

Cabrini Research 2004-2005

Cabrini Health's Mission

Cabrini is a Catholic health care facility. As such we are an integral part of the Church's healing mission. With the spirit and vision of our Founder Saint Frances Xavier Cabrini, our service reflects God's compassionate love for all and the dignity of human life.

At Cabrini we are dedicated to serving the needs of the community to the best of our ability, always striving for excellence. We respect life in all stages and, in a spirit of partnership, we are committed to compassionate, competent care for all those we serve.

Values

Compassionate, competent care
Respect for life in all stages
Partnership and co-operation with our fellow workers
Responsible management of resources

Cabrini Clinical Education and Research Institute's Mission

"Improving patient outcomes, through research and education".

We produce high quality academic research and education with a clinical focus. We aim to create a model of scholarship for the future: a model that produces visionary, creative and exemplary research, through an interdisciplinary approach.

We embrace the mission of Cabrini Health. The Institute shares Cabrini Health's values of compassionate, competent care and works within an ethical framework.

Cabrini Clinical Education and Research Institute - Council Members

Mr David E. Curtain QC
Mr Paul Exell
Prof Peter Fuller
Ms Kathy Keele (Chair)
Prof Sandra Legg
A/Prof Doug Lording
Mr Lew Saliba
Dr John Santamaria
A/Prof Lawrence St Leger

Cabrini Research in Review



Ms Kathy Keele (Institute Chair)
and Dr Peter Lowthian

The Institute's Activities – The Year in Review

The last year has been an exciting time within the Institute with new programs of research, expanding educational commitments, and the implementation of our strategic plan that was completed in late 2004. The departmental reports (later in the book) outline their areas of research and achievements.

Our Council continues to provide leadership and direction with Kathy Keele as our Chair. The Institute strategic planning process focused on our commitment to *"Improving patient care through research and education"*, and set challenging growth and outcome targets for the Institute.

In June, the Governing Board of Cabrini Health agreed to the expansion of undergraduate medical student education. From 2006 we will have a cohort of third year students from Monash University at Cabrini Health for their core surgery and medicine teaching. From 2007 we will also commence having some clinical students from the University of Notre Dame Australia. The Institute's academic medical departments and the clinicians at Cabrini Health are supporting this commitment to education.

The Institute supports scholarships and grants to support nursing education across Cabrini Health. This year has seen support given to a wide variety of staff areas, including oncology, geriatric nursing, the hospital's education department, the emergency department, pastoral care, palliative care and medical imaging. Support from the Eleanor Keamy and George Tate Trusts will support new educational grants in cardiac nursing.

The support of all our donors and our hardworking Special Events Committee continue to allow us to develop our research programs. I would like to mention a new development that has been very exciting. During the last year we have been able to establish three donated research scholarships with the support of the Sambor, Selwyn and Alder families. Their generosity will enable us to support new research in its developmental phase.

This year the Cabrini Deakin Centre for Nursing Research, the Cabrini Health Division of Nursing and the Institute established a working group to evaluate the integration of evidence into practice within the hospital. Translation of research evidence into clinical practice is fundamental to any clinical research institute, and the formal evaluation of implementation is an essential part of our research program.

Researchers within the Institute continue to be successful in obtaining competitive research grants. Associate Professor Rachelle Buchbinder has obtained grant support from the Commonwealth Government, the National Health and Medical Research Council, Arthritis Australia and ANZ Trustees for her research into musculoskeletal conditions. Professor Beverly O'Connell and her team from the Cabrini Deakin Centre for Nursing Research have obtained funding from Deakin University

and the Commonwealth Department of Health and Ageing. Dr Bev Warner (Geneticist in the Family Cancer Clinic); with a colleague from Peter MacCallum, has been awarded a grant from the Helen Macpherson Smith Trust for a project investigating family communication of genetic information to promote health and prevent cancer.

There have been a number of individual awards to our researchers in the last twelve months. Associate Professor Rachelle Buchbinder was one of two recipients awarded the Monash University Faculty of Medicine, Nursing and Health Sciences "Faculty Research Award for 2004". This award recognised Faculty members for the national and international standing of research conducted over the previous four years. Associate Professor Buchbinder has also been awarded a Practitioner Fellowship by the National Health and Medical Research Council.

In addition to her membership of a number of Commonwealth committees, Professor O'Connell was appointed the Director of the Deakin University Ageing and Chronic Illness Research Priority Area.

The year ahead

The next year promises to be challenging and exciting. The expansion of our activities depends on the ongoing support of our generous sponsors and donors and Cabrini Health, as well as the ability of our researchers to obtain competitive grant funding.

In addition to developing our current programs of research, we have received Commonwealth funding to support the establishment of an evidenced-based Cochrane Musculoskeletal Satellite within the Cabrini-Monash Department of Clinical Epidemiology. Discussions are also progressing on the establishment of a new academic department within the Institute: a Cabrini-Monash Department of Medicine.

The ninth annual Cabrini Research Day is on Thursday, 17th November 2005. The topic for the day is *"New technology and the patient with cancer"*. Associate Professor Miles Prince has accepted our invitation to present the keynote lecture on adult stem cell research and this will be preceded by an interactive seminar.

As part of the development of the new Cabrini Children's Centre, we are fortunate that Cabrini Health has also developed a new area for the Institute. For the first time, three of our academic research departments are going to be co-located, which will provide us with more opportunities for collaborative research.

Ms Kathy Keele **Dr Peter Lowthian**
Institute Chair Executive Director

Cabrini – Deakin Centre for Nursing Research

Head of Department: Professor Beverly O'Connell

Activities within the Cabrini – Deakin Centre for Nursing Research continue to consolidate and grow with programs of research focussed around two major areas that are of national and local importance. These two areas are: 1) the care of the older person and 2) patient safety. In addition, greater emphasis is being placed on working more closely with nursing staff to integrate research findings and best evidence into policy and practice to improve the quality of patient care. Research projects are developed based on clinical questions raised by experienced Cabrini nursing staff and other health professionals who form part of the research teams. This year, research activities within the Centre have been presented at more than ten national and international conferences. Staff within the Centre have supported Cabrini staff (both novice and experienced presenters) to deliver papers that were professionally acknowledged.

Professor Beverly O'Connell and Associate Professor Anne Gardner continue to take a leadership role by coordinating multi site studies with various hospitals including Maroondah, Peter James, St John of God, Geelong, Barwon Health and South West Healthcare. Current multi site studies are focussed on the areas of medication management and continence. The Centre has also developed links with The Centre for Research into Aged Care Services, Curtin University and will be participating in a joint study using the WA Data Linkage Systems. The Centre is also maintaining its established links with researchers from Viborg, Denmark who have visited to discuss further collaborations. These collaborations add value to the scope of our studies and therefore the understanding of the research topics. These partnerships also assist in raising the profile of Cabrini's contribution to research within the general and professional community.

Grants and Awards

In the past year, the Centre has received a National Heart Foundation Postgraduate Research Scholarship for three years for a study in stroke care, a Deakin University Honours scholarship for one year for a study reviewing recovery of older persons post day surgery. It has also been awarded a conference prize for Best Presentation in the Nursing and Allied Health session for a paper presented on Infection Control at the Health and Medical Research Annual Scientific Meeting in Canberra.



Sister Irma Lunghi, Hon. Jeff Kennett, AO, Professor Sandra Legg and Dr Darren Lockie (Peter Meese Memorial Lecture)

Highlights

Research activities within the Centre have been recognised by the Department of Health and Ageing who has engaged our services on a consultancy basis for a national research project in the areas of aged and continence care.

Findings from the Centre's national study on the promotion of continence management in residential aged care have been endorsed by the Department of Health and Ageing and will be published on the Australian Government's website. These findings have also been presented in multidisciplinary international conferences and published in international peer-reviewed journals.

Two of the Centre's staff members, Mary Hawkins and Cadeyrn Gaskin graduated with PhDs this year.



Professor Beverly O'Connell and two visiting researchers from Viborg, Denmark

Cabrini – Deakin Centre for Nursing Research

Publications

International Refereed Journals

1. Feeley, K., Gardner, A., Mitchell, I. and Leditschke, A. (2005) Does implementation of a goal sedation score improve management of mechanically ventilated adults? [conference abstract] *Critical Care*, 9 (Suppl 1): 141.
2. Gardner, A. and Gardner, G. (2005) A trial of nurse practitioner scope of practice, *Journal of Advanced Nursing*, 49(2): 135-145.
3. O'Hagan, C. and O'Connell, B. (2005) The relationship between patient blood pathology values and patient falls in an acute care setting: A retrospective analysis, *International Journal of Nursing Practice*, 11(4): 161-168.
4. O'Connell, B., Cockayne, M., Wellman, D., and Baker, L. (2005) Fall risk factors and the nature of falls in inpatient oncology and palliative care settings, *Contemporary Nurse*, 18(3): 247-257.
5. O'Connell, B., Day, K., Wellman, D., and Baker, L. (2005) Development, implementation and evaluation of a *Continence Education Package* in acute and sub-acute care settings. *Journal of Wound, Ostomy and Continence Nursing*, 32(2): 101-111.
6. O'Connell, B. and Ostaszkievicz, J. (2005) Sink or Swim – Ageing in Australia, *Australian Healthcare Review*, 29(2): 146-150.
7. O'Connell, B. and Ostaszkievicz, J. (in press) The Challenge of Managing Continence Care in Residential Aged Care Settings: Recommendations for research and practice. *Geriatrics*
8. Rowe, JA., Gardner, GE., and Gardner, A. (2005) Parenting a preterm infant: Experiences in a regional neonatal health services program. *Neonatal, Paediatric and Child Health Nursing*. 8(1): 17-23.
9. Milborne, K., Darvill, J., Gardner, A. and Gardner, G. (in press) Extending pediatric cannula survival: results of a randomised controlled trial. *Journal of Pediatric Nursing*.
10. Ski, C. and O'Connell, B. (in press) Mismanagement of delirium places patients at risk. *Australian Journal of Advanced Nursing*.
11. Gardner, A., Hughes, D., Cook, R., Henson, R., Osborne, S. and Gardner, G. (in press) Best practice in stabilisation of oral endotracheal tubes: a systematic review. *Australian Critical Care*.
12. Gardner, G., Carryer, J., Gardner, A. and Dunn, S. (in press) Nurse Practitioner competency standards: findings from collaborative Australian and New Zealand research. *International Journal of Nursing Studies*.

Other Publications

1. Cabrini – Deakin Centre for Nursing Research (2005) Patient and carers management of medications, *Institute Insight*, 21: 4.
2. Gardner, A. (2005) ACT tops Australia! *Nursing Review*, May 2005.
3. Gardner, A., Darvill, J. and Milbourne, K. (2005) Routine replacement of short peripheral IV catheters (Letters to the editor reply), *Australian Infection Control*, 10(2): 69.

Final Reports

1. Cabrini – Deakin Centre for Nursing Research (2005) Department of Veteran Affairs Patient management of medications across the acute and community health service interface: A pilot study (Cabrini Health Malvern campus), Cabrini – Deakin Centre for Nursing Research.
2. O'Connell, B., Day, K., Hunt, S., Jennings, H., Ostaszkievicz, J., Crawford, S., and Hawkins, M. (2004) 'Evaluation of resources for the promotion of continence in residential aged care: a national consultative approach'.

Book Chapter

1. Gardner, G. and Gardner, A. (2005) Adapting to Chronic Illness, in *Solution Focused Nursing*, Margaret McAllister (Ed).

Cabrini – Deakin Centre for Nursing Research

Presentations

Invited presentations

Gardner, A. (2005) Clinical leadership and the Nurse Practitioner, Royal College of Nursing, June 2005, Melbourne.

O'Connell, B. (2005) Nursing into the future: Negotiating transitions, Nursing Grand Round, Epworth Hospital, Melbourne.

O'Connell, B. (2005) Ageing: Who cares? Deakin Debate, Deakin University, Melbourne Campus.

Conference presentations

Birrell, K. and O'Connell, B. (2005) Registered Nurses Job Satisfaction – What really matters, Leadership Conference, February, Sydney.

Gardner, G., Carryer, J. and Gardner, A.. (2005) Nurse Practitioners standards: An Australia and New Zealand Research Collaboration, International Nursing Research Conference, March, Belfast.

Gardner, A., Dunk, A. and Eggert, M. (2005) A study of Waterlow pressure injury risk factor scores and interface pressure, Health and Medical Research in the Canberra region: Annual Research Conference, June, Canberra.

Cook, R., Clarke, K. and Gardner, A. (2005) 'Wash hands, prepare equipment, assist disease': Traditionalist representations of nursing practice in hospital organisational nursing policies, Health and Medical Research in the Canberra region: Annual Research Conference, June, Canberra.

Feeley, K, Gardner, A, Mitchell, I, Leditsky, A. (2005) The Effect Of A Nurse Initiated Sedation Protocol On Sedation Goal Score Compliance: An Intervention Study 9th Congress of the World Federation of Societies of Intensive and Critical Care Medicine Buenos Aires, August, Argentina.

Gardner, A., Gardner, G. and Dunn, S. (2005) Nurse Practitioner Standards Project, presentation and discussion of the research project to develop generic standards for Nurse Practitioners in Australia and New Zealand, July, Adelaide (workshop).

Ashley-Coe, C., S Legg, S., and Gardner, A. (2005) Promoting life long learning a partnership approach Adelaide, RCNA conference, July, Adelaide (workshop).

O'Connell, B., Day, K., Wellman, D. and Baker, L. (2005) Does increased knowledge of incontinence influence health-seeking behaviours? RCNA conference, July, Adelaide.

O'Connell, B., Legg, S., Tull, A., Bennett, P., Jones, K., Radnell, J. and Crawford, S. (2005) Single Nurse Checking and Administration of Medications (SNCAM) Initiative: A

Change Management Strategy, RCNA conference, July, Adelaide.

Ski, C. and O'Connell, B. (2005) Stroke survivors' hospital discharge: Is the transition smooth?, Smart Strokes Conference, July, Sydney.

Butterfield, Y., Phillips, D. and O'Connell, B. (2005) Midwives knowledge and practices about urinary incontinence in childbearing women, International Midwives Conference, July.

Lynch, C., Ostaszkievicz, J., Ski, C., Wilson, C., O'Connell, B., Hawkins, M. and Baker, L. (2005) Multidisciplinary goal setting in aged care rehabilitation: a retrospective review, Australian Rehabilitation Nurses Association, October, Melbourne.

O'Connell, B., Hawkins, M., Ostaszkievicz, J. and Ski, C. (2005) Patient care needs of young-old, mid-old and old-old patients: a comparative study, Australian Association of Gerontology, November, Surfers Paradise.

Ski, C., O'Connell, B., Hawkins, M. and Baker, L. (2005) Rehabilitation care needs: older old versus younger old, Australian Association of Gerontology, November, Surfers Paradise.

O'Connell, B., Ostaszkievicz, J., and Ski, C. (2005) The development and trial of a best practice protocol for the management of urinary retention in elderly patients in acute and subacute care settings, Continence Foundation Australia Conference, October, Melbourne.

Conference poster presentations

Feeley, K., Gardner, A., Mitchell, I. and Leditschke, A. (2005) Does implementation of a goal sedation score improve management of mechanically ventilated adults? [poster] 25th International Symposium on Intensive Care and Emergency Medicine, March, Brussels, Belgium.

Clarke, K., Cook, R. and Gardner, A. (2005) First steps in qualitative research: Using discourse analysis to explore hospital organisational nursing policies, [poster] Health and Medical Research in the Canberra region: Annual Research Conference, June, Canberra.

Professional presentations

O'Connell, B., Hawkins, M., Baker, L. and Jones, K. (2005) Evaluation of a fall risk assessment tool across three settings: Palliative care, oncology and general medical, March, Peter Meese Lecture, Cabrini Health.

Gardner, A. (2005) Cabrini – Deakin Centre for Nursing Research, Overview of Research 2004-2005. in Night Duty Nurses Education Workshop. Cabrini Health, Melbourne.

Cabrini Monash University Department of Surgery The Fröhlich West Chair of Surgery

Head of Department: Professor Adrian Polglase



Mr Joseph and Mrs Helena Fröhlich West

The Cabrini Monash University Department of Surgery was first established in 1998 as a joint venture between Cabrini Clinical Education and Research Institute and Monash University and is headed by Professor Adrian Polglase. In 2004 the Chair was endowed as the Fröhlich West Chair of Surgery. The activity of the Department expands each year with research and education the main focus.

Education

Commencing in 2005 Cabrini Health has been accredited for the purposes of advanced general surgical training by the Royal Australasian College of Surgeons. Cabrini is the first private hospital in Australia to be granted an accredited general surgical trainee position. This is a unique opportunity, embraced by the Department of Surgery and Cabrini Health, for surgical trainees to be exposed to a private hospital environment and gain comprehensive and appropriate training for the future.

In 2005 the Department hosted two internationally known surgeons Mr Ian Lindsay, Colorectal Surgeon at Oxford, UK; spoke on "A New Procedure for Rectal Prolapse" and Professor John Monson, University of Hull, UK; spoke on "New Technology in Colorectal Surgery".

The Sir Edward Hughes Memorial Clinical Research Prize in Surgery is in its seventh year, supported generously by Johnson & Johnson, each year a broad range of trainees are attracted to present a research paper with wide and varying topics.

Research

The Optiscan association is continuing with encouraging results. This technology allows the lining of the large bowel to be examined invitro at a magnification never before possible (x1000). This facilitates immediate histological diagnosis of a range of bowel conditions. The department has been pleased to have the opportunity to collaborate with Dr Ralf Kiesslich at the *University of Mainz* and this cooperative collaboration has resulted in the joint publication of a paper in the high impact journal: *Gastroenterology* (2004 Sep;127(3):706-13

Research topics

- Monash University Collaborative Colorectal Data Base. This multicentre data and audit collaboration should be the largest colorectal surgical audit of its type in Victoria, and act as a fertile source of outcome research and quality control
- A prospective randomized double blinded trial comparing continuous wound infusion of local anaesthetic with placebo for post-operative pain control following colorectal surgery
- Evaluating the effectiveness of a telephone based support program for newly diagnosed patients with colorectal cancer in association with the Cancer Council.
- Examination of the human gastrointestinal tract using the flexible confocal endomicroscope
- A prospective trial to determine the effect of a proton pump inhibitor and the improvement in gastric emptying of patients post oesophagectomy.
- Prognosis after palliative surgery for colorectal cancer
- Single use rigid sigmoidoscope insufflators: Evidence Based Practice.

Cabrini Monash University Department of Surgery The Fröhlich West Chair of Surgery

Members of the Department recently contributed to manuscripts for inclusion as chapters into major surgical texts to be published. They are:

1. Large Bowel Obstruction. AL Polglase. Textbook of Surgery 3rd edn JJ Tjandra, GJA Clunie, RSJ Thomas. *Blackwell Science Asia*
2. Rare tumours of the anus and rectum. PJ McMurrick, PW Carne, M Johnson, Surgery of the alimentary tract, 6th edn. Shackelford
3. Chronic ulcerative colitis: surgical options. PJ McMurrick, Current therapy in colon and rectal surgery 2nd edn. VW Fazio, JM Church, CP Delaney. *Elsevier Mosby*

Publications

1. Laparoscopic gastric banding: safe and modestly successful. EA Tweedle, S Woods, S Blamey. *ANZ J Surg.* 2004; 74(4): 191-4.
2. Local recurrence following surgical treatment for carcinoma of the lower rectum. A Polglase, S Grodski, J Chee, A Tremayne, P Bhathal *ANZ J Surg* 2004, Sep;74(9):745-50
3. Confocal laser endoscopy for diagnosing intrepithelial neoplasias and colorectal cancer in vivo. Kiesslich, R., Burg, J., Vieth, M., Gnaendiger, J., Enders, M., Delaney, P., Polglase, A., McLaren, W., Janell, D., Thomas, S., Nafe, B., Galle, P.R. & Neurath, M.F. (2004). *Gastroenterology*, 127: 706–713.
4. Chronic Ulcerative Colitis: Surgical Options. P.J. Paul McMurrick . Current Therapy in Colon and Rectal Surgery. V.W. Fazio, JM church, C. P Delaney, *Elsevier Mosby 2nd E 2005*
5. Primary rectus abdominis myocutaneous flap for repair of perineal and vaginal defects after extended abdominoperineal resection S. W. Bell, N. Dehni, M. Chaouat. , J. C. Lifante, R. Parc, E. Turet *British Journal of Surgery* April 2005;92(4):482-486
6. Factors influencing uptake of genetic testing for colorectal cancer risk in an Australian Jewish population. BJ Warner, AL Polglase, HS Debinski. *Journal of Genetic Counseling*, October 2005;14 (5): 387-394

7. Helicobacter status does not influence post anaesthetic nausea. Woods S, Chee JBL, Treymane AB., Clooney JN, Sinclair CF. *Helicobacter* (2005);10; 443-444

In the press

1. A Fluorescence confocal endomicroscope for in vivo microscopy of the upper and lower gastrointestinal tract. AL Polglase W McLaren , S Skinner , Ralf keisslich , P Delaney, *GI Endoscopy accepted July 2005*
2. Maternal and Fetal Outcome After Colectomy for Fulminant Ulcerative Colitis During Pregnancy: Case Series and Literature Review. Dozois E, Drelichman, E, Wolff B, Carne PWG et al. *Diseases of the Colon and Rectum*, accepted June 2005

Selwyn Family Research Scholarship in Clinical Surgery

The strength and commitment of the Department to bowel cancer research would not be possible without the involvement of and generosity of benefactors. In April 2005, the Cabrini Monash University Department of Surgery launched the Alan, Ahda and Evi Selwyn Family Research Scholarship in Clinical Surgery. This research scholarship that is valued at \$10,000 will be awarded annually in October to support a "younger" clinical researcher in the field of clinical surgery.

Monash Department of Clinical Epidemiology at Cabrini Hospital

Head of Department: Associate Professor Rachelle Buchbinder

7Our research program focusing on finding effective treatments for a range of musculoskeletal conditions such as joint pain and osteoporosis continued in 2005:

- A NHMRC-funded, multi-centre, randomised controlled trial investigating the value of Vertebroplasty (a technique that involves injection of cement into the spine) for painful osteoporotic spinal fractures commenced in 2004. The other participating centres include The Royal Melbourne Hospital, Alfred Hospital and Monash Medical Centre. Nineteen participants have been enrolled with a target of 200 participants. Of note, the Mayo Clinic in the USA is conducting a similar study but has had difficulties with slow recruitment. In order to facilitate pooling of our results we have agreed to measure outcomes in a similar manner. Completion of this trial remains a high priority as there are currently no proven treatments for this extremely painful condition.
- Another NHMRC-funded trial investigating the value of physiotherapy in addition to arthrographic shoulder joint distension for frozen shoulder (adhesive capsulitis) was completed this year. The trial which involved 150 participants is currently being analysed.

The **Australian Rheumatology Association Database (ARAD)**, which will study the long-term effects of arthritis, particularly investigator-led post-marketing surveillance of the new biological agents, has now been fully sanctioned by the Australian Rheumatology Association and nearly 50% of Australian rheumatologists have contributed patients. Recruitment of patients has more than doubled in the past year to nearly 800 patients. The department continues to coordinate the database.

Improving communication with patients. This year we have expanded our focus in this important area. We have plans to extend our work in 'health literacy' as well as linguistic assessment of written patient materials.

Highlights

The Department was recently awarded a Commonwealth Government grant to establish an **Australian Satellite for the Cochrane Musculoskeletal Group (CMSG)**. The CMSG prepares systematic reviews of interventions for the prevention and treatment of musculoskeletal conditions including rheumatoid arthritis, osteoarthritis and osteoporosis. The CMSG also focuses on translating the

results of these reviews into user-friendly formats, making them more accessible to clinicians and consumers. This translation from research to practice enables the use of review results in health care decisions. The Australian Satellite will facilitate greater involvement in the Cochrane Collaboration among Australian researchers, healthcare professionals and consumer representatives with an interest in musculoskeletal conditions. In addition to improving the speed at which reviews are produced and the number of reviews written by Australian authors, the Satellite will increase the capacity of researchers to reach clinicians, policymakers and consumers. Through presentations and workshops there will be more widespread dissemination of the findings of the systematic reviews and this should lead to better health outcomes for people with musculoskeletal conditions such as arthritis.

In the past year, members of the Department accepted invitations to present at several international meetings including the 12th International Conference on Thinking held in Melbourne in July 2005, the Communication, Medicine and Ethics (COMET) conference held in Sydney in June 2005 and the Low Back Pain Congress held in Melbourne in November 2004. Invited presentations were also given to the Australian Rheumatology Association at their annual meeting in May 2005; the Victorian Division of the Australian Society for Geriatric Medicine in March 2005; the Clinical Registry Symposium in December 2004, the annual Australian Spinal Surgery meeting in Surfer's Paradise in June 2004 and the Australasian Cochrane Contributors' Meeting held in Sydney in June 2004.

Grants and Awards

In the past year the Department has received funding support from the NHMRC; the Alberta Heritage Foundation for Medical Research (Canada); the Canadian Institutes of Health Research (Canada); the ANZ Trustees Medical Research and Technology in Victoria Program; the Faculty of Health Sciences, La Trobe University; Arthritis Australia and the Cabrini Education and Research Institute. Associate Professor Buchbinder was awarded a 5-year NHMRC Practitioner Fellowship, which will enable her to continue in her dual role of clinician and researcher.



Associate Professor Rachelle Buchbinder, Dr Henry Debinski and Mr Glenn Staunton at the Clinical School Symposium in August.

Publications

Accepted and in press peer-reviewed publications are listed below:

1. Pinfold M, Niere KR, O'Leary EF, Hoving JL, Green S, Buchbinder R. Validity and internal consistency of a whiplash-specific disability measure. *Spine* 2004; 29:263-8.
2. Buchbinder R, Green S, Forbes A, Hall S, Lawler G. Arthrographic joint distension with saline and steroid improves function and reduces pain in patients with painful stiff shoulder: results of a randomised double-blind placebo-controlled trial. *Ann Rheum Dis* 2004;63:302-9.
3. Buchbinder R, Jolley D. Population-based intervention to change back pain beliefs: a three-year follow up study. *BMJ* 2004; 328:321.
4. Hoving JL, Buchbinder R, Connell C, Hall S, Lawler G, Coombs P, McNealy S, Bird P. A comparison of magnetic resonance imaging, sonography and radiography of the hand in patients with early rheumatoid arthritis. *J Rheumatol* 2004;31:663-75.
5. Buchbinder R. Plantar Fasciitis. *New Engl J Med* 2004;350:2159-66.
6. Willis C, Niere KR, Hoving JL, Green S, O'Leary EF, Buchbinder R. Reproducibility and responsiveness of a Whiplash Disability Questionnaire. *Pain* 2004;110:681-8.
7. Bennell KL, Hinman RS, Crossley KM, Metcalf BR, Buchbinder R, Green S, McColl G. Is the Human Activity Profile a useful measure in people with knee osteoarthritis? *J Rehab Res Dev* 2004;41:621-30.
8. Buchbinder R, Hoving J, Green S, Forbes A, Hall S, Nash P. Short-course prednisolone therapy for the stiff painful shoulder (adhesive capsulitis or frozen shoulder): A randomised placebo-controlled trial. *Ann Rheum Dis* 2004; 63:1460-1469.
9. Connell D, Schneider-Kolsky ME, Hoving JL, Malara F, Buchbinder R, Koulouris G, Burke F. Comparison of sonography and MR imaging in the assessment of acute and healing hamstring strains. *AJR* 2004; 183:975-84.
10. Clerehan R, Buchbinder R, Moodie J. A linguistic framework for assessing the quality of written patient information: its use in assessing methotrexate information for rheumatoid arthritis. *Health Educ Res* 2005;20:334-44.
11. Green S, Buchbinder R, Hetrick S. Acupuncture for shoulder pain. (Cochrane Review). In: The Cochrane Library, Issue 2, 2005. Oxford: Update Software.
12. Bennell K, Hinman RS, Metcalf BR, Buchbinder R, McConnell J, McColl G, Green S, Crossley KM. Efficacy of physiotherapy management of knee joint osteoarthritis: a randomised, double-blind, placebo-controlled trial. *Ann Rheum Dis* 2005;64:906-12.
13. Buchbinder R, Jolley D. Effects of a media campaign on back beliefs is sustained three years after its cessation. *Spine* 2005; 30:1323-30.
14. Jolles BM, Buchbinder R, Beaton DE. A study compared nine patient-specific indices for musculoskeletal disorders. *J Clin Epidemiol* 2005;58:791-801.
15. Clerehan R, Buchbinder R. Towards a more valid account of functional text quality: the case of the patient information leaflet. *Text* 2005;(in press)
17. Buchbinder R, Green SE, Youd JM, Assendelft WJJ, Barnsley L, Smidt N. Shock wave therapy for lateral elbow pain. (Cochrane Review). In: The Cochrane Library, Issue 4, 2005. Oxford: Update Software (in press).
18. Loisel P, Buchbinder R, Hazard R, Keller R, Pransky G, Scheel I, van Tilder M, Webster B. Prevention of work disability due to musculoskeletal disorders: The challenge of implementing evidence. *J Occup Rehab* 2005; (in press).
19. Whitfield K, Buchbinder R, Segal L, Osborne R. Parsimonious and efficient assessment of health-related quality of life in osteoarthritis research: Validation of the Assessment of Quality of Life (AQoL) instrument. *Health Quality of Life Outcomes* 2005;(in press)
20. New PW, Buchbinder R. Review of the Rankin Scale and its derivatives. *Neuroepidemiology* 2005; (in press)

We were invited to write two editorials and one book chapter:

1. Hall S, Buchbinder R. Do imaging methods that guide needle placement improve outcome? [Editorial] *Ann Rheum Dis* 2004; 63:1007-8.
2. Buchbinder R, Green S. Arthrographic joint distension for painful, stiff shoulder [Editorial] *BJSM* 2004; 38: 384-5.
3. Buchbinder R. Managing disability by public policy initiatives. The power of belief: Psychosocial Influence on Illness, Disability and Medicine. Eds: Halligan PW, Aylward M. Oxford University Press, 2005 (in press).

Szalmuk Family Department of Medical Oncology –

A Joint Cabrini Health and Monash University Department

Head of Department: Associate Professor Gary Richardson

Our clinical research program focuses on integration of new drugs into standard therapies to improve cure rates and relieve symptoms. We participate with a number of national and international collaborative organisations to recruit patients to new clinical trials. Our main areas of research include:

1. Targeted therapies: These are drugs with a focused mechanism that specifically act on well-defined targets or biological pathways that when inactivated, causes regression or destruction of the malignant process. Examples of this type of targeted therapy include hormonal-based therapies in breast and prostate cancer; small-molecule inhibitors of the epidermal growth factor receptor pathway in lung, breast, and colorectal cancers; blockers of invasion and metastasis enabling proteins and enzymes; antiangiogenesis agents; proapoptotic drugs; and proteasome inhibitors.
2. Supportive Therapies: These are agents that alleviate or prevent development of symptoms related to cancer or alleviate the toxic side-effects of chemotherapy. An example of the former would be zoledronic acid, an agent that prevents progressive bone destruction caused by cancer invading the skeleton. From the latter, agents such as granulocyte colony-stimulating factor would be a good example. Long-acting forms of this medication reduce the risk of infection associated with myelosuppressive drugs.

Highlights

Highlights over the last year have been the publication of positive results in clinical trials in which Cabrini Hospital patients with breast and colorectal cancers and Non-Hodgkin's Lymphoma have participated. Results from the HERA study and BCIRG-006, two large randomized clinical trials for patients with HER-2 positive invasive breast cancer showed that those patients with early-stage breast cancer who received Herceptin® (trastuzumab) in combination with chemotherapy had a significant decrease in risk for breast cancer recurrence compared with patients who received the same chemotherapy without trastuzumab. The International Breast Cancer Trial

Group study XVIII showed that a newer agent, Letrozole, improved cure rates in women with early breast cancer compared to those taking standard Tamoxifen.

We also participated in the MOSAIC study, which randomised patients with stage II/III colon cancer to receive 5FU and folinic acid with or without oxaliplatin, a new chemotherapeutic agent. Over 2,000 patients were entered into the study world wide. The group with the newer agent had a significantly improved disease-free survival.

The MinT study, which was also carried out at Cabrini Hospital, showed that the addition of a monoclonal antibody, rituximab (Mabthera®), to standard chemotherapy, significantly improved cure rates in Non-Hodgkin's Lymphoma.

Current Clinical Protocols

1. A phase 3 randomised open-label multicentre study of Inirotecan and Cetuximab vs Irinotecan as second line treatment in patients with metastatic EGFR positive colorectal carcinoma.
2. A Phase III Randomized Trial Of Paclitaxel And Carboplatin Versus Triplet Or Sequential Doublet Combinations In Patients With Epithelial Ovarian Or Primary Peritoneal Carcinoma (GOG-182)
3. An expanded access program of Tarceva™ (erlotinib) in patients with advanced stage IIIB/ IV non-small cell lung cancer (NSCLC).
4. Family communication of genetic information to promote health and prevent cancer
5. A Randomised Double-Blinded Phase III Study Assessing the Benefits of Amino acid Supplementation in Patients receiving Chemotherapy for Cancer
6. A randomised, three arm multinational phase III study to investigate Bevacizumab (q3w or q2w) in combination with either intermittent Capecitabine plus Oxaliplatin ("XELOX") (q3w) or fluorouracil/ leucovorin with Oxaliplatin ("FOLFOX-4") versus "FOLFOX-4" regimen alone as adjuvant chemotherapy in colon carcinoma

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7. Phase III Randomized, Placebo Controlled Study of Sorafenib in Repeated Cycles of 21 Days in Combination with Paclitaxel/Carboplatin Chemotherapy in Subjects with Unresectable Stage III or Stage IV Melanoma
8. Randomised study of ICE plus rituximab (R-ICE) versus DHAP plus rituximab (R-DHAP) in previously treated patients with CD-20 positive diffuse large B-cell lymphoma, eligible for high-dose chemotherapy and transplantation followed by randomised maintenance treatment with rituximab
9. A phase III randomised study of Cetuximab (Erbix™, C255) and best supportive care versus best supportive care in patients with pretreated metastatic epidermal growth factor receptor (EGFR)-positive colorectal carcinoma (NCIC CO-17)
10. A phase III study to evaluate Letrozole as adjuvant endocrine therapy for post-menopausal women with receptor (ER and/or PR) positive tumours
11. An Open-label, Randomised, Phase 3 Clinical Trial of ABX-EGF Plus Best Supportive Care in Subjects with Metastatic Colorectal Cancer
12. A Multicentre Open-label Single Arm Clinical Trial to Determine the Safety of ABX-EGF Extended Therapy in Subjects with Metastatic Colorectal Cancer
13. A Multicentre Phase III Randomised Trial comparing Docetaxel in combination with Doxorubicin and Cyclophosphamide (TAC) versus Doxorubicin and Cyclophosphamide followed by Docetaxel (AC→T) as Adjuvant Treatment of Operable Breast Cancer Her2neu Negative Patients with Positive Axillary Nodes (BCIRG 005)
14. A multicentre phase III randomised trial comparing doxorubicin and cyclophosphamide followed by docetaxel (AC→T) with doxorubicin and cyclophosphamide followed by docetaxel and trastuzumab (AC→TH) and with docetaxel, platinum salt and trastuzumab (TCH) in the adjuvant treatment of node and high risk node negative patients with operable breast cancer containing the Her2neu alteration (BCIRG 006).
15. A Randomised, Multicentre, Double-Blind, Placebo-Controlled, 2-Arm, Phase III Study of Oral GW572016 in Combination with Paclitaxel in Patients Previously Untreated for Advanced or Metastatic Breast Cancer
16. A 2x2 Factorial Randomized Phase III Study of Intermittent Oral Capecitabine in Combination with Intravenous Oxaliplatin (Q3W) ("XELOX") with/without Intravenous Bevacizumab (Q3W) versus Bolus and Continuous Infusion Fluorouracil/Intravenous Leucovorin with Intravenous Oxaliplatin (Q2W) ("FOLFOX4") with/without Intravenous Bevacizumab (Q2W) as First-line Treatment for Patients with Metastatic Colorectal Cancer

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Melbourne Gastrointestinal Investigation Unit

Primary Researchers: Dr Henry Debinski and Dr Chip Farmer

Melbourne Gastrointestinal Investigation Unit was established at Cabrini seven years ago. The Unit is led by Dr Henry Debinski and Mr Chip Farmer, and provides clinical physiological testing in Gastroenterology and is a platform for research into gastrointestinal disorders. It provides a suite of investigation techniques including manometry, breath tests for malabsorption and dietary intolerance, capsule endoscopy to evaluate obscure gastrointestinal bleeding and treatment clinics for inflammatory bowel disease and hepatitis C.

Current research projects include:

- A prospective study on the treatment of gastro-oesophageal reflux disease with endoscopic implantation of Enteryx
- Two randomised double-blind placebo controlled studies in treatment of irritable bowel syndrome – one trialling the use of a pro-biotic and one testing the use of Talnetant
- Three genetics studies in cancer; two looking at Melbourne's Ashkenazi Jewish population, and another reviewing in-patients with colorectal cancer
- Studies in the use of capsule endoscopy in small bowel Crohn's disease
- Two studies in treatment of faecal incontinence – one trialling the use of Ethylene Vinyl Alcohol injection therapy and also a randomised placebo controlled trial of the use of electrostimulation
- Ongoing studies in the staging of rectal cancer

Dr Henry Debinski presented papers on capsule endoscopy to the American Gastroenterological Society and the World Congress of Gastroenterology, and was part of the invited faculty in the 3rd Annual Australasian Course on Capsule Endoscopy. Mr Chip Farmer also presented internationally on the use of Ethylene Vinyl Alcohol in the management of faecal incontinence to The American Society of Colorectal Surgeons annual meeting and at the Colorectal Tripartite meeting in Dublin.



Mr Peter Rose and Dr Henry Debinski

Cabrini Health Education Department

Education and Staff Development Manager: Tony McGillion

The Cabrini Health Education Department provides a multi-campus corporate service, which is strategically aligned with the Cabrini Health mission and values. The Education Department plays a pivotal role in the promotion of an organisational culture that both embraces personal and professional growth, plus fosters effective, collaborative relationships.

Program planning and development has recognised the increasing complexity of care required in the contemporary health care setting, and this complexity is inextricably linked with the extended skills required to care effectively for our ageing patient population.

Collaborative relationships with internal and external academic partners provide a rich framework of professional development opportunities for all Cabrini Health staff. The Education delivery is custom-designed to provide programs that assist staff in care delivery across the gamut of healthcare contexts, from patient 'entry' to 'exit' and beyond. Interwoven into this matrix of opportunities are activities designed to enhance the support of our valuable human resources.

Educators are able to facilitate the learning 'culture' due to an inherently diverse sphere of influence, which contributes to the enrichment process of staff through involvement in key organisational working parties and committees, both internally and externally.

The Education Department will continue to exhibit commitment to the linking of evidence-based practice to the contemporary health care setting, with a strong emphasis on care of the *ageing population* and *risk reduction strategies*. The vehicle for the transportation of these ideals will remain a combination of initiatives, including formal programs in association with academic partners, traineeship authorities, written self-directed learning packages, short courses and workshops. In addition to facilitation of programs, the department also provides both reactive and proactive support to individual Cabrini Health units/departments, to assist them in the development of strategies and frameworks to meet their emerging clinical and non-clinical needs.



The education team: Helen Chadwick, Fiona Barker, Judy Maloney, Aidan Mulcahy, Cate Rosewarne, Ruth Knight, Tony McGillion, Emma Matthew



Mr Tony McGillion

Research Day Prize and Grant Winners

Annually we award scholarships and grants to support research and education funded by the Institute and by private donors. *These people are our 2004-2005 recipients:*



Yvette Gomez, Helen Chadwick, Peter Bennett, Rachel Fraser, Claire Carroll, Duncan Thorn, Annie Forrest, Mary Sylvester and Louise Alexander

Louise Alexander

Jean St Leger Study/Travel Grant

Peter Bennett

John Allison Monkhouse Scholarship

Claire Carroll

Betty Elliott Scholarship

Helen Chadwick

Postgraduate Scholarship

Annie Forrest

Postgraduate Scholarship

Rachel Fraser

Peter Meese Oncology Grant

Denise Hammill

Cardiac Conference Fund Grant

AnneMarie Hardy

Cardiac Conference Fund Grant

Joshua Sher

Cardiac Conference Fund Grant

Mary Sylvester

Postgraduate Scholarship

Duncan Thorn

Postgraduate Scholarship

Deborah White

Cardiac Conference Fund Grant



Dr Peter Lowthian and Ms Rachel Fraser, winner of the Peter Meese Oncology Grant

Cabrini Human Research Ethics Committee

This year the Cabrini Human Research Ethics Committee approved 61 projects. A list of the studies approved appears earlier in this document. It shows the range of clinical areas of research currently being pursued by Cabrini researchers.

The Committee has reviewed studies for an increased number of researchers who operate within our local community (but not within the hospital) and who are not served by any other HREC. The Committee has enjoyed the challenges of looking into different areas of clinical research.

A highlight of the year was our twilight seminar during Ethics Week entitled "Who Profits from Research?" The question was examined from the perspectives of the researchers; the drug companies; the patients; society and medical knowledge. The panellists were Dr Tilman Ruff; Dr Ken Harvey; Dr Christine Beanland and Professor Colin Thomson. The panel was ably chaired by Mr David Curtain, QC.

Dr Kay Leeton and Ms Robin Riley resigned from the CHREC at the end of 2004 after many years of dedicated service. We have welcomed new members: Dr Roderick McRae; Dr Michael Ben-Meir; Dr Edwina Montgomery and Mr Jack Parrington.



Dr Christine Beanland; Dr Tilman Ruff; Mr David Curtain, QC and Dr Ken Harvey after the CHREC's 2005 Twilight Seminar

CHREC Members

Dr Michael Ben-Meir	Medical Graduate with Research Experience
Mr Ben Burke	Lawyer
Dr Henry Debinski	Medical Graduate with Research Experience
Rev Dr Norman Ford SDB	Minister of Religion
Prof Sandra Legg	Nursing Graduate with Clinical/Research Experience
A/Prof Doug Lording	Chairperson, Medical Graduate with Research Experience
Mrs Kerry McGeorge Hodges	Lay Person – Female
Dr Roderick McRae	Medical Graduate with Research Experience
Dr Edwina Montgomery	Medical Graduate with Research Experience
Mr Paul Mullaly	Member of the Governing Board
Mr Jack Parrington	Nursing Graduate with Clinical/Research Experience
Mr Glenn Staunton	Lay Person – Male
A/Prof Stan van Hooft	Member with Clinical/Research Experience

Cabrini Human Research Ethics Committee

Research Approved

Arthritis

A multinational, multicentre, randomised, double-blind, double-dummy, stratified, active controlled parallel group study comparing the efficacy and safety of intravenous zoledronic acid, 5mg once yearly, and oral risedronate, 5mg daily, in the prevention of corticosteroid induced osteoporosis.

A/Prof Stephen Hall

A phase 3 multi-centre randomised double-blind placebo-controlled comparative study of Abatacept or Infliximab in combination with Methotrexate in controlling disease activity in subjects with rheumatoid arthritis having an inadequate clinical response to Methotrexate.

A/Prof Stephen Hall

A multicentre, randomised, parallel-group, active-controlled double blind study conducted under in-house conditions to determine the incidence of gastroduodenal ulcers in patients with osteoarthritis or rheumatoid arthritis after 12 weeks of treatment with L-001069957 21mg plus low-dose aspirin, L-001069957 42mg plus low-dose aspirin, Celecoxib 400mg plus low-dose aspirin, or low-dose aspirin alone.

A/Prof Stephen Hall

Development of a diagnostic assay for detection of Rheumatoid Arthritis

Dr Wayne Jensen

A 24-month randomised double-blind two period study to evaluate the efficacy and safety of the combination of etanercept and methotrexate and methotrexate alone in subjects with active early rheumatoid arthritis: combination of methotrexate and etanercept in active early rheumatoid arthritis.

A/Professor Stephen Hall

Double blind triple dummy parallel-group randomised six month study to compare celecoxib (200mg BID) with diclofenac (75mg BID) plus omeprazole (20mg QD) for gastrointestinal events in subjects with osteoarthritis and rheumatoid arthritis at high risk of gastrointestinal adverse events.

A/Professor Stephen Hall

A randomised double blind parallel group study of the safety and prevention of structural joint damage during treatment with MRA versus placebo in combination with Methotrexate in patients with moderate to severe active rheumatoid arthritis.

A/Prof Stephen Hall

A phase 3 multicentre double-blind, placebo-controlled parallel group 52 week study to assess the efficacy and safety of 2 dose regimens of lyophilised CDP870 given subcutaneously as additional medication to methotrexate in the treatment of signs and symptoms and preventing structural damage in patients with active rheumatoid arthritis who have an incomplete response to methotrexate.

A/Prof Stephen Hall

A phase 3, 12 week multicentre double-blind double-dummy randomised placebo and active comparator controlled parallel group study to investigate the efficacy and safety of GW406381 1mg, 5mg, 10mg, 25mg, and 50mg administered orally once daily, in adults with osteoarthritis of the knee.

A/Prof Stephen Hall

A multi-centre open label parallel group phase 2a clinical trial to assess the efficacy and safety of Cpn10 administered as multiple (twice weekly) intravenous injections in subjects with Rheumatoid Arthritis.

A/Prof Stephen Hall

A randomised double-blind placebo-controlled parallel group study of the safety and reduction of signs and symptoms during treatment with MRA versus placebo in combination with methotrexate in patients with moderate to severe active rheumatoid arthritis and an inadequate response to previous anti-TNF therapy.

A/Prof Stephen Hall

A phase 3 multicentre open-label follow-on study to CDP870-027 to assess the efficacy and safety of lyophilised CDP870 an engineered human anti-TNF PEG conjugate dosed subcutaneously at 400mg every two weeks as additional medication to methotrexate in the treatment of signs and symptoms and preventing structural damage in patients with active rheumatoid arthritis.

Extension study to 02-31-01-05

A/Prof Stephen Hall

Asthma

Efficiency and safety of Symbicort Turbuhaler 160/4.5mcg/inhalation, two inhalations twice daily plus as-needed compared with Seretide Diskus 50/500 mcg/inhalation, one inhalation twice daily plus terbutaline Turbuhaler 0.4mcg/inhalation as needed – a 6 month, randomised double-blind parallel group active controlled multinational phase 3B study in adult and adolescent patients with persistent asthma (AHEAD).

Dr Allan Garfield

Auto-Immune Disease

A phase 2b multi-centre randomised double-blind placebo controlled study to evaluate the efficacy and safety of Abatacept vs placebo on a background of oral glucocorticosteroids in the treatment of subjects with systemic Lupus Erythematosus.

A/Prof Stephen Hall

Cabrini Human Research Ethics Committee

Research Approved

Cancer

Collection of tissue samples in excess of diagnostic requirements from Cabrini Medical Centre operating suites by the Peter MacCallum Cancer Centre Tissue Bank.

A/Prof Ian Campbell

The MSI in Colorectal Cancer (MIC) Study
Dr Bev Warner

A randomised three arm multinational phase 3 study to investigate Bevacizumab (q3w or q2w) in combination with either intermittent Capecitabine plus Oxaliplatin (Xelox) (q3w) or fluorouracil/leucovorin with Oxaliplatin (Folfox – 4) versus Folfox-4 regimen alone as adjuvant chemotherapy in colon carcinoma.

Dr Jeremy Shapiro

A phase 3 randomised open-label multicentre study of Inirotecan and Cetuximab vs Irinotecan as second line treatment in patients with metastatic EGFR positive colorectal carcinoma.

A/Prof Gary Richardson

Victorian Prostate Cancer Tissue Bank
Mr Mark Frydenberg

Phase 3 randomised placebo controlled study of Sorafenib in repeated cycles on 21 days in combination with Paclitaxel/ Carboplatin chemotherapy in subjects with unresectable stage 3 or stage 4 Melanoma.

Dr Benjamin Brady

Complementary medicines

Complementary medicines use in surgical patients.

Prof Marc Cohen

Dermatology

A multi-centre open label parallel group phase 2a clinical trial to assess the efficacy and safety of Cpn10 administered as multiple (twice weekly) intravenous injections in subjects with Psoriasis.

Dr Chris McCormack

Diabetes

A double blind multicentre study to assess the LDL-C lowering of combination tablets Ezetimibe/Simvastatin (10mg.20mg) and Ezetimibe/Simvastatin (10mg/40mg) compared to Atorvastatin 20mg in patients with Type 2 Diabetes

Dr Andrew Lang

An open label multicentre and long-term extension study to evaluate the safety and tolerability of Tesaglitazar 1mg in patients with type 2 Diabetes Mellitus.

Extension to 04-07-06-04

Dr Andrew Lang

Gastroenterology

An eight week randomised double-blind placebo-controlled dose-ranging study to evaluate the efficacy and safety of Talnetant in subjects with Irritable Bowel Syndrome.

Dr Henry Debinski

Evaluation of capsule endoscopy in patients with suspected small bowel Crohn's Disease.

Dr Henry Debinski

Infection Control

Healthcare-associated infections: an in-depth review of associated factors and patient sequelae.

A/Prof Anne Gardner

Medical Imaging

Evaluation of Endorectal Magnetic Resonance Imaging and Spectroscopy in Detecting Prostate Cancer after Negative Biopsy.

Dr Alain Lavoipierre

Men's Health

A randomised double-blind, parallel-design, placebo-controlled study to evaluate the efficacy and safety of Tadalafil (2.5mg and 5mg) administered once daily to men with diabetes mellitus and erectile dysfunction.

A/Prof D W Lording

A pilot, randomised, double-blind, placebo-controlled, crossover study evaluating the efficacy and safety of Vardenafil versus placebo administered 12, 18 and 24 hours prior to initiation of sexual intercourse in subjects with erectile dysfunction.

A/Prof D W Lording

A double blind placebo controlled parallel group multicenter study to assess the duration of action, safety and toleration of differing doses and combinations of immediate and modified release formulations of UK-369,003 and Cialis compared to placebo in adult male subjects.

A/Prof D W Lording

A phase 2 multi centre double blind placebo controlled flexible dose study to assess the efficacy and safety of oral UK-390,957 in men with premature ejaculation.

A/Prof D W Lording

A phase 2 multi centre open label long term extension trial to assess the safety and sustained efficacy of oral UK-390-957 administered as required in adult men with premature ejaculation.

A/Prof D W Lording

An open label non comparative study to evaluate treatment responsiveness to the Quality of Erection Questionnaire (QEQ) in men with erectile dysfunction treated with Viagra (Sildenafil Citrate).

A/Prof Doug Lording

A placebo-controlled double-blind randomised parallel-group study of the efficacy and safety of Dapoxetine in the treatment of men with premature ejaculation.

A/Prof D W Lording

Cabrini Human Research Ethics Committee

Research Approved

Nursing

Evaluation of a falls risk assessment tool across three settings: palliative care, oncology and general medicine.

Prof Beverly O'Connell

Nursing care needs of older people in acute settings: A retrospective comparative study.

Prof Beverly O'Connell

Convalescing from ophthalmic day surgery: An exploration of the issues.

Prof Beverly O'Connell

Obesity

A prospective, randomised, open-label, blinded end-point, forced-titration trial to compare MICARDISR Plus/MicardisR HCT (telmisartan combined with hydrochlorothiazide 80mg/12.5mg) to DIOVAN HCTR (valsartan combined with hydrochlorothiazide 160mg/12.5mg), for the control of mild-to-moderate hypertension in overweight and obese patients with type-2 diabetes mellitus using ambulatory blood pressure monitoring.

Dr Andrew Lang

AOD9604 mechanism of action – analysis of discarded human abdominal adipose tissue 2005.

Dr Graeme Southwick

Pain Management

A randomised, double-blind placebo controlled, parallel group, response-adaptive, dose-range study to evaluate the safety and efficacy of GW353162 extended release tablets (20, 40 and 60mg) administered once daily for 8 weeks in adults with postherpetic neuralgia (Protocol OHB 100020)

A/Prof Stephen Hall

A multicentre randomised double-blind placebo-controlled parallel group study to evaluate the safety and efficacy of Lamotrigine 200-400mg/day compared with placebo in subjects with painful diabetic neuropathy.

Dr Owen White

A phase 3 1-year safety consisting of a 7-week open label period, followed by a 45-week double-blind, randomised period designed to evaluate the safety and tolerability of duloxetine 60mg and 120mg once daily (QD for patients diagnosed with fibromyalgia syndrome (FMS)

A/Prof Stephen Hall

Patient Information

Applying education theory to informed consent process using a web based multimedia application – pilot study

Dr Damian Claydon-Platt

Psychiatry

Olanzapine plus Carbamazepine versus Carbamazepine alone in the treatment of manic or mixed episodes associated with bipolar 1 disorder.

Dr Peter Farnbach

A multi-centre randomised double-blind parallel-group placebo- and active- controlled flexible dose study evaluating the efficacy safety and tolerability of extended-release Bupropion Hydrochloride (150mg – 300mg once daily) extended-release Venlafaxine Hydrochloride (75mg – 150mg once daily) and placebo in subjects with major depressive disorder.

Dr Peter Farnbach

A multi-centre randomised double-blind parallel-group placebo-controlled flexible dose study evaluating the efficacy safety and tolerability of extended-release Bupropion Hydrochloride (150mg – 300mg once daily) in elderly subjects with major depressive disorder.

Dr Peter Farnbach

An international multicentre double-blind randomised parallel group placebo-controlled, phase 3 study of the efficacy and safety of Quetiapine Fumerate (SeroquelTM, single oral 300mg or 600mg dose) and Paroxetine as monotherapy in adult patients with Bipolar Depression for 8 weeks and Quetiapine in continuation treatment for 26 up to 52 weeks.

Dr Peter Farnbach

A comparison of Duloxetine Hydrochloride, Venlafaxine extended release and placebo in the treatment of generalised Anxiety Disorder

Dr Natalie Krapivensky

A phase 3 randomised placebo-controlled double-blinded trial evaluating the safety and efficacy of Asenapine in subjects continuing Lithium or Valproic Acid/Divalproex Sodium for the treatment of an acute manic or mixed episode.

Dr Rodney Farnbach

Surgery

Does the use of nizatidine as a prokinetic agent improve gastric emptying in patients post oesophagectomy?

Dr Corinne Ooi

A phase 3 randomised parallel-group double-blind active controlled study to investigate the efficacy and safety of two different dose regimens of orally administered dabigatran etexilate capsules [150 or 220mg once daily starting with a half dose (i.e. 75 of 110 mg) on the day of surgery] compared to subcutaneous enoxaparin 40mg once daily for 8+/-2 days in prevention of venous thromboembolism in patients with primary elective total knee replacement surgery.

A/Prof Miles Prince

A phase 3 randomised parallel group double-blind active controlled study to investigate the efficacy and safety of two different dose regimens of orally administered dabigatran etexilate capsules [150 or 220mg once daily starting with a half dose (i.e. 75 of 110 mg) on the day of surgery] compared to subcutaneous enoxaparin 40mg once daily for 28-35 days, in prevention of venous thromboembolism in patients with primary elective total hip replacement surgery.

A/Prof Miles Prince

Examination of the human gastrointestinal tract using the flexible confocal endomicroscope.

Prof Adrian Polglase

Men's Health

Executive Officer – Libby Crosthwaite

The Tony Hitchin Foundation has evolved within the structure of the Institute over the last 15 months. This period has afforded the Foundation time to review its aims and redefine its mission in moving forward.

Cause-related marketing is becoming increasingly complicated. To ensure a point of difference in this area, the Foundation reviewed a number of its objectives. The Foundation will be re-launching later in the year under the banner of *Foundation 49* with our aim being to promote health awareness in men. The significance of 49 draws attention to the issue that 49% of the population is male.

To tie in with this launch, our first project *Decades of Life* will have been completed and the clinical audit will be underway.

Decades of Life is a project aimed at developing a GP manual/checklist that will serve as a basis of a routine assessment for every male.

It is

- an evidenced based medical educational initiative
- a service manual for men for each Decade of Life
- a programme designed for up-skilling General Practitioners in regards to men's health issues.

In addition to this project we are mindful of the communication of the health message to the community. We have cemented a number of relationships this year, a key one being with the Rotary Club of Brighton who held a fundraising event 'The Crazy Seagull Race'. The event secured the Foundation \$100,000.

In addition to this amazing contribution The Rotary Club of Brighton also put aside a further \$25,000 to go towards a community health vehicle which we hope to have on the road next year as part of our community education programme.

Sport is an obvious tool for the Foundation to use to promote the health message to men. To this end, the AFL Players Association have agreed to endorse *Foundation 49*. This will manifest in a number of ways and we are excited about maximising this opportunity in 2006.

Whilst we have a lot to do it seems appropriate in defining the importance of our message to acknowledge the appropriateness of our purpose best supported by AMA President, Dr Bill Glasson who acknowledged this year



Associate Professor Gary Richardson, Ms Libby Crosthwaite and Dr David Grodski

"The poor state of men's health is a significant public health problem for Australia". The AMA Position Statement on men's health is its first and is a direct response to the fact that the overall health of Australian men is generally poorer when compared to Australian women, and getting worse.

In moving forward, *Foundation 49* together with its community partners looks forward to taking on the challenge of men's health by using education research and awareness as our tools to build change.



Mr Dick McKercher, Associate Professor Doug Lording, Mr Alan Hopgood AM, Mr Carlyle Ware

Tackling Bowel Cancer

On March 1st 2005 Tackling Bowel Cancer Foundation launched a bowel cancer awareness brochure at 370 Melbourne Metropolitan General Practices Clinics through Infomed. The brochure will run for 6-months and was composed to stimulate patients to discuss their individual risk factors of developing bowel cancer with their General Practitioner. The brochures are aimed at educating the community about bowel cancer and encouraging them to be proactive about their own bowel cancer risks. The Infomed service was chosen as it is designed to provide patients in GP waiting rooms with easy access and constant visual exposure to health information. A consulting company has been employed to coordinate this project and assist with the collation of data to determine the effectiveness of this initiative.

'Looking after your bottom line' - Our aim each year is to hold a charity function with a view to raising funds to support the Tackling Bowel Foundation and the work it does. This year we are organising a charity fund raising golf day for November 15th 2005, the "Cabrini Bottom Line Golf Classic" will be held at the exclusive Kingston Heath Golf Club.



Poster and television commercial



Bowel cancer kills. Don't die of embarrassment.TM Get tested now.
www.tacklingbowelcancer.com

Young Researchers



Lainie Wengier

– Monash Department of Clinical Epidemiology at Cabrini Hospital

I graduated from Monash University with a Masters in Biomedical Science in 2003. My thesis involved the study of neurotransmitter pathways affected in Parkinson's Disease. Upon completion, I felt that I was ready to move away from the lab bench and into a clinical research setting where I could see an immediate impact of my research findings. Consequently I joined the Monash Department of Clinical Epidemiology based at Cabrini Medical Centre, in March 2004 working as a Clinical Research Assistant for Associate Professor Rachelle Buchbinder.

Currently, my main role is to coordinate a multi-centre randomized placebo-controlled trial examining the efficacy and safety of a procedure called vertebroplasty that could potentially help people suffering from osteoporotic vertebral fractures. Coordinating the trial involves recruitment of participants, collecting data, as well as liaising and coordinating with specialists from all over Melbourne. Additionally, I work on the Australian Rheumatology Association Database (ARAD) which is a national registry of people with arthritis. This involves collecting clinical outcomes from participants and liaising with the different recruitment sites and the data management centre. I enjoy my work immensely on both these projects and it has given me the opportunity to build on my previous medical research experience, whilst giving me the opportunity to work with people and learn many new skills.



Stephen William Bell

- Cabrini Monash University Department of Surgery

The Fröhlich West Chair of Surgery

Stephen William Bell, 38, born and raised in Melbourne.

Undergraduate training was completed at Monash University and the Alfred Hospital, achieving MBBS in 1991. Surgical training was also undertaken at the Alfred Hospital and affiliated hospitals, becoming a Fellow of the Royal Australasian College of Surgeons in 2000. Specialist colorectal training was completed through the Australasian training program (becoming a provisional member of the CSSA), with a further year spent with Roland Parc at Hôpital Saint-Antoine, Paris. I am now in clinical practice as a Colorectal Surgeon, with public hospital appointments at the Alfred Hospital and Monash Medical Centre, and private practice at Cabrini Medical Centre. I have a strong association with the Cabrini Monash University Department of Surgery with numerous ongoing research projects.

My interest in research was generated through contact with several excellent academic clinicians throughout my training years. I have completed a number of clinical research projects, with the focus being on colorectal surgery since 2000. Publications have included: Anastomotic leakage after curative anterior resection results in a higher prevalence of local recurrence (*British Journal of Surgery* 2003;90(10):1261-1266), Primary rectus abdominis myocutaneous flap for repair of perineal and vaginal defects after extended abdominoperineal resection

Young Researchers

(British Journal of Surgery April 2005;92(4):482-486), and Ex-vivo sentinel lymph node mapping in colorectal cancer (Dis Colon Rectum 2004 Jan;48(1):74-79).

My current research projects include pathology reporting of colorectal cancer in Victoria. This project is being conducted in collaboration with The Cancer Council, Victoria, and is studying the completeness of clinical and pathological information reported in colorectal cancer. I am also completing an historical review of lymphatic mapping techniques, and the historical and modern understandings of rectal lymphatic drainage. There is a significant difference in clinical practice between Western and Japanese colorectal surgeons in the extent of pelvic lymphadenectomy in rectal cancer surgery. This paper provides a detailed description of the lymphatic drainage pathway, and explores the origins of these different philosophies.



Barbara Scher - Oncology Research Manager.
- Szalmuk Family Department of Medical Oncology

A Cabrini Monash University Initiative

Research has been a strong theme in both my postgraduate studies and career. I completed a BSc (Hons) MSc in Biochemistry at Monash University. My thesis involved insulin receptors. After graduation, I was employed by Centre of Early Human Development (now part of the Monash Institute of Medical Research) as a biochemist and was primarily employed to study male infertility. During this time, I was also actively involved in lecturing and demonstrating to students undertaking The Graduate Diploma/Master of Reproductive Sciences.

After 10 years of research in the laboratory and due to an allergy to my animals, a change in research direction was essential. I found a job where I would be able to use my research skill, scientific knowledge and interact with people – and was employed as a data manager in the department of Medical Oncology and Clinical Haematology at Monash Medical Centre. I became involved in all aspects of clinical research for both oncology and haematology for several investigators and was promoted to Oncology Research Manager after three years.

In April 2001, I was given the opportunity to establish a clinical trials office within the newly opened Department of Medical Oncology at Cabrini Health. Since inception, there have been over 25 clinical trials submitted to ethics. Over 200 patients have participated.

Currently oncology research is involved in several studies encompassing a variety of cancers ranging from tumours (ie colorectal, breast, NSCLC, melanoma and prostate) to haematology (lymphoma). I am excited by the future – new oncology drugs to try, new potential trial patients to meet, past and present patients to say hello to and to feel privileged to be involved in an amazing journey as they tackle cancer.



Fiona Ryan - Young Researcher
- Cabrini-Deakin Centre for Nursing Research

I graduated from Deakin University Melbourne in 2004 after completing a double degree comprising a Bachelor of Applied Science (Nursing) and a Bachelor of Applied Science (Psychology). I commenced my graduate year in 2004 at Cabrini Health as Registered Nurse on a urology/gynaecology ward for six months

Young Researchers

and a medical/gerontology ward for an additional six months. Whilst undertaking my graduate year I commenced my Nursing Honours thesis under the supervision of Professor Bev O'Connell and Associate Professor Anne Gardner. My thesis explores how day surgery patients convalesce at home post ophthalmic surgery. The data collection and entry phases of the study are now completed and I aim for successful submission of my thesis in October 2005.

Combining my graduate year and honours year was challenging but extremely rewarding. There are many skills that I developed during the course of completing my honours year that have enhanced my clinical knowledge on the ward. Moreover, I believe the honours year has significantly improved my understanding of evidence-based practice and the importance of its application in the nursing field.

I recently commenced work with the Cabrini-Deakin Centre for Nursing Research as a Research Assistant and am currently working on a health care associated infection study. I am also undertaking the Advanced Clinical Practice Course based at Cabrini Health. I enjoy dividing my time between research and as a nurse on a urology/gynaecology ward. I am astounded at the number of career options nursing and nursing research has to offer. I hope to undertake a PhD in nursing in the near future. I also plan to complete a degree in midwifery and maternal and child health.



Emma Cohen

- Cabrini - Deakin Nursing Research Centre

I graduated from Deakin University in 2003 with a Bachelor of Nursing (pre-registration) and a Bachelor of Applied Science (Health Promotion). During 2003, I completed my graduate year on the Oncology/Haematology ward at the Alfred Hospital whilst concurrently studying my Nursing Honours. I graduated with a first class Honours. My thesis explored the impact that patient beliefs and attitudes may have on the delivery of optimal pain relief in the cancer inpatient population. As a result of the research experience I gained during my honours year I had the opportunity to present at an international nursing conference in Sydney. To date, I have also submitted one article for publication and am currently working on another.

The analytical skills that I developed during my honours year have assisted me enormously as a clinician on the ward by enhancing my ability to critically examine current practices from a research perspective. My skills as a clinician have been further developed through attendance at a number of in-services, courses and workshops held at the Alfred.

Currently my time is divided between working as a research assistant on a range of projects at different stages of completion and further developing my skills and knowledge as a clinician. I enjoy having the opportunity to pursue my interests in research whilst maintaining a base on the ward. I am planning to commence my PhD next year and am currently preparing to apply for a scholarship.

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CABRINI CLINICAL EDUCATION AND RESEARCH INSTITUTE

Cabrini Health

183 Wattletree Road Malvern Victoria 3144 Australia

Telephone +613 9508 1375

Facsimile: +613 9508 1368

Email: institute@cabrini.com.au