANZGOG in 2020, the translational research initiative is now being embedded in its first ANZGOG trial, ITTACc. The cervical cancer study will be the first of many clinical trials to integrate TR-ANZGOG in the future.

ANZGOG's EnDomEtrial caNcer Research Initiative (EDEN) was established this year. The EDEN Steering Committee is finalising the strategic direction for the research direction and is working with over 60 members who volunteered to participate in the five focus groups looking at activities in prevention, early diagnosis, surgery, survivorship, adjuvant and recurrent disease, translational research, advocacy and funding. EDEN next steps will

be presented at the 2022 Annual Scientific Meeting, 23-26 March 2022.

ANZGOG's first homegrown clinical trial – OUTBACK – and Principal Investigator Linda Mileschkin, achieved a significant achievement when the American Society of Clinical Oncology (ASCO) selected OUTBACK – a cervical cancer study – to be presented during the Plenary Session at the 2021 Annual Scientific Meeting. It was a great honour and a true reflection of the nature of the trial – the robustness of the question and how it has been answered within the trial. All credit to all senior groups involved in OUTBACK, including Principal Investigator Prof Linda Mileschkin and everyone else associated with the management of the study. ANZGOG's PHAEDRA study was also accepted to be a part of the ASCO Poster Session – Gynecologic Cancer. This recognition at ASCO was a great example of ANZGOG's gynaecological cancer research changing practice internationally.

2021 also saw our first Virtual Annual Scientific Meeting (ASM). Despite not being face-to-face, ANZGOG'S ASM2021 was our most attended event to date, with a total of 340 registrations. After the postponement of last year's ASM, we thank our three keynote international speakers who joined us virtually to each deliver outstanding and insightful presentations:

- Prof Nicoletta Colombo (Gynaecological Oncologist, University of Milan, Italy). "Secondary debulking surgery for recurrent ovarian cancer – What I do and why."
- Prof Amit Oza (Medical Oncologist, Princess Margaret Cancer Centre, Toronto, Canada). "Ovarian Cancer – Building on BRCA: Where Next?"
- Prof Wui-Jin Koh (Radiation Oncologist, National Comprehensive Cancer Network, Pennsylvania, USA). "Defining optimal care for gynaecologic cancers – how do we incorporate patient-reported outcomes into decision making?"

The ASM was a successful, stimulating event. We'd like to thank Dr Paul Cohen and the ASM Steering Committee for preparing a the ASM program. Please join us at next year's ASM on 23-26 March 2022 at the

Crown Promenade, Melbourne. For more information: [anzgogasm.org.au](http://anzgogasm.org.au)

Through the hard work and dedication demonstrated by our members, we have more clinical trials in the pipeline than ever before. As of 31 December 2021 these include six clinical trials in development, four studies in start-up – PARAGON-II, ADELE, PEACE, and ITTACc, and eight studies currently recruiting – EmQUEST, IGNITE, ECHO, AtTend, ICON9, SOLACE2, EMBRACE, STICs and STONES, and HyNOVA. As at 31 Dec, ANZGOG currently has more trials in operation, in development and in its pipeline than ever before. For more information on ANZGOG's trials, see [anzgog.org.au/trials](http://anzgog.org.au/trials).

Survivors Teaching Students® (STS), a consumer-led, ground-breaking education program, is going from strength to strength. The volunteers of the program pivoted to virtual during COVID-19 and continued to be a force to be reckoned with. The 100+ volunteers have presented their personal stories on diagnosis and care to health professional students at Universities across Australia and now also New Zealand. The passionate team of STS volunteers made a significant impact in 2021 by delivering 33 education sessions this year to just short of 2,000 students, sharing their stories with the next generation of health professionals with the aim of raising awareness of gynaecological cancer symptoms and the importance of good health communication.

Public support through donations and partnerships has been well maintained through 2021 with WomenCan (ANZGOG's fundraising arm) and the Team Teal and Honour Her campaigns, engaging the community to increase vital awareness of gynaecological cancer and raise funds to support ANZGOG's research projects.

The 2021 Team Teal campaign was an outstanding success. Via an incredible effort by the 245 reinswomen and a final tally of 429 wins, a total of \$371,000 was raised to support ANZGOG's Survivors Teaching Students and Research Nurse Grant programs in Australia, and research projects in New Zealand.

The Honour Her ([honourher.org.au/](http://honourher.org.au/)) campaign brought together Australian artists and the public to raise funds

for gynaecological cancer research and honour women affected by these cancers. Artists, both renowned and emerging, were invited to donate works of art inspired by and in support of women impacted by gynaecological cancers. Works were exhibited via a virtual gallery and an online auction alongside the personal artist's story and reason for contributing to the cause. Conducted during the COVID19 lockdown in NSW and Victoria, the campaign achieved very high media penetration and generated considerable interest. 95 per cent of art works were sold. We are grateful for the community's support and look forward to bigger engagement in 2022's campaign.

I wish to thank all the members, the women taking part in our trials and our staff for another successful year gynaecological cancer research in Australia and New Zealand, helping ANZCOG to improve life for women with a gynaecological cancer.



**Philip Beale**  
Chair,  
ANZCOG

## AUSTRALIAN AND NEW ZEALAND CHILDRENS HAEMATOLOGY ONCOLOGY GROUP



**2021 continued to be a challenging year, as many Australian states and territories experienced rolling lockdowns and increased workload at our public hospitals. However, our commitment to providing world-class cancer care and access to the latest clinical trials for children with cancer was unwavering, and I would like to commend Australian and New Zealand Children Haematology Oncology Group's (ANZCHOG) Board, staff and our membership for their dedication to our patients during this time.**

On behalf of ANZCHOG's Board, we were delighted to welcome Dr Maria Kirby to the new role of Medical Director. This position is responsible for guiding ANZCHOG's clinical trial portfolio, providing medical oversight during the lifecycle of each trial. Dr Kirby takes over from A/Prof Geoff McCowage who has established lasting collaborations with a number of international trial consortia during his eight year tenure as Australasian Children's Cancer Trials (ACCT) CEO. I thank A/Prof McCowage for his commitment to the growth of ANZCHOG throughout this time.

I would also like to acknowledge the input from senior ANZCHOG members into our COVID-19 Vaccination Guidance. During this period of uncertainty and evolving, disparate government policies, we have worked hard to provide trusted, evidence-based information for families during their child's cancer treatment. We will continue to review and update this guidance, which is available on our website, [anzchog.org](http://anzchog.org).

We also launched our e-community during 2020, an interactive digital platform for our members to network, share clinical practice experience and effectively disseminate the latest research findings in their field. We look forward to continuing to build and promote this valuable resource.

2020 also marked our first virtual Annual Scientific Meeting. While our members appreciated the accessibility and flexibility of an online meeting, there is a strong desire to return to an in-person event, and we have commenced planning our 2022 ASM in Sydney in late July 2022 (hosted by Sydney Children's Hospital; find out more at [anzchog2022.com](http://anzchog2022.com)).

### ANZCHOG's clinical trial initiatives

From a clinical trials perspective, we continue to increase the number of ANZCHOG-sponsored trials open for recruitment in Australia and New Zealand. Throughout 2021 we had over 25 trials open for accrual at our children's cancer centres, actively seeking to improve care and treatment across the broad spectrum of paediatric cancers. This landmark achievement is only made possible by our funders, and we gratefully acknowledge their continued support of ANZCHOG.

Our expanding trial portfolio also demonstrates our growing relationships with a range of international trial consortia and the capacity to maximise trial opportunities as they arise. We are working with a range of international trial groups across the spectrum of childhood cancers, including networks from Europe, United Kingdom, USA and Canada. Opening an international trial in Australia and New Zealand presents individual challenges each time, across areas such as contract development, agent importation and distribution, data storage and highly variable regulatory requirements. ANZCHOG acts as a central point for the resolution of these issues, and as we work to operationalise trial conduct with each international group, we are establishing effective functional trial models, through building standardised processes for future studies.

Excitingly, several of our trials reached their accrual targets in 2021. We look forward to reviewing the data analyses, as this will inform new policy and practices, and in many cases, shape successor trials for the future.



Thus far, COVID-19 has had a minimal impact on recruitment to our trials. Our greatest challenge has been our inability to perform on-site monitoring, thus we have implemented additional remote monitoring processes to ensure trial integrity.

The ANZCHOG Office continues to expand, with the appointment of several National Trial Coordinators to provide centralised, high-quality trial support to the childhood cancer centres throughout Australia and New Zealand. This approach provides consistency for ANZCHOG-sponsored trials, and also reduces trial coordination burden at the participating centres. We also continue to focus upon our quality control processes, with dedicated resources ensuring that ANZCHOG-sponsored trials not only meet, but exceed, national and international requirements.

#### ANZCHOG's professional activities

In our role as the peak body for healthcare professionals who care for children diagnosed with cancer, ANZCHOG continues to support our multidisciplinary members through our dedicated Groups, providing opportunities for members with specific areas of interest to collaborate, network and provide national leadership in their field. In particular, our newly established Medical Education Group are working closely with Royal Australasian College of Physicians (RACP) to tailor training requirements for our paediatric oncology trainees, ensuring standardised, high-quality education and strong mentoring strategies are developed.

ANZCHOG also continues to provide expert advice to Australian Government and other initiatives, with membership on the Australian Brain Cancer Mission Strategic Advisory Group, the Blood Cancer Taskforce and Cancer Australia's Intercollegiate Advisory Group (ICAG).

A professional development highlight for our field – the ANZCHOG ASM – will be returning as an in-person event, 28-30 July 2022. With a number of keynote speakers already locked in, we are looking forward to networking and learning, with a range of interactive discussions and presentations scheduled. Pre-conference days targeted nursing development and a parent day will add to the depth and education opportunities for a wide range of our members and community stakeholders. For more information, please visit our 2022 ASM website: [anzchog2022.com](http://anzchog2022.com).



**Nick Gottardo**  
Chair,  
ANZCHOG

## AUSTRALIAN AND NEW ZEALAND UROGENITAL AND PROSTATE CANCER TRIALS GROUP



**Once again, 2021 proved another busy year for Australian and New Zealand Urogenital and Prostate Cancer Trials Group (ANZUP), despite the ongoing challenges with the global pandemic. We saw studies reach recruitment, sites open overseas, and ANZUP continued to receive more awards and accolades for our clinical trials and publications accepted.**

We have seen many achievements in the past year including:

- Our **DASL-HiCaP** (ANZUP 1801) trial reached close to 350 patients recruited, and over this time activated sites and recruited patients across NZ, USA, Canada and Ireland, and activated sites in the UK
- **BCG+MM** (ANZUP 1301) recruited its first international patient in the UK
- **ENZA-p** (ANZUP 1901) recruited their 100th patient, well over 50 per cent recruitment
- **UNICAB** (ANZUP 1802) reached 50 per cent recruitment and brought on its first tele-trial site as Goulburn Valley Hospital (Shepparton) under Border Medical Oncology (Albury). This marks an ANZUP first as we look forward to ever expanding the availability of our trials to rural and regional patients
- **P3BEP** (ANZUP 1502) recruited its 150th patient – reaching our stage one recruitment target milestone. We now look forward to beginning recruitment for the next phase of this study
- **GUIDE** (ANZUP 1903) our new phase two prostate cancer trial opened its first site at Chris O'Brien Lifehouse in Sydney

## #ANZUP21

On International Clinical Trials Day, our co-badged study ProPSMA led by Prof Michael Hofman, was announced as the winner of the 2021 ACTA Trial of the Year. A great achievement for the study, and ACTA Trial of the Year two years in a row for ANZUP!

Our TheraP trial (ANZUP 1603) featured as an oral presentation at the ASCO GU 2021 virtual meeting in February 2021, with Michael Hofman presenting the results of the study, as well as published synchronously in *The Lancet*. The study also featured in the ASCO Post Genitourinary Oncology Highlight 2020–2021. This was a great achievement.

The TheraP trial results also featured as a poster at the #SNMMI21 (Society of Nuclear Medicine and Molecular Imaging) Annual Meeting in June.

TheraP is the first randomised trial comparing <sup>177</sup>Lu-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.

We also had a number of posters and presentations feature at both ASCO GU 2021 (DASL-HiCaP, ENZA-p, KEYPAD, P3BEP, TheraP and UNISoN). As well as at ASCO 2021 (UNISoN).

During 2021 we continued with our Concept Development Workshops (CDW), albeit virtually. We held four CDWs in 2021 with 110 attendees and 18 concepts presented to our multidisciplinary members. This is where many of the seeds for ANZUP clinical trials are first sown, and they are important to grow and foster a pipeline of innovative ideas to be considered and prioritised with support from ANZUP moving forward.

Once again, in view of COVID-19, our #ANZUP21 Annual Scientific Meeting (ASM) took the format of a two-day hybrid event working with local hubs and an interactive virtual meeting platform. With a superb international and national faculty, over 400 delegates heard the latest in GU cancer treatment and research, as well as an update on existing and planned ANZUP trials.

Our stellar international faculty included Alison Birtle, Chris Sweeney, Chris Parker, Heather Payne, Sima

Porten, Eli Van Allen, Matt Galsky and Bertrand Tombal.

One of the highlights of the ASM was the ANZUP Symposium chaired by Haryana Dhillon. This session brought together a panel who shared work they are undertaking to address “Disparities in Cancer Care” – with a focus on Aboriginal and Torres Strait Islander people. Gail Garvey presented, “What do we know about survivorship needs of Indigenous people in Australia?” This gave a marvellous insight into how Indigenous people in Australia experience cancer care. Daniel Lindsay followed with an update on his research, “Out of pocket costs of Aboriginal & Torres Strait Islander people with prostate cancer,” generating much discussion about potential causes of these differences. Finally, Dorothy Keefe shared with us “What Cancer Australia is doing to improve cancer outcomes in Aboriginal & Torres Strait Islander people.” She showcased a range of resources now available to support cancer care health professionals working with Indigenous people.

ANZUP’s trial portfolio continues to grow. As at 31 December 2021, we had nine ANZUP-led and two co-badged trials in recruitment, and a number of new trials set to open for recruitment during 2022.

Due to COVID-19 we had to again cancel both our Melbourne and Sydney Pedalthon events for 2021, and we held our second virtual Below the Belt #YourWay Challenge during the month of May. We saw 146 challengers and 31 teams run, walk, cycle and swim 18,976 kms and 638 hours across Australia, New Zealand, UK and beyond. This event raised \$75,000 for ANZUP’s clinical trial research via the Below the Belt Research Fund,

to support the important work of ANZUP’s clinicians and researchers.

Our ANZUP 2021 Annual Report was released in June, reflecting on our activities and achievements over the past year. The report is a great showcase of the tireless commitment of our members, supporters and wider ANZUP community to improve treatments and outcomes for genitourinary cancer patients. You can read the report online here: [anzup.org.au/annual-reports](http://anzup.org.au/annual-reports).

We continue to publish biannually our Consumer Magazine *A little below the belt*. This magazine is full of information about what ANZUP does, how we do it, and how the community supports us. The magazine is available online: [anzup.org.au/a-little-below-the-belt](http://anzup.org.au/a-little-below-the-belt).

Our membership base continued to grow and reached over 1,900 during 2021, 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.

As always, 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 all faced during the year.



**Ian Davis**  
Chair,  
ANZUP





## BREAST CANCER TRIALS



**Breast Cancer Trials (BCT) is the largest, independent, oncology clinical trials research group in Australia and New Zealand, dedicated to finding new and improved treatments and prevention strategies for breast cancer.**

Since our formation in 1978, our research program has grown steadily and today includes 820 members across 109 institutions, who are involved in the conduct of multicentre national and international clinical trials.

Over the last year we have adjusted to the new phase of COVID-19 vaccines rolling out across the world and within our own communities. In 2021, recruitment to clinical trials was impacted once again by the pandemic and our staff had to work from home for a period of three months. However, in 2020 our leadership team and dedicated staff identified ways that we could streamline processes and continue to engage our audiences. So this greatly helped our day-to-day business activities and trials management over the last year.

Our 2021 Annual Scientific Meeting (ASM) for example was an online conference, bringing together over 230 delegates virtually from Australia and New Zealand. Our international speakers included Prof Roberto Salgado from Belgium, Prof Eileen Rakovitch from Canada and Prof Frank A Vicini from the United States of America. This was our first virtual ASM and while we were pleased to be able to maintain dialogue and contact with our members online, we are looking forward to our next face-to-face conference in Melbourne in 2022.

Prof Sunil Lakhani was elected to the position of Chair of the BCT Board of Directors during the reporting period. He is the Executive Director of Research and Senior Staff Specialist at Pathology Queensland and Head of the Breast Group, Centre for Clinical Research, University of Queensland, Brisbane, Australia.

The Chair position was made vacant following the appointment of Prof Bruce Mann to the role of BCT Director of Research and Chair of the Scientific Advisory Committee. Prof Mann was elected to the Board of Directors in 2015 and was Chair from 2017–2021. Prof Mann is Director of the Breast Tumour Stream of the Victorian Comprehensive Cancer Centre, and works at Royal Melbourne, Royal Women's Hospital and the Peter MacCallum Cancer Centre, Australia.



**Prof Bruce Mann, newly appointed BCT Director of Research and Chair of the Scientific Advisory Committee**

Prof Andrew Spillane was elected to the Board of Directors in 2021 and is a Professor of Surgical Oncology at The University of Sydney, Northern Clinical School, Sydney, Australia. He specialises in the surgical management of breast cancer and melanoma. Andrew is a senior VMO surgeon at the Mater North Sydney, Royal North Shore Hospital and North Shore Private Hospitals Sydney, Australia.

Prof Sherene Loi was awarded the Frank Fenner Prize for Life Scientist of the Year, as part of the 2021 Prime Minister's Prizes for Science. The Prime Minister's Prizes for Science are Australia's most prestigious awards for outstanding achievements in scientific research, research-based innovation and excellence in science, mathematics or technology teaching. Prof Loi was awarded the \$50,000 Frank Fenner Prize for her work to translate scientific findings into innovative treatments that can improve the survival of breast cancer patients in Australia and around the world. Professor Loi is the BCT Study Chair of the DIAMOND and NeoN clinical trials, a BCT Board Director and member of the Scientific Advisory Committee. She is the Head of the Translational Breast Cancer Laboratory at the Peter MacCallum Cancer Centre in Melbourne, Australia.

Recruitment to the EXPERT clinical trial continued internationally. This trial, led by BCT and our international collaborators the Breast International Group (BIG) and the Spanish Oncology

Trials Group (SOLTI) – is now open in Australia, New Zealand, Spain, Chile, Switzerland and Taiwan. This is a great success for our team after activation of this clinical trial outside of Australia and New Zealand was delayed due to COVID-19. Prof Boon Chua is the BCT Study Chair of the EXPERT clinical trial.

The results of the OlympiA clinical trial were announced, which showed that Olaparib reduces breast cancer recurrence by 42 per cent in patients with early-stage breast cancer who have a BRCA1 or BRCA2 gene mutation. The results of this international trial were published in the *New England Journal of Medicine* and 1,836 patients were recruited worldwide, including 60 women from Australia. Prof Kelly-Anne Phillips was the BCT Study Chair of OlympiA.

BCT launched a new online platform, called the Neoadjuvant Patient Decision Aid, to help women recently diagnosed with breast cancer make informed decisions about their breast cancer treatment. In particular, it provides an evidence-based view of their options for treatment with

chemotherapy or hormonal therapy before surgery to the breast and lymph nodes (neoadjuvant). The online decision aid was created using the research findings from the DOMINO clinical trial and was led by BCT's Medical Advisor, researcher and medical oncologist, Dr Nick Zdenkowski.

BCT is committed to helping educate the wider community about the importance of clinical trials research and the benefits of participating in a clinical trial. This includes promoting diversity and inclusion in clinical trials. In 2021 we translated several BCT brochures and videos into different languages, including Te Reo Maori and a dedicated resource for First Nations Australians. These are free resources available on the BCT website.

Despite the challenges that have been presented over the last two years, BCT is in a strong position as we look ahead. Several new

trials will commence in 2022 and we look forward to networking with our research colleagues once again in person. The pandemic has certainly shown us that the research community is resilient and committed to ensuring the best possible outcomes for patients diagnosed or at risk of breast cancer.



**Sunil  
Lakhani**  
Chair, BCT

## CANCER NURSES SOCIETY OF AUSTRALIA



**To achieve Cancer Nurses Society of Australia's (CNSA) mission, "Promoting excellence in cancer care and control through the professional contribution of cancer nurses," CNSA aims to develop and disseminate resources which contribute to advances in cancer nursing and practice.**

In 2021, CNSA was incredibly pleased to launch two key resources, the Cancer Nursing Workforce Mapping Project and the CNSA Vascular Access Devices: Evidence-Based Clinical Practice Guidelines, 2021.

CNSA Research Standing Committee launched the Cancer Nursing Workforce Mapping Project. This is the first time a national survey will provide a comprehensive picture of the working conditions and professional concerns of nurses who work exclusively in cancer care and control.

CNSA Vascular Access Device and Infusion Therapy Specialist Practice Network, launched the CNSA Vascular Access Devices: Evidence-Based Clinical Practice Guidelines, 2021. Available at [cnsa.org.au/VADguidelines](https://cnsa.org.au/VADguidelines).

The guidelines provide standardised, evidence-based clinical practice guidelines and recommendations for the safe, effective, and efficient management of vascular access devices for the patient with cancer with peripheral intravenous cannulas and central venous access devices. This knowledge base, with clinical expertise, the preferences of the individual patient, product knowledge and application, and local context of the individual healthcare environment can be integrated into comprehensive approach to vascular access management for the individual cancer patient.

They have been received enthusiastically within Australia and New Zealand and have been endorsed by the Australia Vascular Access Society (AVAS), the Alliance for Vascular Access Teaching and Research (AVATAR), the Clinical Oncology Society of Australia (COSA), Haematology Society of Australia and New Zealand (HSANZ) and Intravenous Nursing New Zealand (IVNNZ).

### **Advocacy and representation**

Since our last report to COSA, CNSA welcomed the establishment of two new Specialist Practice Networks (SPNs), Older Persons with Cancer and Genitourinary Cancer. Joining CNSA SPNs representing Breast Oncology, Cancer Nurse Practitioners, Gynaecological Oncology Nurses, Radiation Oncology Nurses, Vascular Access Device and Infusion Therapy. Alongside CNSA's Standing Committees and The State Groups that enable professional networking and education opportunities close to where CNSA members live.

Building on CNSA's strategic aim to promote cancer nurses' contribution to national cancer control activities and policy, CNSA has established a new Advocacy Program in recognition, as the organisation has matured, a need to move from responding to the external environment to proactively seeking opportunities to address core priorities areas for the ongoing development and sustainability of specialist cancer nurses to meet the needs of cancer patients across Australia.

Members of CNSA, also represented cancer nurses on a range of submissions, consultations, and position statements, including:

- The Australian Cancer Plan
- Nurse Practitioner 10-Year Plan
- National Medicines Policy
- Blood Cancer taskforce National Strategic Action plan for Blood cancer
- The development of a Specialist Nurse for Advanced Cancer role proposal, in collaboration with McGrath, for Cancer Australia
- McGrath Foundation Model of Care for Breast Care Nursing in Australia concluded after beginning in 2020
- Coalition of National Nursing and Midwifery Organisations (CoNNMO)
- CNSA are an integral part of the Radiation Oncology Alliance and are working closely with them to review the Radiation Oncology Practice Standards

### Education and collaboration

Taking a leadership role in addressing the educational needs of cancer nurses and collaborating with other groups and organisations involved in the development and provision of services to people with cancer, is a key strategic aim for CNSA.

To highlight a few ongoing initiatives:

- We were delighted to collaborate to deliver over 40 Tune in Tuesdays webinars and published 21 Cancer Nursing Matters newsletters.
- *The Australian Journal of Cancer Nursing* (AJCN) is a refereed biannual publication that aims to provide educational material to members and other interested bodies and acts as a forum where debate and exchange of views can take place. The AJCN is essential reading for nurses who are delivering services in the cancer field and is oriented towards clinical, education and management nurses with an interest in cancer care.
- CNSA's online knowledge sharing platform Sisodo, featured 234 publications authored by 296 CNSA authors, and 207 posts in the CNSA discussion forum in 2021-22. We are thrilled with CNSA members' engagement in the community, highlighting and sharing the vast knowledge and clinical expertise amongst our oncology nursing colleagues.

### CNSA 23rd Annual Congress

The ongoing impacts of the pandemic was not going to stop CNSA delivering on another key strategic aim, to provide opportunities for professional networking amongst cancer nurses. CNSA's 23rd Annual Congress was quickly adapted and on Friday 18 June 2021, 465 participants, across four locations (Adelaide, Brisbane, Perth, and Sydney) attended this one-day hybrid event. Melbourne was not going to allow a lockdown to stop their Annual Congress, holding a virtual event on Friday 19 November, with over 250 registrations.

There were many highlights with the theme reflective of the year that had been – with cancer nurses called on to rise to the unique challenges the healthcare sector faced because

of COVID-19. "A Voice to Be Heard: Driving Cancer Care and System Reform" was a powerful message and emphasised the role our members, and the wider nursing workforce, played during the pandemic. Some of the many highlights included the keynote presentations delivered by Prof Dorothy Keefe, Tanya Farrell, Prof Shelley Dolan, and Prof Jill White.

### CNSA Board update

Sadly, CNSA Board Director Emma Cohen passed away after a short illness on Friday 9 April 2021. Emma was a vibrant and passionate leader, and a fierce and intelligent advocate for the cancer nursing workforce, and her patients. Her loss has left a huge gap in our community, and in our hearts.

Following the 2021 Annual General Meeting (AGM), President Lucy Gent was delighted to welcome Kim Alexander and Kim Rogers as newly elected Directors. Lucy Gent finished her term on the Board and as President after the AGM, after leading CNSA for three years. Kim Alexander stepped into the role at that time, with Carmel O'Kane as the Vice President.

Carmel O'Kane has stepped into the President and Board Chair position, Meredith Cummins, and Anne Mellon as Co-Vice Presidents, as Kim Alexander has taken leave. CNSA welcomed Diane Davey to the Board. CNSA refreshed their Director Portfolios to align further to CNSA's strategic aims. Gabrielle Vigar commenced in March 2021 as the COSA Council representative.

In closing, we are immensely proud of how CNSA adapted to the challenges of 2021. We could not have been so successful in meeting our goals without the support of our members, stakeholders, sponsors, and our amazing staff, we thank you.

We look forward to continuing to deliver education, advocacy, research, and events for the cancer nursing workforce and to ensuring our voice – and our patients' voice – is heard.



**Carmel O'Kane**  
President and  
Board Chair, CNSA

## CANCER SYMPTOM TRIALS AND PALLIATIVE CARE CLINICAL STUDIES COLLABORATIVE



### Cancer Australia funding

We are pleased to report that, following an extension of funding until December 2021, Cancer Symptom Trials (CST) has now received funding from Cancer Australia until 30 June 2024. Prof Meera Agar, CST Chair, Linda Brown, National Manager, and the CST team are focused on the continuing program of work as well as a new range of deliverables focused on building equitable access to cancer symptom trials for people living with cancer, regardless of geography, diagnosis, or demographic factors.

### Governance

In October, Emeritus Prof Richard Head stepped down from the role of Chair, CST Scientific Advisory Committee. Richard's insights and leadership in this role were instrumental in establishing CST's governance, role, and purpose as a Cancer Cooperative Trials Group from its beginnings in 2017. We are grateful for Richard's service and leadership.

### Delphi study – cancer symptom management priority setting

We have reached the third phase of our adult Delphi study for cancer symptoms and treatment research priority setting. We are thankful for the participation of the consumers and healthcare professionals who responded to the surveys and attended our focus groups. Their generosity in sharing their experience is essential in ensuring the research we conduct is focused on treating the symptoms that are most troublesome. We look forward to sharing the results of this important work in 2022.

### ASPERT Research Group launches pancreatic cancer survey

In 2021, CST, the University of Otago Department of Medicine, and Nurse Maude Hospice began a collaboration as the ASPERT Research Group to address the perceived lack of access to Pancreatic Enzyme Replacement Therapy (PERT) by people with pancreatic cancer in Aotearoa New Zealand and Australia.

We want to understand the prescribing of and compliance with PERT by investigating current practices in both countries with a view to highlighting the current gaps.

We launched a survey of people with pancreatic cancer in Aotearoa New Zealand and Australia. The goal of the survey is to help us identify better access to treatments for all New Zealanders and Australians with pancreatic cancer. For information and survey links, go to [uts.edu.au/aspert](https://uts.edu.au/aspert).

### Events

#### Workshops

We continue to provide opportunities for investigators to present their study ideas to a supportive, expert audience through our workshop series. In 2021, we facilitated workshops on a diverse range of topics including gut dysfunction, missing data, pain, and the IMPACCT Rapid Program. We also hosted a pain workshop as part of the Oceanic Palliative Care Conference 2021 (21OPCC) pre-conference meeting schedule.

### Annual Research Forum

Our principal annual event, the PaCCSC & CST Annual Research Forum was online for the first time in 2021. The forum brought together speakers and guests with interests in palliative care and cancer symptom management. The theme was "Clinical trials in a changing world", putting the spotlight on common challenges faced here in Australia and overseas.

Our keynote speaker, Prof R Sean Morrison, Director of the USA National Palliative Care Research Center, gave an insightful presentation on palliative care research in the United States. We also heard from Prof Christine Ritchie, Minaker Chair in Geriatrics and Director of Research for the Division of Palliative Care and Geriatric Medicine at Massachusetts General Hospital, and Dr Michael Dougan, Assistant Professor of Medicine and Director of Immunotherapy Mucosal Toxicities Program at Massachusetts General Hospital. It was a great privilege to have three excellent international speakers at the forum.

Here in Australia, we were joined by Stefan Harrer, Chief Innovation Officer of Digital Health CRC joined us to talk about technological developments in telehealth delivery, and Hayley Burrridge, Melanoma Nurse Consultant at The Alfred who conducted an engaging discussion with Tamara Dawson, founder of the Melanoma & Skin Cancer Advocacy network (MSCAN).

### PALLIATIVE CARE CLINICAL STUDIES COLLABORATIVE (PaCCSC)

#### Staff

In September, we farewelled the PaCCSC founding Chief Investigator, Prof David Currow. Prof Brian Le and Dr Tim Luckett were appointed to the roles of PaCCSC co-Chairs and they are bringing fresh ideas and a new vision to PaCCSC, while building on our track record of conducting high-quality clinical research to achieve better outcomes for our patient population. Brian and Tim bring valuable experience and insights that complement the collaborative nature of our work.





**Prof Brian Le and Dr Tim Luckett,**  
newly appointed co-Chairs of PaCCSC

#### **PaCCSC projects**

We commenced two PaCCSC projects ([uts.edu.au/research-and-teaching/our-research/impacct/palliative-care-clinical-studies-collaborative/paccsc-projects](https://uts.edu.au/research-and-teaching/our-research/impacct/palliative-care-clinical-studies-collaborative/paccsc-projects)) investigating breathlessness. "Delineating the impact of chronic breathlessness: a cross-sectional population study" aims to identify the link between chronic breathlessness and its impact on aspects of quality of life.

Engaging with participants from English and Arabic-speaking backgrounds, "Discussing the impact of chronic breathlessness in clinical consultations" is exploring whether chronic breathlessness is discussed in clinical consultations and whether current communication practices are effective in identifying the presence and burden of this symptom.

#### **IMPACCT Rapid Program**

##### **Welcome to new Rapid Chair, Dr Caitlin Sheehan**

Dr Caitlin Sheehan was appointed as the new Chair of the UTS Rapid Program Management Team. Caitlin is a clinician and researcher at Calvary Healthcare Kogarah in NSW. She has been part of the Rapid management team for over two years and continues to contribute to important opportunities to further develop this international interdisciplinary quality improvement program. Caitlin brings energy and vision to the role and Rapid continues to grow under her leadership with the support from clinicians across the world in leading this large program of work.

#### **New series**

The Rapid Program ([uts.edu.au/research-and-teaching/our-research/impacct/impacct-trials-coordination-centre/rapid-program](https://uts.edu.au/research-and-teaching/our-research/impacct/impacct-trials-coordination-centre/rapid-program)) has grown with the addition of new adult and paediatric series. The paediatric and paediatric chronic pain series includes:

- Cyclizine for nausea and vomiting – series 31
- Opioids for paediatric breathlessness – series 34
- Paediatric telehealth – series 37
- Ketamine for non-cancer pain – series 41

The adult program continues to grow with the addition of our first two sleep series and a series on wounds:

- Dressings for malignant cutaneous wounds – series 38
- Melatonin for insomnia – series 39
- Temazepam for insomnia – series 47
- Intrathecal catheters for pain management – series 36
- Telehealth in palliative care – series 35

We invite clinicians who are prescribing or administering any of these medications to collect data for these series. There are also a number of series publications in press so watch out for these as they become available. To find out more and get involved, go to [uts.edu.au/rapid](https://uts.edu.au/rapid).



**Katherine Clark**  
Council  
representative,  
CST and PaCCSC

## COOPERATIVE TRIALS GROUP FOR NEURO- ONCOLOGY



**Cooperative Trials Group for Neuro-Oncology (COGNO) had a very busy and productive year in 2021, with many achievements and highlights despite the ongoing challenges with COVID-19.**

With an increasing number of concepts reviewed by our Scientific Advisory Committee, COGNO's trials portfolio continued to grow:

### • Trial open to recruitment

- **MAGMA** (Multi-Arm Glioblastoma Australasia Trial) – funded by Medical Research Futures Fund (MRFF), MAGMA is a multi-arm multi-stage, multi-centre, phase 3 platform trial that aims to assess hypotheses against a common standard-of-care control arm for the management of people with newly diagnosed glioblastoma. Recruitment target of 300 patients across 26 sites with 21 sites currently activated and strong recruitment throughout 2021.

### • Trial in start-up

- **PersoMed-1** (Personalised Targeted Therapy for Adolescent and Young Adult Medulloblastoma Patients), an international study led by the European Organisation for Research and Treatment of Cancer (EORTC), funded in Australia by CanTeen and Cancer Australia.

### • Trials in Development

- **PICCOG** (A single-arm phase 2 study of a PARP and Immune Checkpoint inhibitor Combination for relapsed IDH-mutant high-grade Glioma), funded by the MRFF.
- **CODEL - N0577** (Phase 3 Intergroup Study of Temozolomide Alone versus Radiotherapy with Concomitant and Adjuvant Temozolomide versus Radiotherapy with Adjuvant PCV Chemotherapy in Patients with 1p/19q Co-deleted Anaplastic Glioma) – international study led by ALLIANCE, funded in ANZ by Cancer Australia.

Very successful events were held (all virtual, some for the first time):

- **COGNO Systematic Reviews Workshop** – covering systematic reviews of interventions, diagnostic tests and prognosis studies, meta-analyses and living systematic reviews.
- **COGNO Ideas Generation Workshop** – with three concepts discussed, as well as a presentation on the MAGMA trial.
- **MAGMA Design Workshop** – which explored and discussed new concepts for incorporation into the MAGMA study (which is run using a consortium model in which anyone can propose additional study arms to be incorporated).
- **Post ASCO Update** – a new initiative of COGNO's Outreach and Education Committee, providing an update on the most significant treatment advances in primary brain cancer presented at ASCO 2021.
- **COGNO Annual Scientific Meeting, October 2021** – in conjunction with the Australian Brain Cancer Research Alliance (ABCARA) Research Symposium, and the concurrent BTAA Patient Education and Information Forum. International speakers included: Prof Gelareh Zardeh, Ms Maureen Daniels, Prof David N Louis, Prof Nino Chiocca, Prof Michael Jenkinson ([cogno.org.au/content.aspx?page=cognoasm-speakers](http://cogno.org.au/content.aspx?page=cognoasm-speakers)).
- **COGNO Annual General Meeting, October 2021** – with members updated on the achievements in the past decade and priorities for 2022 and beyond.

Publications and presentations included:

- Outcomes from the uses of computerized neurocognitive testing in a recurrent glioblastoma clinical trial. KM Field, et al. *Journal of Clinical Neuroscience*. doi.org/10.1016/j.jocn.2021.10.022
- Barriers and potential solutions to international collaboration in neuro-oncology clinical trials: Challenges from the Australian perspective. Benjamin Y Kong, Matthew Foote, et al. *Asia-Pacific Journal of Clinical Oncology*. doi.org/10.1111/ajco.13606
- A randomized phase II trial of veliparib, radiotherapy, and temozolomide in patients with unmethylated MGMT glioblastoma: the VERTU study. Hao-Wen Sim, Mustafa Khasraw, et al. *Neuro-Oncology*. doi.org/10.1093/neuonc/noab111
- Prognostic significance of genome-wide DNA methylation profiles within the randomised, phase 3, EORTC CATNON trial on non-1p/19q deleted anaplastic glioma. CMS Tesileanu, AK Nowak, H Wheeler, et al. *Neuro-Oncology*. doi.org/10.1093/neuonc/noab088
- Non IDH1 R132H IDH1/2 mutations are associated with increased DNA methylation and improved survival in astrocytomas, compared to IDH1 R132H mutations (CATNON). C Mircea, S Tesileanu, Anna K Nowak, Martin van den Bent, Pim J French, et al. *Acta Neuropathologica*. doi.org/10.1007/s00401-021-02291-6
- Adjuvant and concurrent temozolomide for 1p/19q non-co-deleted anaplastic glioma (CATNON; EORTC study 26053-22054): second interim analysis of a randomised, open-label, phase 3 study. Martin J van den Bent, Anna K Nowak, Brigitta G Baumert, et al. *The Lancet*. doi.org/10.1016/S1470-2045(21)00090-5
- Development of Randomized Trials in Adults with Medulloblastoma – The Example of EORTC 1634-BTG / NOA-23. Peter Hau, Elizabeth Hovey, Antoinette Anazodo, Michael Weller, et al. *Cancers*. doi.org/10.3390/cancers13143451
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- Multi-Arm Glioblastoma Australasia (MAGMA) trial. Kong BY, Gedye C, et al. 2021 Society for Neuro-Oncology Annual Scientific Meeting, Randomized Trials In Development stream, poster presentation.

COGNO membership has continued to increase, ending the year with 864 members.



**Eng-Siew Koh**  
Chair,  
COGNO

**Jenny Chow**  
Executive Officer,  
COGNO

## FACULTY OF RADIATION ONCOLOGY



The Royal Australian and New Zealand  
College of Radiologists\*  
The Faculty of Radiation Oncology

### Impact of COVID-19

2021 was another challenging year with a continuing significant impact on all of us. Radiation therapy centres, like all health service providers, remained open and logistics adapted to cope with the Covid situation. Along with others, Royal Australian and New Zealand College of Radiologists (RANZCR) and the Faculty of Radiation Oncology (FRO) continued to give clear messages to cancer patients that those who needed cancer treatment and those who needed tests should continue to seek it. Cancer patients were also encouraged to speak to their treating doctor about their own situation. Telehealth and telephone consultations continued to be used to deliver radiation oncology services where it was appropriate and commensurate with the restrictions imposed by health services and Government. Radiation therapy courses were modified where appropriate using the published literature to ensure patients were treated safely.

RANZCR continued to provide advice to keep our membership updated. Like many organisations, in offices, we have paused face-to-face meetings for our committees and moved to virtual platforms for all our interactions to keep people safe.

### Advocacy

#### Medical Benefits Schedule (MBS) Review

The FRO MBS Review Working Group continued to engage with the Federal Department of Health regarding the MBS review. For most of 2021 the Department of Health considered and modelled the new MBS fees for radiation therapy services. This work took longer to complete than was envisaged by the Department.

Towards the end of 2021, the Department established the Implementation Liaison Group to provide advice to the Department on the new fees and their implementation. RANZCR has provided nominees to this group. It is envisaged that new fees will be resolved for implementation in 2023.

### Targeting Cancer

2021 was a busy year for the Targeting Cancer campaign. The following outlines some of our activities.

We released a new patient journey video about a patient dealing with cancer in regional Queensland. You can watch it here [targetingcancer.com.au/2021/12/wishing-lex-and-tricia-very-best-wishes-for-christmas/](https://targetingcancer.com.au/2021/12/wishing-lex-and-tricia-very-best-wishes-for-christmas/)

We also issued a video with our clinicians promoting the importance of being vaccinated against Covid. You can view it at [targetingcancer.com.au/2021/10/please-join-us-and-get-vaccinated-too/](https://targetingcancer.com.au/2021/10/please-join-us-and-get-vaccinated-too/)

Due to the number of lockdowns on the east coast of Australia in 2021, we organised a Targeting Cancer Fun@Home online event where participants posted photos on social media of fun activities they did at home during the lockdowns while at the same time promoting Targeting Cancer.

RANZCR participated in World Cancer Day with the release of a number of videos about our clinicians' commitment to making their patients aware of potential treatment using radiation therapy. You can watch it on our YouTube channel. [youtube.com/watch?v=5ujRWsTl0Cw&t=9s](https://youtube.com/watch?v=5ujRWsTl0Cw&t=9s)

A review of the Targeting Cancer website was undertaken to improve the user experience with the intention of making some changes to the website in 2022.

### Education

Despite COVID-19 and the challenges of lockdowns and border closures, RANZCR proceeded with our examinations in 2021. Lessons learnt in 2020 were taken into account. Many fellows and College staff worked in an adaptive manner to successfully overcome the challenges.

RANZCR's Training and Assessment Reforms were finalised in 2021 with multiple successful webinars to communicate the changes. New platforms have been set up to implement the reforms from the start of the 2022 training year.

Our Annual Scientific Meeting (ASM) was successfully held online with an increase in registrations. All the usual ASM prizes for excellence in science and presentation were awarded despite the virtual platform.

### Organisational governance and sustainability

The College updated their Strategic Plan, and a new plan is available on our website ([ranzcr.com](https://ranzcr.com)). Recognising the differences in health-related outcomes in our Indigenous population, after establishing and working with the Māori, Aboriginal and Torres Strait Islander Executive Committee reporting directly to the Board, the Indigenous Health Action Plan was developed. The plan provides a culturally appropriate action strategy setting milestones and ensuring alignment with the recommendations of the Australian Medical Council and Medical Council of New Zealand. As a first step, a number of ambitious goals have been integrated into the 2022 workplan of our training program.



**Keen Hun Tai**  
Dean, Faculty  
of Radiation  
Oncology,  
RANZCR

## MEDICAL ONCOLOGY GROUP OF AUSTRALIA



**The Medical Oncology Group of Australia (MOGA), as the national professional body for Australian medical oncology and a special society of the Royal Australasian College of Physicians (the College), experienced a rewarding 2021 despite the continuing challenges posed by COVID-19.**

### Partnerships

In 2021 MOGA's strategic national and global networks and partnership were strengthened. The national and international oncology sector demonstrated outstanding leadership, commitment and cooperation on numerous issues and projects. MOGA worked with key organisations such as the European Society for Medical Oncology, The American Society for Clinical Oncology, the College, Australian Medical Association, Cancer Australia, and Cancer Council Australia, to proactively develop, share information, and provide regular updates on critical issues.

MOGA re-activated its Workforce Group in 2021 to address current and future issues for the national medical oncology profession, including the impacts of the so-called "cancer tsunami". Dr Florian Honeyball chairs the Group which has initiated discussions with the Department of Health and Cancer Australia to develop a holistic national approach. A Victorian workforce study completed in 2021 demonstrated a significant shortage of medical oncologists within that state and highlighted key disparities in workforce levels and conditions across various demographics that can be extrapolated nationally. Most oncologists were seeing more than the recommended 2008 benchmark of 150-180 new patients per year. In some areas, oncologists were on average seeing double this number.

The Group plans to map and model the current and future national medical oncology workforce and develop employee performance

metrics (eg, optimum 1FTE: X new patients per annum, or X FTE per 100000 capita). The new work includes the development of a current Scope of Practice for an Australian medical oncologist, taking into consideration factors such as productivity, quality and safety, patient and cancer variations, survivorship and care requirements as well as predicated cancer incidence and changing practice.

### Oncology drugs, treatments and advocacy

In response to ongoing and emerging treatment and oncology issues MOGA represented the profession through diverse lobbying and advocacy activities, media and members liaison, the provision of advice to industry, government, and regulatory bodies. Key initiatives included the National Medicines Policy Review, the Ministerial Roundtable for the National Cancer Plan and advice on the Department of Health's Repurposing of Medicines and around testing for dihydropyridine dehydrogenase enzyme deficiency in patients receiving fluoropyrimidines.

The year also saw MOGA make a record-breaking number of submissions and the Drugs Group met regularly with the Pharmaceutical Benefits Advisory Committee (PBAC) to address oncology issues under consideration by Australian regulatory bodies. They also ensured that current, accurate advice on clinical practice and trial developments was directed to key decision-makers.

### Membership

The strong interest in our speciality was reflected in the growth of the membership to include 623 consultants and 244 trainees. Members make an invaluable contribution across all MOGA's activities and to our profession.

Prof Clare Scott received the annual MOGA – Novartis Oncology Cancer Achievement Award for her contribution as a medical oncology clinician, clinician-researcher, leader, and mentor. Clare is Professor of Gynaecological Cancer Obstetrics and Gynaecology Royal Women's Hospital/Mercy, University of Melbourne and Joint Division Head Division at The

Walter and Eliza Hall Institute of Medical Research. Prof Scott's skills in clinical oncology, evidence-based medicine and research have resulted in the leadership of numerous, influential clinical trials and platforms for ovarian and rare cancers.

Prof Anna Nowak was awarded the inaugural Professor Martin H Tattersall AO Heroes Award in 2021. This Award recognises contributions by Australian medical oncologists that honour the spirit, courage and commitment of the late Martin Tattersall, and his significant contributions to Australian Medical Oncology. Anna is a medical oncologist at Sir Charles Gairdner Hospital, Pro Vice Chancellor (Health and Medical Research) at The University of Western Australia (UWA) and a Clinical Academic in the UWA Medical School. She has made a significant and lasting impact on the practice of medical oncology, leading transformative research in mesothelioma with profound and far-reaching impacts on people with this fatal condition.

### Education and professional development programs

MOGA's educational initiatives in 2021 were developed in online formats to accommodate COVID-19 restrictions, including the mandatory **Communications Skills Training Program** in effective patient communication. The National and State Trainee Representatives along with the Young Oncology Group of Australia provided support and guidance for trainees and junior consultants, organising both educational and professional activities throughout the year.

Dr Peter Manders, convened an **Immuno-Oncology Symposium: Combination & Next Generation Immunotherapy** providing a comprehensive update on the current clinical data for many cancer streams. The program considered the direction of immunotherapy and included sessions on key advances that will impact both present and future clinical practice. International keynote speaker, Prof Padmanee Sharma (USA) was joined by Australian leaders in immuno-oncology.



MOGA launched the **Oncology Professionals Advancing Leadership** program convened by A/ Professor Prunella Blinman. Designed to increase the effectiveness of medical oncology team members with the goal of optimising patient care in the clinical setting, the sessions were directed at team-based learning with the objective of improving all aspects of patient care.

Drs Felicia Roncolato and Florian Honeyball, Co-Convened **The Future of Oncology: Improving Outcomes Through Innovation** our first virtual Annual Scientific Meeting, with a focus on engagement and interaction. International guests, Professors Carlos Barrios (Brazil) and Martin Reck (Germany) joined Australian experts in symposia on the latest developments in genetic diagnosis, prostate cancer, lung cancer and breast cancer, as well as oncology leadership and the medical oncology workforce. The Young Oncologists program included sessions on podcasting and social media in health communications while the Trainees Program examined the management of immune related adverse events and onco-fertility advances.

MOGA also successfully presented the second online **Asia Pacific Oncology Research Development Protocol Development Workshop** with 60 participants and 45 faculty. The Workshop, Convened by Prof Martin Stockler, remained an intensive six-day active-problem based, collaborative learning exercise.

We look forward to another productive year collaborating with our many partners to advance the Australian oncology sector.



**Deme Karikios**  
Chair, Medical  
Oncology Group  
of Australia



**Prof Clare Scott received  
the annual MOGA – Novartis Oncology  
Cancer Achievement Award**



**Prof Anna Nowak was  
awarded the inaugural  
Professor Martin H Tattersall  
AO Heroes Award**

## MELANOMA AND SKIN CANCER TRIALS



Melanoma and Skin Cancer Trials Ltd. (MASC Trials) experienced considerable growth throughout 2021, with an increase in trial activity and staffing to maximise opportunities for research aimed at preventing and treating melanoma and skin cancer.

Our international collaborative trials group continued to unite a dynamic network of health professionals specialising in melanoma and skin cancer. Together, we developed, conducted, published, and promoted research that is having a real-world impact on how melanoma and skin cancer is diagnosed and treated.

### Clinical trials

Despite the pandemic, our portfolio of clinical trials and research expanded in 2021. Patient recruitment increased with over 560 participants enrolled during 2021 in 12 active trials at 177 hospital sites across 11 countries. Providing equitable access to trials remains a high priority. The introduction of "tele-trial" sites enabled patients living in regional and rural Australia to enrol in some of our trials.

Our largest international melanoma trial, **MelMarT-II**, continued to recruit strongly in 2021, reaching 500 participants and 27 sites throughout Australia and overseas by December 2021. Established in 2019, MelMarT-II is investigating whether reducing the amount of skin removed during surgery can decrease the risk of associated long-term pain and improve quality of life without increasing the risk of melanoma returning.

The **IMAGE** trial, which examines the effectiveness of Melanoma Surveillance Photography (MSP), opened its first site early in 2021. The trial now operates across six Australian sites and has recruited almost 200 patients. IMAGE will help to inform the Australian Government if there is a necessity to publicly fund MSP.

The **GoTHAM** trial is investigating the use of immunotherapy drug Avelumab when combined with either

conventional radiotherapy or peptide receptor radionuclide therapy to treat metastatic Merkel cell carcinoma. The trial for this very rare skin cancer recruited its first participant in April and had six participants in December 2021. More sites are planned to encourage recruitment across metropolitan and regional Australia.

The **I-MAT** trial opened its first tele-trial site at Cairns Hospital this year, providing greater access to clinical trials for Merkel cell carcinoma patients in Far-North Queensland. Open to recruitment in 13 primary and four satellite sites, I-MAT aims to develop an effective, well tolerated immunotherapy regimen for participants with stage I-III Merkel cell carcinoma.

Launched in 2021, the **Uveal Melanoma Registry** enrolled its first participant and has three sites open with efforts to open further sites. As there is no accepted management or treatment for uveal melanoma, the Registry aims to change practice by collecting and evaluating patient data.

The Cancer Australia funded **Supporting People with Cancer Project** finalised its survey results. MASC Trials is now collaborating with Melanoma Patients Australia and the Melanoma & Skin Cancer Advocacy Network to develop an awareness campaign and links to resources for regional patients. The survey results were also presented at the Australasian Skin Cancer College Congress.

The **SMARTI** trial closed to recruitment mid-2021 after successfully enrolling 214 participants to the trial. SMARTI aims to determine if the Molemap Artificial Intelligence algorithm can be used as a diagnostic aid in a clinical setting. Investigators have published in *BMJ Open* with further publications planned to distribute results.

The **CHARLI** trial closed to recruitment at 52 participants in December, across 10 sites in Australian cities and regional towns. The trial is examining whether the addition of Denosumab to standard immunotherapies for metastatic melanoma will improve outcomes for these patients. Presentation of the trial results are planned for the ESMO conference in September 2022.

Recruitment for the **RADICAL** trial closed in 2021 at 126 participants. Principle Investigator A/Prof Pascale Guitera and colleagues published "A practical guide on the use of imiquimod cream to treat lentigo maligna" in the *Australasian Journal of Dermatology* in November.

A publication resulting from the **CombiRT** trial in the *Journal of Clinical and Translational Radiation Oncology* by Dr Tim Wang et. al showed that the concurrent use of Dabrafenib and Trametinib are safe to use during palliative radiation therapy.

### Discipline Specific Advisories

Our Discipline Specific Advisories, which support specialist researchers to evaluate the study design of new research proposals, met throughout the year to discuss and develop new research projects. In addition to our special interest groups, AMIGOs and AOMA, we formed a group focused on Keratinocyte skin cancer and established an independent panel of consumer advocates.

### Events

The MASC Trials Annual Scientific Meeting was held online in November and featured 14 speakers, including researchers, industry and consumer representatives. With over 170 registrations, this meeting was our most successful to date. Updates on MASC Trials research and activities were provided, and discussion about future research opportunities was facilitated.

The second Australasian Ocular Melanoma Alliance Summit was held online in June. This event brought together healthcare professionals, researchers and consumers in ocular melanoma to facilitate national and international collaborations for this rare cancer.

## Our people

The MASC Trials team grew in 2021 to support our investigators and raise the profile of their important work. New roles were created and we now employ a Marketing and Communications Manager, Research Development Manager, and Research and Grants Coordinator to support our investigators and the MASC Trials team. Several new skilled Clinical Research Associates and Clinical Data Managers were also recruited.

To strengthen the Board's corporate governance, two new Directors with expertise in Law and Epidemiology joined the Board in 2021. We now have eight Board members who bring expertise from many of the disciplines essential to the success of clinical trials.

Our membership, which spans from people working in clinical trials to patient advocates, continued to grow to over 2,000 members representing 36 countries.

The substantial outcomes achieved by MASC Trials during 2021 demonstrate the collective determination and effort of our investigators, Board of Directors, staff, membership, and community of supporters, to improve how melanoma and skin cancer can be prevented, diagnosed and treated. The benefits of their work will be felt for many years to come. With renewed funding from Cancer Australia, newly funded projects in start-up, and continued dynamism in the preventive and therapeutic landscapes in melanoma and skin cancer, we look forward to an active and productive 2022.



**Mark Shackleton**  
Chair,  
MASC Trials

## ONCOLOGY SOCIAL WORK AUSTRALIA AND NEW ZEALAND



**Oncology Social Work Australia and New Zealand (OSWANZ) starts the year by welcoming our incoming President, Justin Gulliver. Justin is the Professional Lead for Social Work at Te Aho o Te Kahu Cancer Control Agency in Wellington, New Zealand. Our outgoing President, Nick Hobbs from Hobart will remain on the committee as Immediate Past President and as Treasurer.**

2022 is commencing with similar uncertainties to those experienced in the preceding two years. With this in mind, the OSWANZ Committee has decided to maintain a program of virtual activities that have proved to be a popular and successful alternative to face-to-face events. At an organisational level, a series of webinars is in the planning stages, as well as a virtual conference featuring an overseas keynote speaker and local experts. Within each jurisdiction regional representatives have access to a Zoom account for meetings and educational events. Members will receive details of all events as dates are finalised.

Various groups have requested participation of OSWANZ members in surveys and research activities. OSWANZ is represented by Kim Hobbs on the Financial Toxicity Working Group, established under the auspices of COSA's Survivorship Group. A pleasing number of OSWANZ members completed a national survey which was distributed widely amongst COSA membership groups. The work of this group is ongoing, under the leadership of Prof Ray Chan who has recently relocated from QUT to the Caring Futures Institute at Flinders University in Adelaide. The program of work for this multidisciplinary national group is wide ranging. A webinar was held in December 2021 and a paper documenting the results of the survey will soon be submitted for publication. Watch this space for more developments.

Our New Zealand members have been approached to participate in a research study examining the implicit and explicit racial biases in the training of health practitioners in New Zealand. Our Australian members have responded to a survey from Rare Cancers Australia investigating issues of transport for cancer patients, especially for those located in rural and regional areas. A link was distributed for members to contribute to the consultation process of the development of Cancer Australia's next Cancer Plan. OSWANZ is also participating with Psycho-oncology Co-operative Research Group (PoCoG) in a telehealth working group developing national guidelines/recommendations for using telehealth (both audio and video) in psycho-oncology therapeutic interventions, including identification of the barriers and enablers of the various technologies.

In an ongoing partnership with Cancer Council Australia a submission to the Australian Government Senate Inquiry into the purpose, intent and adequacy of the Disability Support Pension, resulted in an invitation to provide expert evidence on one of the hearing dates. Megan Varlow (CCA) and Kim Hobbs (OSWANZ) participated in a virtual hearing along with other stakeholder groups. The issues raised in the inquiry have been championed by SBS programs and an article about the particular issues for people with cancer was published in the *Guardian Australia* by Luke Henriques Gomes, Social Affairs and Inequality Editor. The final report and recommendations from the inquiry are awaited.

In spite of the limitations associated with COVID restrictions, OSWANZ is continuing to maintain a busy agenda of activities.



**Kim Hobbs**  
Council  
representative,  
OSWANZ

## PRIMARY CARE COLLABORATIVE CANCER CLINICAL TRIALS GROUP



**2021 provided Primary Care Collaborative Cancer Clinical Trials Group (PC4) with an opportunity to think about how we engage and support our members in an ongoing online landscape. In 2021 we continued to grow, with a record number of requests for support. PC4's national membership has expanded to almost 900, with members across every state.**

### Research highlights

Over the past year, we have supported 27 new research concepts including 11 focused on prevention and early detection, 14 survivorship and one new palliative care study. The support offered by PC4 was equally diverse, and ranged from supplying funding through our Training Awards, systematic review support and comprehensive concept reviews through our workshops.

We also embarked on a research prioritisation study to help us identify new priorities in cancer in primary care research. The goal of this study was to identify top cancer research priorities across the cancer continuum by engaging with a broad range of stakeholders including GPs, practice nurses, cancer survivors and researchers.

As a result, we developed three Engine Rooms that will assist in developing research under the umbrellas: Prevention & Early Detection, Survivorship, and Palliative care.

### Podcasts

PC4's Australian Podcast Award-nominated podcast, Research Round-up, continued to deep dive into current research and how this impacts primary care. PC4's National Manager, Dr Kristi Milley, interviews leaders in cancer primary care research and explores the impact of their research.

The podcast includes interviews with researchers from all facets of cancer care, from early detection

to survivorship. The 2021 season of Research Round-up included international guests from New Zealand, Germany, and the UK as well as many impressive Australian researchers.

You can listen to Research Round-up at [pc4tg.com.au/podcasts](https://pc4tg.com.au/podcasts).

### PC4 events

In May 2021, we were lucky to host our annual Scientific Symposium as a hybrid event at the Melbourne Convention Centre. It was our largest event to date with nearly 120 attendees. With 100 per cent of attendees reporting that would recommend future Symposiums to their networks. As we've all learned over the past 18 months, timing is everything. In our case, the Symposium was just two days before Melbourne entered its seven-day circuit breaker lockdown. This year the day focused on the role of primary care in the implementation of the Optimal Care Pathways as well as the role of primary care in the possible future roll-out of a national lung cancer screening program.

To connect with a wider audience, we began a new regular event on the PC4 calendar, our Consumer Showcase. This one-hour webinar is open to the public and connects community members with our PC4 members and their research. In our inaugural showcase, Prof Jon Emery presented the results of the CRISP trial which is an online tool that calculates an individual's risk of bowel cancer and provides a recommendation on the most appropriate screening modality. Our Research Coordinator, Paige Druce, presented the results of our systematic review investigating emerging biomarkers for gastrointestinal cancers that could be used in primary care and Dr Emma Kemp, from Flinders University reviewed the evidence of interventions for breast cancer survivors.

We worked to support our members skill development, particularly our early career researchers by partnering with the Australian Healthcare & Hospitals Association to run a short course on writing for policy makers. We also coordinated a webinar showcasing ways to adapt trial recruitment methods in response to COVID-19.

PC4's Concept Development and Peer Review Workshops are designed to provide detailed feedback on concept and grant submissions. These continued to be virtual offerings in 2021. Concepts were reviewed by consumers, GPs and other researchers as well as experts in implementation science, quality of life, health economics and more.

2021 PC4 in a snapshot

- Supported 27 new research concepts
- Close to 900 members
- Grew to 1000+ Twitter followers @PC4TG
- Doubled our LinkedIn following, with 90+ new members



**Carolyn Ee**  
Council  
representative,  
PC4



PSYCHO-ONCOLOGY  
CO-OPERATIVE  
RESEARCH GROUP



**Despite the ongoing disruptions caused by COVID-19, the Psycho-oncology Co-operative Research Group (PoCoG) maintained a comprehensive program of research and undertook a range of engagement and capacity building activities with our membership to maintain strong connections.**

**2021 Scientific Meeting**

We were very much hoping to hold a face-to-face scientific meeting this year, following from our hugely successful meeting in Adelaide in 2019, however, COVID-19 prevailed, and we made the inevitable decision to move our event online in the middle of the year.

Mindful of increasing levels of screen fatigue we worked with our multi-disciplinary organising committee to develop an event which offered members a series of themed lunchtime sessions over two weeks, hosted by PoCoG Special Interest Groups. Registrants were offered a varied program of presentations, which included invited speakers as well as member abstracts showcasing the scope of work undertaken in the last two years.

The two-week program included sessions on: Learning from the implementation of a clinical pathway to identify and manage anxiety and depression for patients with cancer – what we knew then, what we know now; Current issues in survivorship; An update on brain cancer research; Challenges ahead for implementing preventive strategies in oncology; The impact of COVID-19 on oncology care; Latest fear of cancer recurrence research as well as a Friday afternoon session specifically focusing on self-care strategies for psycho-oncology clinicians during COVID-19.

All the sessions were recorded and are now available on the PoCoG YouTube channel ([youtube.com/channel/UCHgLds3CRIwZhnorWdx6B\\_A](https://youtube.com/channel/UCHgLds3CRIwZhnorWdx6B_A)).

**Webinar series**

Inspiration for the format of our 2021 Scientific Meeting was driven, in part, by the success of our ongoing lunchtime webinar series, developed to support PoCoG members stay connected during COVID-19 and builds on the success of the 2020 webinar.

This informative series featured expert speakers and explored a range of research and capacity building topics including:

- Conducting research with vulnerable populations
- Consideration for conducting systematic reviews in implementation research
- Consumer involvement in research from three researcher perspectives

**E-Learning module**

In line with PoCoG's focus on increasing inclusivity in our research to improve outcomes for all people with an experience of cancer, PoCoG worked with Gail Garvey and her team now based at the University of Queensland to develop e-Learning modules "Improving Cancer Outcomes for Aboriginal and Torres Strait Islander People".

The first module in a series, provides clinicians and researchers with information and tools to better support Aboriginal and Torres Strait Islander cancer patients and their families and is freely available to view on the PoCoG YouTube channel. Future modules aimed at increasing research engagement will be launched in 2022



### Concept development workshops

In 2021 we held two online concept development workshops, to provide members with an opportunity to develop and refine their research ideas.

These workshops are always highly collaborative and very productive and aim to develop study protocols for submission for funding. PoCoG encourages concepts from a wide range of psycho-oncology and supportive care areas of research. In 2021 topics included advanced cancer, end of life care and delivering psycho-oncology via telehealth.

### PoCoG research

In 2021 PoCoG continued to build our research portfolio of new studies and concepts in development. Work on the BRAiNS program (Brain cancer Rehabilitation, Assessment and Intervention for survivorship Needs) steamed ahead despite restrictions caused by COVID-19. This PoCoG led national collaboration with the Cooperative Group in Neuro-Oncology, Cancer Symptom Trials Group and the Primary Care Collaborative Cancer Clinical Trials Group 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.

Our program aimed at optimising equitable access to cancer research participation for Aboriginal and Torres Strait Islander people is also progressing well, building on our existing collaborations exploring cardiovascular disease risk after a cancer diagnosis among Indigenous and non-Indigenous Australians.

Two of PoCoG's flagship programs were also completed in 2021.

**The ADAPT Program**, funded by a Cancer Institute NSW translational program grant. ADAPT, a five-year program of research developing and implementing a sustainable and supported clinical pathway for managing anxiety and depression in cancer patients recruited over and involved development culminated in a Cluster randomised control trial to two implementation strategies of different intensity (core versus enhanced) to promote uptake of an anxiety and depression clinical pathway in oncology services.

Twelve regional and urban oncology services, servicing private and public patients, participated and 1,323 screening events to identify anxiety and depression symptoms were conducted for 627 patients during the 12-month implementation, 106 staff surveys and 88 staff interviews were also conducted just before implementation, and again six months and 12 months later. To date the team have published 15 papers with more publications in development. ADAPT has supported three PhD students.

This program has generated a number of new research projects and collaborations across Australia aimed at implementing screening and management of anxiety and depression in routine cancer care.

**The PiGeON Project** comprised two inter-related longitudinal studies which explore the psychosocial, behavioural and ethical issues and outcomes of cancer genomic testing. The program recruited 1939 advanced cancer patients undergoing comprehensive genomic profiling to determine targeted treatment options within the Cancer Molecular Screening and Therapeutics (MoST) Program; and 1,379 cancer patients with features

suggestive of a genetic aetiology as well as blood relatives, who will undergo germline genomic profiling through the Genetic Cancer Risk in the Young (RisC) Study.

To date the PiGeON team has had more than 20 journal articles published, with more in preparation and under review. The PiGeON project has also contributed to building capacity in genomic research, with one PhD student and a Master of Genetic Counselling student.

Finally, PiGeON has led to new genomic psychosocial research directions with a CINSW Early Career Fellowship awarded to Dr Jolyn Hersch to investigate ethical and flexible consent in cancer genomic research and clinical practice.

Further research leveraging the results of PiGeON is also planned.

### Scientific Advisory Committee

The PoCoG Scientific Advisory Committee is delighted to welcome two new members in 2021, A/Prof Georgia Halkett and Dr Joanna Fardell along with two early career researcher members Dr Emma Kemp and Dr Abbey Diaz. We look forward to working with these new members across the term of their appointments.

To learn more about PoCoG activities and to join visit [pocog.org.au](http://pocog.org.au)



**Joanne Shaw**  
Executive Director,  
PoCoG

## ROYAL COLLEGE OF PATHOLOGISTS OF AUSTRALASIA



**The Royal College of Pathologists of Australasia (RCPA) principal objectives is to train and support pathologists and senior scientists to improve the use of pathology testing, utilising the highest-quality evidence and expert collaboration. We are pleased to highlight the following notable achievements accomplished in 2021.**

### RCPA and the COVID-19 pandemic

The COVID-19 pandemic continued to have a significant impact globally and in Australia during 2021. The RCPA President Dr Lawrie Bott has said "to date, through the pandemic, it has been widely acknowledged that it has been the combined efforts of public health and Government, the general public, (who have readily come forward to be tested) and the Australian laboratories, including pathologists, scientists, collectors, couriers and all laboratory staff (who have been working around the clock), that have been central to limiting the spread of COVID-19 in this country." The RCPA was proud of the enduring effort of the pathology community, who worked to the highest levels during a time of unprecedented demands placed upon the healthcare system.

### International Pathology Day

International Pathology Day (IPD) is an annual awareness day dedicated to highlighting the fundamental role of pathology in addressing global health challenges and improving community health outcomes worldwide. The RCPA's IPD event was held on 10 November and was hosted by Sophie Scott, National Health Reporter for the Australian Broadcasting Corporation (ABC).

The RCPA invited local world experts and previous IPD spokespeople to return to reflect on the pathology milestones of 2021, the impacts and response to COVID-19, the future

of vaccines, updates in testing, and challenges in remote and rural communities. Speakers included RCPA Fellows: Prof Deborah Williamson, Prof Bill Rawlinson, A/Prof Paul Griffin and Prof Peter Collignon. Also joining the 2021 IPD event were RCPA Fellows: Prof Sandra O'Toole and Dr Robert Norton.



**2021 International Pathology Day speaker Prof Sandra O'Toole with host Sophie Scott**

### RCPA Awards

The 2021 winner of the RCPA's 8th annual media awards for excellence in pathology-related journalism was Bianca Nogrady for her article written for the Medical Republic, "So you think you've had COVID-19".<sup>1</sup> The then RCPA President, Dr Michael Dray, said the article provided clear information regarding COVID-19 testing when there was a lot of mixed messaging circulating in the community.

RCPA Fellow A/Prof Emily Blyth was awarded the 2021 NSW Premier's Award for Outstanding Cancer Research, recognising her research on cellular therapies for cancer.

### RCPA Anatomical Pathology Lecture Series 2021 and RCPA podcast

The RCPA's Anatomical Pathology Lecture Series for 2021 was a great success. The lecture series consisted of two seven-week programs in 2021 and are made available to RCPA Fellows on the RCPA website: [rcpa.edu.au](http://rcpa.edu.au)

In 2021, the RCPA continued its podcast series The Pathologists Cut. This regular podcast, hosted by the RCPA President, showcased conversations with expert Pathology Fellows, bringing to light the critical work of pathologists, and the integral part pathology plays in medicine and

healthcare. Listen on Apple Podcasts, Spotify or the RCPA website.

### RCPA Cancer Services Advisory Committee

The Cancer Services Advisory Committee (CanSAC) is a multidisciplinary committee that oversees cancer-related activities within the RCPA. The goal of CanSAC is to raise the standard of pathology and cancer information. CanSAC lends its expertise and provides an essential link to other external cancer-related organisations such as the Cancer Monitoring Advisory Group (CMAG), the Intercollegiate Committee on Cancer (ICC), Cancer Australia and COSA.

CanSAC's recent activities include the support of further training opportunities for pathologists in molecular and genomic pathology. In 2021, the RCPA successfully achieved Medical Services Advisory Committee (MSAC) funding approval for evidence-based molecular and genomic testing of brain and haematology tumours. Public funding of these tests supports one of the key tenets of the College by ensuring equity of access to testing for all Australians.

### Structured Pathology Reporting of Cancer Project

Structured Pathology Reporting of Cancer (SPRC) protocols are the result of expert multidisciplinary input and independent peer-review and are authored by a volunteer group of expert pathologists, clinicians and scientists. Each protocol incorporates the latest scientific evidence, TNM staging, and internationally agreed standards from the International Collaboration on Cancer Reporting (ICCR). Prof Priyanthi Kumarasinghe joined as the new Chair of the SPRC Project in 2021.

Progress towards nationwide implementation of high-level SPRC was achieved in 2021. The National Pathology Accreditation Advisory Council (NPAAC) published the 4th edition "Requirements for Information Communication and Reporting",<sup>2</sup> which includes as a requirement, the use of RCPA SPRC Protocols, where published protocols exist. This is a significant achievement by all in the pathology community who have

worked towards this goal for over a decade. The requirement comes into effect on 1 August 2022.

### International Collaboration on Cancer Reporting

The ICCR produces standardised reporting templates for cancers, available to all countries of the world. The ICCR celebrated its 10-year anniversary in 2021 and marked the achievement with the publication of an Editorial article<sup>3</sup> in the journal *Histopathology*. You can read it here [pubmed.ncbi.nlm.nih.gov/34783048](https://pubmed.ncbi.nlm.nih.gov/34783048)

From its inception in 2011 with four founding members – including the RCPA – the ICCR has grown to become a not-for-profit corporation with 18 sponsoring members, covering six continents, and representing a pathology community that services several billion people.

New ICCR Datasets published in 2021 included: six bone and soft tissue Datasets, seven gynaecological Datasets, three breast Datasets, and four gastrointestinal Datasets ([iccr-cancer.org](https://iccr-cancer.org))

### Pathology Update Conference and Exhibition

The 2021 Pathology Update was a hybrid format conference, combining an onsite component at the International Convention Centre, Sydney, and a live-streamed event on 2–4 July 2021.

This significant event on the RCPA's annual calendar featured extraordinary international and Australian world experts in the disciplines of Anatomical, Chemical, Forensic, Genetic, General, Haematology, Immunopathology and Microbiology. One of the highlights at the 2021 meeting was an announcement by A/Prof Paul Ekert that as a result of the success of phase one of the Zero Childhood Cancer National Personalised Medicine Program (ZERO), every child diagnosed with cancer in Australia would have access to personalised medicine for the first time.<sup>4</sup>

### References

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2 National Pathology Accreditation Advisory Council (2021). *Requirements for Information Communication and Reporting (Fourth Edition 2020)*:38.

3 Srigley JR, Judge M, Helliwell T, Birdsong GG and Ellis DW (2021). *The International Collaboration on Cancer Reporting (ICCR): a decade of progress towards global pathology standardisation and data interoperability*. *Histopathology* 79(6):897-901.

4 Royal College of Pathologists of Australasia (2021). *Media release - Every child diagnosed with cancer to have access to personalised medicine for the first time*. Available from: [rcpa.edu.au/getattachment/6de25514-eaeb-461b-a281-e1feac4f4dda/Every-child-diagnosed-with-cancer-to-have-access-t.aspx](https://rcpa.edu.au/getattachment/6de25514-eaeb-461b-a281-e1feac4f4dda/Every-child-diagnosed-with-cancer-to-have-access-t.aspx) (Accessed 17th January 2022).



**Kenneth Lee**  
Council  
representative,  
RCPA

“To date, through the pandemic, it has been widely acknowledged that it has been the combined efforts of public health and Government, the general public, (who have readily come forward to be tested) and the Australian laboratories, including pathologists, scientists, collectors, couriers and all laboratory staff (who have been working around the clock), that have been central to limiting the spread of COVID-19 in this country.”

**RCPA President  
Dr Lawrie Bott**

## THORACIC ONCOLOGY GROUP OF AUSTRALASIA



Thoracic Oncology Group Australasia

**In July 2021, the Thoracic Oncology Group of Australasia (TOGA) celebrated its first birthday, having evolved from the Australasian Lung Cancer Trials Group (ALTC) a year earlier. TOGA is ably led by Chair Prof Nick Pavlakakis, and governed by a Board of Directors, each responsible for a particular portfolio. Committees and working groups have been established in specialty areas.**

### TOGA membership

TOGA has re-established a 350+ multidisciplinary and consumer membership who collaboratively develop research proposals and clinical trials to improve outcomes for lung cancer and mesothelioma patients. If you are interested in TOGA membership please visit [thoraciconcology.org.au/membership](http://thoraciconcology.org.au/membership).

### Education program

TOGA has established a successful education program, underpinned by the Annual Scientific Meeting (ASM) and the Lung Cancer Preceptorship, and expanded to include virtual symposia after the major international conferences and monthly podcasts covering topical items in thoracic cancer ([thoraciconcology.org.au/education/podcasts](http://thoraciconcology.org.au/education/podcasts)).

Focusing on a theme of "Equity and Innovation in Multidisciplinary Lung Cancer Care", the 2021 ASM was held virtually in July, attracting 234 live viewers. The diverse program covered neo-adjuvant therapy in early disease, screening in never-smokers, precision medicine, Stereotactic Ablative radiotherapy (SABR) for oligometastatic disease, gaps and inequities in lung cancer care, embedding lung cancer research, immunotherapy in mesothelioma and a mock multidisciplinary team masterclass, as well as updates on TOGA clinical trials.

The Lung Cancer preceptorship was held virtually in October and provided an active learning program for medical

trainees, fellows, nurses, potentially other allied health members and consumer observers, interested in developing their clinical knowledge and expertise in lung cancer management. Under the mentorship of preceptors, each attendee conducts a critical appraisal of selected key published papers and presented this to the audience. The preceptorship is a critical educational offering to demonstrate how evidence underpins clinical decision-making, and for establishing relationships in the Australian and New Zealand lung cancer field.

### Clinical trial and research program

The **ASPIRATION study**, conducted in collaboration with Omico and University of Sydney NHMRC CTC, evaluates routine upfront comprehensive genomic profiling (CGP) as a standard care in 1,000 newly diagnosed patients with non-squamous, metastatic non-small cell lung cancer (NSCLC). Patients can be enrolled through an ASPIRATION site or remotely via the Garvan. Treatment substudies utilising targeted therapies for BRAF, ALK, NTRK, MET and Her2 are open to recruitment.

The **Phase 3 DREAM3R trial** evaluating chemotherapy alone or with durvalumab in malignant pleural mesothelioma opened to recruitment at up to 30 Australian and New Zealand sites. Led by Prof Anna Nowak, the trial is a collaboration with PRCOG, a US-based trials group, with sites open throughout USA.

**ILLUMINATE** is a Phase 2, single arm trial assessing the efficacy and tolerability of durvalumab (PD-L1 inhibitor) and tremelimumab (CTLA-4 inhibitor) with chemotherapy in patients with advanced EGFR NSCLC following progression on EGFR tyrosine kinase inhibitors (TKIs). The trial is led by Dr Chee Lee, and involves international collaborations in the Province of China and Taiwan. Australia successfully concluded their recruitment to this clinical trial in 2020.

**ALKTERNATE**, led by Dr Malinda Itchins, is a proof concept study examining the hypothesis that alternating lorlatinib with crizotinib in a pre-treated advanced ALK-rearranged NSCLC population will delay the emergence of resistance to ALK TKIs.

The preliminary findings of the **OSCILLATE trial** were presented by Prof Ben Solomon at the World Lung Cancer Congress. This study evaluated alternating therapy with two TKIs, gefitinib and osimertinib, aiming to modulate the populations of EGFR-T790M positive and negative tumour clones, to delay the emergence of resistance to osimertinib in EGFR-T790M mutation positive advanced NSCLC patients who have received prior therapy with an EGFR-TKI.

The results from the **NIVORAD trial**, "A Phase 2 trial nivolumab and Stereotactic Ablative Body Radiotherapy (SABR) in advanced NSCLC progressing after first or second line chemotherapy" were presented as an oral presentation at the American Society for Radiation Oncology (ASTRO) 2021 conference. Administering SABR with nivolumab was safe but offered no further clinical benefit than delivery of SABR alone.

The Scientific Committee has continued to assess research proposals presented by TOGA members. Members now benefit from a defined concept development pathway (see TOGA website) that clearly delineates the difference and benefits of TOGA-led and TOGA-endorsed research projects or clinical trials. The formation of working groups in early NSCLC, advanced NSCLC SCLC/mesothelioma and supportive and palliative care has enhanced the capacity for peer-review and consumer involvement of developing concepts, and the identification of research "gaps". A recent concept development workshop saw nine concepts presented, with eight of these approved for further development.

Involving consumers and supporting patients through research

TOGA strongly encourages consumer feedback in development of clinical trial proposals, clinical trial documentation and communication of trial results. The TOGA Consumer Panel expanded in 2021 to include four new members, and training was conducted so newly joined TOGA consumer members could interpret clinical trial designs as they were presented to the wider membership.





TOGA also strengthened its collaboration with the mesothelioma patient support groups, conducting two training workshops. The first workshop explained the benefits and basics of clinical trials, and the second workshop discussed immunotherapy in mesothelioma and the hypothesis behind the DREAM3R clinical trial.

#### Fundraising

As a registered charity, TOGA undertaken fundraising activities to support lung cancer and mesothelioma research. A team of 18 competed in the virtual Sun Herald CityToSurf, logging 14km each by walking or running in their own neighbourhood. TeamTOGA raised over \$20,000 and hopes to at least double that target in 2022.

#### Commendations

We were delighted to see TOGA Board Director, Prof Michael Boyer receive the 2021 Adi F Gazdar International Association for the study of Lung Cancer (IASLC) Merit Award. The Peter MacCallum Cancer Centre multidisciplinary lung cancer care team was nominated by local lung cancer patient Lisa Briggs, and won the IASLC Cancer Care Award, highlighting the high standard of lung cancer care in Australia. Prof Anna Nowak was the inaugural recipient of the MOGA Heroes Award, established to honour the spirit, courage and commitment of the late Professor Martin H Tattersall AO.



**Nick Pavlakis**  
Chair,  
TOGA

## TROG CANCER RESEARCH



### TROG Cancer Research committees and working parties

TROG Cancer Research has continued to work closely with our members to ensure that our trials and new proposals address the key priorities in radiation oncology. TROG working parties are comprised of members from many craft groups and disciplines, with a focus on head/neck and skin, breast, lung and genitourinary. The inaugural Central Nervous System Working Party meeting was also held in 2021, bringing together those with an interest and expertise in cancers involving the central nervous system. We thank these hard-working committee members for their time and efforts to support our TROG Scientific Committee.

In addition, TROG Cancer Research has supported several specialist interest committees during 2021 including New Technologies and Techniques, MR in Radiation Therapy and Particle Therapy. There is a lot going on in this space, with many new ideas, partnerships and collaborations being generated through these committees.

### Research achievements in 2021

We hosted our first online Concept Development Workshop in December 2021, for which 14 proposals were submitted. We are looking forward to running more workshops with an even better format, to support new proposal development in 2022!

TROG are very pleased to report that four new TROG trial proposals were endorsed for further development by TROG throughout 2021. We look forward to working closely with the investigators to secure funding.

### • New Trials activated in 2021

- ▶ **TROG 19.06 DECREASE -** DarolutamidE + Consolidation Radiotherapy in Advanced proStatE Cancer Detected by PSMA, was opened at five centres and enrolled 10 participants in 2021 (TROG Trial Chair: A/Prof Siva, Peter MacCallum Cancer Centre, VIC).

- ▶ **TROG 20.01 CHEST RT** is a trial of Chemotherapy and Immunotherapy in Extensive-Stage Small-Cell Lung Cancer with Thoracic Radiotherapy. The trial was activated at three hospitals in 2021 (TROG Trial Chairs: Dr Eric Hau (Westmead Hospital, NSW) and A/Prof Paul Mitchell (Austin Hospital, VIC)).

### • Active trials in 2021 - Achievements

- ▶ **TROG 18.06 FIG - FET-PET In Glioblastoma** - TROG 18.06 FIG trial is led by TROG Trial Chairs A/Prof Eng-Siew Koh (Liverpool Hospital, NSW) and Prof Andrew Scott (Austin Hospital, VIC). The FIG trial is investigating how the addition of FET-PET imaging to standard MRI imaging affects radiation target volume delineation and treatment planning for Glioblastoma. Twenty-four participants were enrolled from eight recruiting sites in 2021.
- ▶ **TROG 13.01/ALTG 13.001 SAFRON II** (Stereotactic Ablative Fractionated Radiotherapy versus Radiosurgery for Oligometastatic Neoplasia to the Lung) randomised trial has been published (TROG Trial Chair: Associate Professor Shankar Siva, Peter MacCallum Cancer Centre, VIC).
- ▶ **TROG 17.02 OUTRUN** (Phase II randomised trial of Osimertinib with or without Stereotactic Radiosurgery for EGFR Mutated NSCLC with Brain Metastases), TROG Trial Chair: Dr Fiona Hegi-Johnson (Peter MacCallum Cancer Centre, VIC) and A/Prof Chee Lee (St George Hospital, NSW) has continued to enrol participants despite COVID and other challenge, with 28 participants by end of 2021.
- ▶ **USYD/TROG 17.03 LARK** - Liver Ablative Radiotherapy utilising Kilovoltage intrafraction monitoring (KIM) - achieved accrual of 15 participants from three sites and is led by TROG Trial Chairs: Dr Tim Wang, Westmead Hospital NSW and Dr Dominique Lee, Princess Alexandra Hospital, QLD.
- ▶ **TROG 18.01 NINJA** - Novel Integration of New prostate radiation therapy schedules with adjuvant Androgen deprivation - has seamlessly transitioned from phase II to phase III, reaching over 150 participants. (TROG Trial Chairs: Prof Jarad Martin, Calvary Mater Hospital,

NSW and Dr Mark Sidhom, Liverpool Hospital, NSW)

- ▶ **TROG 16.02 Local HER-O** - A Phase II study of local therapy only (stereotactic radiosurgery and/or surgery) for treatment of up to five brain metastases from HER2 positive Breast Cancer - achieved completion of follow up for all participants (TROG Trial Chair: Dr Claire Phillips, Peter MacCallum Cancer Centre, VIC).
- ▶ **ICR-CTSU/2015/10052/TROG 16.3 CORE** - A randomised trial of CONventional care versus Radioablation (stereotactic body radiotherapy) for Extracranial oligometastases - completed the follow up period (TROG Trial Chairs: Prof Farshad Foroudi, Austin Health/Olivia Newton John Cancer Wellness and Research Centre and A/Prof David Pryor, Princess Alexandra Hospital).
- ▶ **CCTG SC.24/TROG 17.06** - A randomised phase II/III study comparing stereotactic body radiotherapy versus conventional palliative radiotherapy for patients with spinal metastases (TROG Trial Chair: A/Prof Shankar Siva) was published.

### Radiation Therapy Quality Assurance

TROG has conducted Quality Assurance activities for many trials throughout 2021 with expansion of our Radiation Therapy Quality Assurance department. TROG have recently developed an adaptive risk-based model to aid the implementation of efficient radiation therapy quality assurance in our clinical trials. We are currently collaborating with the Thoracic Oncology Group of Australia (TOGA), Australasian Gastro-Intestinal Trials Group (AGITG), Breast Cancer Trials Group (BCT), Australian and New Zealand Urogenital and Prostate Cancer Trials Group (ANZUP), Melanoma and Skin Cancer (MASC) Trials Group and several other groups, to conduct clinical trial radiation therapy quality assurance activities.



**Trevor Leong**  
Chair, TROG  
Cancer Research

# OTHER REPORT

## CANCER COUNCIL AUSTRALIA



**Cancer Council is Australia's leading cancer charity, and the only charity that works across every aspect of every cancer including research, prevention and support. Our vision is a cancer-free future and our Federation continues to work towards that vision, helping to reduce the burden of cancer in Australia.**

The ongoing COVID-19 pandemic has presented us with many challenges over the last year but we have continued to lead the way with world-class research, prevention work, supporting people affected by cancer and using our voice and expertise to advocate for all Australians affected by all cancers. Our work with COSA on improving survival from cancer has never been more critical.

Some highlights of 2021 include:

- Working with the Australian Government to encourage eligible Australians not to delay their cancer screening due to COVID-19 with our "Cancer Screening Saves Lives" campaign. This campaign proved effective in driving reach and engagement amongst the target audience.
- Reaching millions of Australians across the summer with National Skin Cancer Action Week campaign that called for Federal Investment in national skin cancer prevention culminating in the Federal Government announcing two years of funding for prevention at the end of 2021.

- Supporting people with all cancer types with the development of web-based resources for people with rare and less common cancers, their carers and loved ones. These are now part of our national *Understanding Cancer* series of more than 60 resources.
- Tackling cancer myths with our World Cancer Day campaign on misinformation. This reached around five million Australians and drove people to our newly revamped iHeard website, where we refute cancer related myths.
- Supporting our Federation members to host very different looking events for Australia's Biggest Morning Tea and Daffodil Day in this era of COVID-19. The generosity of Australians who raised over \$2 million on Daffodil Day and \$10 million with Australia's Biggest Morning Tea, exceeded expectations and supported Cancer Council in our work.



**Tanya Buchanan at an Australia's Biggest Morning Tea event in May 2021**

We have continued working over the past year to achieve health policies that prevent cancer from occurring and which ensure all Australians affected by cancer can receive the support and care they need. Cancer Council presented at the Ministerial Round Table for the development of an Australian Cancer Plan and we are active members of the Australian Cancer Plan Advisory Group. Cancer Council has been a member of

the Expert Steering Committee for the National Preventive Health Strategy and we have made multiple submissions to the Australian Government on issues of public health and cancer care policy. Further to our work last year with the Australian Government encouraging Australians to complete their cervical, bowel and breast screening, we are working with the Australian Government on developing a new campaign to increase participation in the National Bowel Cancer Screening Program. If we can increase the number of people who complete their free at-home screening test kit to six in ten Australians by 2040, we can save 84,000 lives over the next 20 years.

I am enormously proud of the work we have done in the past year, particularly with so many added challenges and constraints due to the ongoing pandemic. I look forward to the upcoming year, collaborating with our members, stakeholders and government as together we work towards a cancer free future.

Lastly and most importantly, as a non-government organisation, our work would not be possible without the support of our community. We particularly want to thank the many COSA members who provide us voluntarily with advice and support, and throw their influence behind our policy, project, and advocacy initiatives every year. As our clinical partner you make an amazing contribution to our efforts to achieve a cancer-free future.

I very much look forward to working with you in the future.



**Tanya Buchanan**  
CEO,  
Cancer Council  
Australia



# COSA ANNUAL REPORT 2021



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