

St Vincent's Clinic Foundation

Supporting Excellence in Clinical Research







May 2011

Welcome to our 2011 edition of the St Vincent's Clinic Foundation newsletter. This is an opportunity for us to highlight some of the wonderful and innovative research and education activities that are being supported by the Foundation.

The 2012 St Vincent's Clinic Foundation Grants application round is now open and it is anticipated that the applications will again be of a high quality. The Trustees are very pleased to announce that the staff of St Joseph's Hospital and St Joseph's Village (both part of the St Vincents & Mater Health family) will be able to apply for funding under the Multidisciplinary Grants. St Joseph's Hospital provides specialist services to both inpatients and outpatients in the areas of rehabilitation, palliative care, aged care and aged care psychiatry. St Joseph's Village (collocated with St Joseph's Hospital) provides excellent aged care services including 27 self care apartments, 88 low care beds including an 18 bed dementia specific unit and the ability to provide high care to the residents. These services are all multidisciplinary and we are anticipating some exciting research applications.

The Trustees are also pleased to have been able to increase the total of funding available in 2012 up to \$819,000 with 13 research grants, 5 multidisciplinary research grants, a travelling scholarship, support for nursing and allied health staff presenting research papers and the excellence awards for clinical researchers.

The Trustees of St Vincent's Clinic Foundation believe that the contribution that research makes to the reputation of the St Vincent's, and now St Joseph's Campuses is significant and that support for research is essential in developing excellence in evidence-based care.

The Foundation relies on the generosity of our donors and supporters. Thank you for supporting St Vincent's Clinic Foundation and playing a part in our search for better treatments and cures for those illnesses and diseases that touch so many in our society.

Yours sincerely

MR A E HARRIS AC

President

St Vincent's Clinic Foundation

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Your support is needed now to continue and to maximise research like this. Please support St Vincent's Clinic Foundation.

HOW YOU CAN PLAY YOU All donations are tax deductible and can be made in a number of ways. An annual donation of \$200 An annual donation/one off donation of \$ St Vincent's Clinic Foundation has also developed the opportunity for donors to nominate the Foundation in their Estate. Please call us for further information. Name:Address:	IR PART — ST VINCENT'S CLINIC FOUNDATION A cheque made payable to St Vincent's Clinic Foundation for the amount of \$200 or \$ Please debit my Credit Card. Nominate Card: Bankcard / Mastercard / Visa Name on Card: Expiry date: / Amount: Card number: / Amount: Signature: Please send to: St Vincent's Clinic Foundation, 438 Victoria Street Darlinghurst NSW 2010
Telephone:	If you are not already a Friend of St Vincents Clinic Foundation (no charge) and would love to become a Friend please tick the box. Friends will receive an invitation to the AGM, Foundation functions, copies of "Proceedings" and other material related to the Foundation. If you do not wish to receive this material, please tick the box.

ST VINCENT'S MICROSURGICAL SKILLS LABORATORY by Dr Nigel Biggs

The St Vincent's Clinic Foundation has very kindly provided funding to our microsurgical dissection skills laboratory. This laboratory was initially established by Dr John Tonkin and Professor Paul Fagan in 1989. This laboratory was set up to help teach anatomical and surgical dissection techniques initially for ear surgery and more recently for nasal and sinus surgery. The laboratory has been equiped with state of the art microscopes and endoscopes to enable courses to be run by members of the department in the fields of ear and nasal surgery. This laboratory is the largest of its kind in Australia and certainly leads the field in running courses for senior and junior ENT surgeons from interstate and overseas.

The funds provided by the Foundation have enabled further purchasing of microsurgical instruments for ear surgery, sinus surgery and two zoom adaptors to enable images from a camera mounted on microscopes to be transmitted to monitors throughout the laboratory. A sinonasal training model was also purchased to enable young trainee surgeons to practice surgical techniques.



Mr AE Harris AC and Dr Nigel Biggs

THE 2011 ST VINCENT'S CLINIC FOUNDATION RESEARCH GRANT RECIPIENTS

The Ladies' Committee Sr Mary Bernice Research Grant Dr David Brown "Macrophage inhibitory cytokine-1: a potential screening test for colonic polyps"	\$100,000
Adult Stem Cell Research Grant Prof Bruce Brew "The kynurenine pathway modulates remyelination in multiple sclerosis"	\$100,000
K&A Collins Cancer Research Grant A/Prof Phillip Stricker "Quality of life outcomes in patients undergoing contemporary techniques for the treatment of localised prostate cancer: A prospective study"	\$50,000
Tancred Trust Research Grant A/Prof Diane Fatkin "Zebrafish models of atrial fibrillation"	\$50,000
Di Boyd Cancer Research Grant A/Prof Anthony Dodds "Novel oncogenic role of miR-10a in acute myeloid leukaemia with mutated Nucleophosm	\$30,000 nin-1"
Froulop Research Grant Prof Peter Macdonald "Further improvement of survival kinase related recovery of donor heart function after bypothermic storage by simultaneous inhibition of endogenous phosphatases"	\$30,000
Annual Grant 1 Prof David Ma "Use of induced pluripotent stem cells from human Trisomy 21 skin fibroblasts to identify defective genes leading to childhood leukaemia"	\$50,000
Annual Grant 2 Prof Andrew Carr "Antigen-specific T-cell immune responses in men with anal squamous intraepithelial lesion due to high-risk human papillomavirus infection – correlation with disease progression a	
Annual Grant 3 Dr Gail Matthews "Fibroscan in HIV monoinfection (FILM) study"	\$30,000
Annual Grant 4 Dr Joanne Joseph "Investigation of platelet-derived microparticles in patients receiving antiplatelet therapy"	\$30,000
Annual Grant 5 A/Prof Eugene Kotlyar "Clinical features, prognosis and outcomes of Cardiac Amyloidosis"	\$30,000
Annual Grant 6 A/Prof Debbie Marriott "Candidaemia in Malaysian tertiary care institutions: A pilot study"	\$30,000
Annual Grant 7 Dr Jerry Greenfield "Is MC4R deficiency associated with alterations in sympathetic nervous system and brown adipose tissue activity in humans?"	\$30,000

Equipment for Training/Education Grant Dr Nigel Biggs "Endoscopic and equipment upgrade to the St Vincent's Microsurgical Skills Lab"	\$30,000
Travelling Fellowship 1 Dr Adam J Bryant (Department of Haematology) "The Leukaemia/Bone Marrow Transplant Fellowship – Vancouver, Canada"	\$10,000
Travelling Fellowship 2 Dr James Otton (Department of Cardiology) "Cardiac MRI Clinical Fellowship – St Thomas Hospital, London, UK"	\$10,000
Multidisciplinary Patient Focused Research Grant 1 Ms Christine Button "Improving the care of the elderly through an oral health education program for nursing staff"	\$25,000
Multidisciplinary Patient Focussed Grant 2 Prof Sandy Middleton "Improving hand hygiene practice: Identifying behavioural, attitudinal and organisational factors using an error typology framework"	\$25,000
Multidisciplinary Patient Focussed Grant 3 Prof Kim Walker "Improving venous thromboembolism (VTE) prophylaxis in medical patients using educational outreach visits. Peer on peer education (PoPE) for better VTE prophylaxis: The PoPE study"	\$25,000
Multidisciplinary Patient Focussed Grant 4 Prof Jane Phillips "Decreasing palliative care patients' reports of pain and increasing nurses' complex pain management capabilities: Exploring the potential of 'spaced education' in the specialist palliative care setting"	\$25,000

IMPROVING THE CARE OF THE ELDERLY THROUGH AN ORAL HEALTH EDUCATION PROGRAM FOR NURSING STAFF by Christine Button & Louisa Lunn

Australia's population is ageing. An ageing population equates to increased demands on health care services in Australia and the elderly often present to our acute wards with multiple issues requiring multidisciplinary management. Their frailty can make them much more susceptible to illness and as such it is important that preventative measures are implemented that aim to improve health outcomes of our most vulnerable patients. Nursing staff are often at the frontline when it comes to delivering inpatient care and as such ongoing education is vital in maintaining their expertise, particularly with regards to measures which are essential in preventing further illness.

Oral care has been shown to prevent aspiration pneumonia in the elderly. Nursing staff are responsible for providing oral care and therefore require updated education with regards to the management of oral health, thereby facilitating positive health outcomes for

their patients. In 2011 the St Vincent's Clinic Foundation is funding a pilot study for the Geriatric and Medical Assessment Units at St Vincent's Hospital which will examine the effectiveness of nursing staff education on the oral health of patients.

The study will compare the effectiveness of oral health screening scores on a standardised tool of patients admitted by geriatricians to determine whether there is an improvement in oral health post nursing staff education. It is anticipated that this education will be modified into an e-learning tool to facilitate the education of nursing staff hospital wide in the future. The project has already been accepted as a poster presentation at the 2011 Speech Pathology National Conference in Darwin in June.

The research will be a new initiative nationwide and recognises that with an ageing population the focus in health care needs to be on preventative measures

that will protect the older members of our society from further illness. The project team consists of Christine Button who is the Senior Speech Pathologist in Aged Care and Orthopaedics at St Vincent's Hospital and Louisa Lunn who is the Health Education Officer in Oral Health also at St Vincent's Hospital. The project has the support of the Speech Pathology Department, Community Health and the Aged Care Team.



Christine Button and Louisa Lunn

2010 EXCELLENCE AWARDS FOR CLINICAL RESEARCHERS

Emerging Researcher

\$1,500

Mr Jed Duff

Clinical Research Fellow, Nursing Research Institute, St Vincent's Private Hospital

Nursing

\$1,500

Mr Leon Botes Registered Nurse – After Hours NPEP, IBAC/CAMR, St Vincent's Hospital

Scientist

\$1,500

Dr Joyce Low Senior Scientist, SydPath, St Vincent's Hospital

Allied Health

\$1.500

Ms Jodie Butler Clinical Psychologist, St Vincent's Hospital

Medical

\$1,500

Dr Adam Bryant Medical Registrar, Haematology, St Vincent's Hospital

Highly Commended Certificates:

Ms Matra Robertson Social Worker, Palliative Care Unit, St Vincent's Hospital

Ms Serena Knowles Clinical Nurse Specialist, Nursing Research Institute, St Vincent's Hospital

K+A COLLINS CANCER RESEARCH GRANT – QUALITY OF LIFE OUTCOME IN PATIENTS UNDERGOING CONTEMPORARY TECHNIQUES FOR THE TREATMENT OF LOCALISED PROSTATE CANCER: A PROSPECTIVE STUDY by Jayne Matthews

The 2011 K & A Collins Cancer Grant has been awarded to A/Prof Phillip Stricker and his team for their work on Quality of Life following prostate cancer treatment. The primary objective of this study is to assess how the contemporary treatment modalities currently offered for localised prostate cancer in a high volume tertiary referral centre affect the patient's Health Related Quality of Life (HRQoL) and how this affects the overall satisfaction of the patient with their treatment.

The concept of HRQoL is a multifaceted prospective one that includes physical, psychological, social and functional wellbeing. It is increasingly evident that satisfaction with treatment is not solely determined by oncological outcome. Through analysis of the physical symptoms and psychosocial aspects of men undergoing treatments for prostate cancer, we aim to gain a broader insight into how they affect patients' quality of life and thus enable patients to make more personally tailored & informed treatment decisions.

St Vincent's Hospital is a high volume tertiary referral centre. It represents one of the few in Australia that offers all of the treatment modalities. This is of particular importance, as recent studies are showing that treatment for prostate cancer in high volume centres is associated with improved patient outcomes. In collaboration with the Garvan Institute of Medical Research, our institution has built the largest clinically annotated prostate tissue bank in the world; currently it holds data on 9,500 prostate cases treated on one campus between 1986 and 2009. St Vincent's is thus uniquely positioned to examine current best practice for prostate cancer in Australia.

THE 2010 SANDRA DAVID ORATION – PROF CLIFFORD HUGHES AO

At the annual event, hosted by the St Vincent's Clinic Foundation, Prof Hughes looked at quality in health and its relationship with belief, care and passion. A more rewarding workplace and a safer environment for patients will build confidence in healthcare according to Prof Clifford Hughes, Chief Executive Officer of the Clinical Excellence Commission, who presented at the 14th Sandra David Oration.

Attended by over 100 people, the oration was followed by the presentation of the 2010 excellence awards for clinical researchers and the announcement of the 2011 research and multidisciplinary grant recipients.

Michelle Wilson, Executive Director of St Vincent's Clinic explains, "The Trustees of the St Vincent's Clinic Foundation believe that the contribution that research makes to the reputation of the Darlinghurst campus is significant and that support for research is essential in developing excellence in evidence based clinical care — an area of expertise for the 14th Sandra David Oration."

For a copy of Prof Hughes Oration, please visit the St Vincent's Clinic website: http://www.clinic.stvincents.com.au/whats-happening/events or email clinic@stvincents.com.au to request a copy.



Prof Clifford Hughes AO

Story courtesy of Denise Coughlan

St Vincent's Clinic Foundation

INTERNATIONAL EXPOSURE – DR MARK WINDER 2010 TRAVELLING SCHOLARSHIP by Denise Coughlan



Already planning a Complex Spine Fellowship at the University of Calgary, Dr Mark Winder, Neurosurgeon at St Vincent's, heard of the St Vincent's Clinic Foundation Travelling Fellowship and decided to apply. Successful in his application, Dr Winder used the financial support to assist in undertaking a second fellowship — a Skull Base Fellowship at the Swedish Medical Centre, Seattle.

Wanting to continue the work of an already strong Neurosurgical Unit, Dr Winder explains, "In the past five years there has been a huge explosion of technological development which has allowed spinal surgery to become increasingly more minimally invasive. There is now an established progression towards minimally invasive day surgery of the spine which provides minimum morbidity. Such an approach was not really established in Australia."

Looking further afield, Dr Winder saw an opportunity to bring knowledge back to the campus. Working with a team of 13 spinal surgeons specialising in either neurosurgery or orthopaedic surgery, at the University of Calgary, Dr Winder immediately saw a different thought process and harmony between the two practices. Throughout the 12 month fellowship Dr Winder engaged in over 600 complex spine cases, utilising minimally invasive approaches where indicated.

Following the completion of the Spine Fellowship, Dr Winder completed a second Fellowship at the Swedish Medical Centre in Seattle, focusing on minimally invasive Skull Base Neurosurgery. He was able to utilise some of the newest technology available to neurosurgeons in the treatment of pituitaries, anterior and posterior skull base malignancies.

The result of Dr Winder's fellowships has been the establishment and utilisation of technology and techniques to help facilitate spine surgery to be performed as day surgery procedures, an Australian first. This progression has enabled St Vincent's to now offer lumbar discectomy, anterior cervical fusion and cervical foraminotomies as day surgical procedures. Benefiting both hospital and patient, the result is a reduced number of bed days, whilst the patient gains include minimal pain, blood loss and analgesic requirements and consequently a return to a normal way of life within days of surgery.

Upon returning to St Vincent's Dr Winder has maintained relationships with both the University of Calgary and the Swedish Centre Seattle. "There is now international collegiality and open forum where we can discuss the best management of patients," he explains.

Already, Dr Winder has sent films across to discuss the management of complex cases, aiming to offer patients access to some of the best surgical expertise available.

"As with any fellowship, the opportunity exposed me to travel, as much as it did to people and education. The fellowship undoubtedly improved me as a surgeon which in turn benefits the campus and I am grateful for the opportunity St Vincent's Clinic Foundation provided," concludes Dr Winder.

The St Vincent's Clinic Foundation provides up to \$10,000 each year for one of the medical or surgical departments on the St Vincent's campus to assist in funding a travelling scholarship. The financial support for a medical graduate working overseas to further their studies and skills, is in honour of deceased medical practitioners who worked at St Vincent's Clinic.

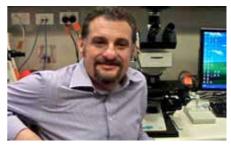
POTENTIAL SCREENING TEST FOR COLONIC POLYPS by Dr David Brown

The 2011 Ladies' Committee Sr Mary Bernice Research Grant has been awarded to Dr David Brown for his work on the detection of colonic polyps using serum macrophage inhibitory cytokine-1 (MIC-1) measurements. MIC-1 was discovered at St Vincent's Hospital and recent work suggests that a blood test for MIC-1 can detect people at high risk of colonic polyps, which ultimately lead to bowel cancer. Therefore the use of MIC-1 measurement holds the promise of greatly improving the detection of colon cancer and saving lives.

Colon cancer is one of the most common cancers and is potentially completely preventable if the pre-cancerous polyps are found and removed. However, the best method available, colonoscopy, is expensive and therefore its use is limited. The MIC-1 blood test could also help detect colon polyps and cancer that the current screening test misses because it is more sensitive. There is currently no other blood test that can find these polyps and prevent colon cancer.

Dr Brown, as part of Prof Samuel Breit's research program, has found that repeated serum measurement of MIC-1 in the blood after a single colonoscopy might be able to help find many more precancerous colon polyps. This finding, if confirmed by the research that this grant will allow, will mean that many more people will be able to have colon cancer prevented and go on to lead a normal life.

Dr Brown and his team are based in the St Vincent's Centre for Applied Medical Research in the Lowy Packer Building on the St Vincent's Campus.



Dr David Brown

A/PROF DEBBIE MARRIOT – CANDIDAEMIA IN MALAYSIAN TERTIARY CARE INSTITUTIONS: A PILOT STUDY

Candida species are yeast organisms which are members of the family of fungi. Candida are most familiar as the cause of thrush, either oral or genital. These superficial Candida infections are rarely life-threatening. However, if Candida species enter the blood stream, approximately 30% die because of the infection and 30% die from other causes.

Candida species in the blood stream is known as 'candidaemia'. As very little information existed on candidaemia in the Australian context, the Australian candidaemia study was developed to describe the epidemiology, aetiology, clinical features and outcome in Australian patients who develop candidaemia. All institutions in the public and private sector covering the total Australian population of 20.1 million were invited to participate between 1 August 2001 and 31 July 2004 with the aim of collecting data and Candida isolates from every case of candidaemia nationwide during the 3 year period. The Australian Candidaemia Study enrolled approximately 1,100 patients in 52 of the 54 public and private institutions in Australia and is the only nationwide study completed to date.

The enormous amount of data obtained from the Australian Candidaemia Study and the subsequent findings has had an important impact on clinical practice and care in Australia.



Examples of this include:

- 1 Knowledge of the local epidemiology of Candida species guides clinicians in the appropriate choice of antifungal prophylaxis or treatment.
- 2 Demographic data collected guides the choice of antifungal therapy within specific patient groups.
- 3 The importance of ancillary measures such as removal of the central line and routine ophthalmoscopy were highlighted.

The principal investigator of the Australian candidaemia study spent considerable time in Malaysia, both as a visiting lecturer and as a laboratory assessor for the National Association of Testing Authorities. As a result of these close contacts with Malaysia, a system of visiting fellows was established. During the last five years four Infectious Diseases Fellows spent a year in the Department of Clinical Microbiology and Infectious Diseases at St Vincent's Hospital.

During visits to Malaysia, extensive discussions with local clinicians and laboratory personnel confirmed that most laboratories in Malaysia do not speciate Candida isolated from blood; the organisms are either reported as Candida species or referred to a reference laboratory, with the results often taking weeks to return, by which time they are no longer clinically relevant. This impairs patient management and results in the overuse of expensive antifungal agents.

It is desirable that the beneficial outcomes of the Australian Candidaemia Study are shared, particularly with developing nations. Malaysia was selected as the country to begin to spread the knowledge gained as the problems of under-recognition of Candida exist and St Vincent's Hospital already has existing institutional links to enable the study to proceed.



A generous grant from St Vincent's Clinic Foundation has enabled a pilot study to commence. This was selected as the most appropriate way to demonstrate the benefits of collecting local Candida data. Initially it was envisaged that three major teaching institutions in Malaysia would participate. However at a preliminary meeting in November 2010 ten institutions expressed interest in the study. A further meeting will be held in early May at which time the study will commence.

The already close links between St Vincent's Hospital, the Department of Clinical Microbiology and Infectious Diseases and Malaysian medical practice in general will be significantly strengthened by the study and the presentations and publications which arise from it will highlight the significant philanthropic role of St Vincent's Hospital and St Vincent's Clinic in the international practice of medicine.

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