

MONTHLY BULLETIN FOR TQEH RESEARCH COMMUNITY WINNING NEWS www.basilhetzelinstitute.com.au

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Grant Successes for 2018

Happy New Year to all. And congratulations to BHI, TQEH researchers who have been awarded grants from NHMRC, ARC, Heart Foundation, Cancer Council, Arthritis Australia, THRF/The University of Adelaide and Pfizer. Summaries of some of these projects are included in this edition of the BHI Winning News.



FEBRUARY 2018 ISSUE 108

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BHI SEMINARS

Tuesdays 1pm Staff Seminars (begin in March)

Wednesdays 12pm Invited External Speaker Seminars (begin 4 April)

Thursdays at 1pm Postgraduate Student Seminars (begin 1 March)

UPCOMING EVENTS

BHI Off the Clock Thursday 22 February

Welcome Games Thursday 8 March

Induction Program Thursday 22 February Tuesday 6 March

BHI HUB

From the BHI Facility Manager Kathryn Hudson

BHI Ground Floor Phone ext: 27427 <u>kathryn.hudson@sa.gov.au</u>



Welcome back for 2018!

The BHI has started welcoming some of the new 2018 students, as well as new staff members. This edition of Winning News contains some information about new staff while the next edition will contain photos and information about our new PhD, Masters and Honours students. We will also be putting up "Welcome Posters" and student photos in strategic locations around the building, so please take the time to say hello and make them feel welcome! As always the BHI has a dynamic workforce and one of the aims of the Winning News is to keep you up to date with new researchers in The Institute.

With the arrival of new staff and students, it is timely for us all to remind ourselves of the BHI Code of Conduct. All BHI staff, students and visitors have a responsibility to abide by the Code of Conduct, and to lead by example. The BHI Code of Conduct was initially developed to assist in good management of The Institute, as there are over 15 different research groups and departments co-localised in an open plan building. Please see page 23 of this edition of Winning News for the full Code of Conduct.

From the BHI Communications Officer Rebecca Anderson

BHI Ground Floor Phone ext: 27345 <u>rebecca.anderson@adelaide.edu.au</u> Work days: 9-3pm Tuesday - Thursday



During January, professional photographer John Kruger came out to the BHI, TQEH on two occasions and took photos in the lab, of some of the research groups, and the large group photo seen on the cover of this edition. Thank you all for your help and cooperation during these photo shoots.

Newsworthy items for the BHI website, Facebook page and Winning News

Please consider this my 2018 plea for you to send me anything you consider to be "newsworthy"! This might be about yourself, your research group, a visitor to your lab, or about someone you know at the BHI, TQEH who might be too modest to tell the world about an award they have received.

NEWS

NHMRC Partnership Grant

Value-Based Healthcare in Elective Coronary Stenting

\$2,440,223

2018 - 2021

CIA Prof John Beltrame, The University of Adelaide & CALHN CIB Dr Rosanna Tavella, The University of Adelaide & CALHN CIC A/Prof Christopher Zeitz, The University of Adelaide & CALHN CID Prof John Spertus, University of Missouri, United States CIE A/Prof Margaret Arstall, The University of Adelaide & NALHN CIF A/Prof Matthew Worthley, The University of Adelaide & CALHN CIG Prof Derek Chew, Flinders University of South Australia & SALHN

The HealthCare Problem: Coronary stenting is a life-saving procedure for patients presenting with a heart attack. For patients with stable heart disease, coronary stenting can be performed electively, however the benefit of the procedure in this setting is less clear.

Over 10,000 Australians per year undergo elective coronary stenting at a cost of \$183 million, yet clinical trials show this invasive therapy does not protect against myocardial infarction or death. Furthermore, it may only improve angina (chest pain) in about half of the patients treated. Local and international data show that more than 40% of patients continue to experience cheat pain after elective stenting.

Consequently, elective coronary stenting has been labelled as a 'low value procedure' but could potentially be improved if the outcome that matters to patients (their angina pain) is routinely measured.

How will this Partnership Grant Help? This grant will look at ways to improve chest pain outcomes for patients while reducing unnecessary procedures. The project will assist cardiologists in selecting patients who are more likely to benefit from the procedure as well as discovering possible treatments for those who continue to experience chest pain post stenting.



(1) Establish the routine measurement of angina before and after elective stenting (Pre and Post-PCI Angina) using the Seattle Angina Questionnaire, a health survey pioneered by CID Prof Spertus.

- (2) Improve this patient outcome by:
 - (a) utilising it as a performance measure,
 - (b) providing benchmarked feedback to clinicians, and
 - (c) exploring innovative approaches to improve Post-PCI Angina

The grant, valued at \$2.5 million, will be a statewide research partnership involving both public and private cardiac hospitals. The project will be readily implemented in South Australia given the collaborative team and infrastructure with a political environment for change but also has the capacity to be disseminated both nationally and internationally via the partnership team network.

The funding partners for this grant include:

- The Hospital Research Foundation
- Central Adelaide Local Health Network (CALHN)
- SA Health
- Calvary Wakefield Hospital
- National Heart Foundation (South Australia)
- Quantum Health Outcomes

•International Consortium for Health Outcomes Measurement (ICHOM)



NHMRC Project Grant

Role for zinc and ZIP2 in the action of nitric oxide and in vascular protection against cigarette smoke and cardiovascular disease

\$685,941

2018 - 2020



CIA Dr Peter Zalewski (The University of Adelaide, BHI), CIB Professor Sandra Hodge (Chronic Inflammatory Lung Disease Research Group, Adelaide Medical School), CIC Professor John Beltrame (The University of Adelaide, BHI, CALHN), CID Dr Chiara Murgia (Department of Nutrition, Dietetics and Food, Monash University), CIE Dr Rosanna Tavella (The University of Adelaide, BHI, CALHN) and AIs Dr Eugene Roscioli (Adelaide Medical School) and Dr Peter Psaltis (SAHMRI).

The essential dietary metal zinc is a component of many metalloenzymes and zinc finger transcription factors. I have had a long-term research interest in zinc and especially in the recognition, detection and functions of a separate pool of zinc ions (labile zinc) which have dynamic cell signalling and cytoprotective roles in the body. In a person who is clinically zinc deficient it is this labile pool which is depleted first. Central to this grant-funded project is the emerging concept that labile zinc is tightly coupled to the production and action of nitric oxide. A rise in the major cardiovascular signalling molecule nitric oxide in the endothelial lining of blood vessels not only causes a rise in adjacent smooth muscle cyclic GMP but also triggers a rapid mobilization of endothelial stores of labile zinc; importantly, some of the well-known therapeutically-relevant actions of nitric oxide are likely to be mediated or facilitated by zinc, including anti-inflammatory actions and vasodilation. Zinc may also feedback to promote nitric oxide synthase dimerization and further increase nitric oxide generation. Rachel Jakobczak and Dr Amenah Jaghoori have made vital recent contributions to our studies of zinc on blood vessel contraction using wire myography with small human blood vessels. A major health implication of this is that nitric oxide might not be fully effective as a cardiovascular therapeutic agent if there is an inadequate supply of endothelial zinc. This impacts on a significant proportion of our community who have low systemic zinc levels, especially the elderly and diabetics. Aim 1 of the grant will establish how labile zinc ions work in concert with nitric oxide.

There are multiple causes of zinc deficiency including abnormalities in one or more of the membrane zinc transporter proteins. Aim 2 of the grant will enable us to be the first to systematically characterise the role of these proteins in the vasculature and this work will be overseen by Dr Murgia who is based at Monash University and is an international expert in this field. Dr Murgia will also be involved in assessment of dietary zinc intake in the patients using a 4 x 24 hr dietary recall system INTAKE24-AUS (developed at Monash University). It is already known that polymorphism of one of these transporters, ZIP2, is linked to carotid artery stenosis in the elderly. The group of Professor Sandra Hodge has shown that, in an animal model, cigarette smoke specifically impairs ZIP2 expression and depletes pulmonary airway and endothelial zinc stores. Key members of her group and former BHI researchers include Dr Eugene Roscioli, Dr Hai Tran and Rhys Hamon. Aim 3 of the grant will extend these important findings to peripheral and coronary artery vessels.

The focal point of a successful NHMRC grant is its capacity to be translated to the clinic. Critical to our success has been the involvement of chief investigators Professor John Beltrame and Dr Rosanna Tavella and their important CADOSA registry and biobank of tissues from patients undergoing coronary angiograms. One of our innovative approaches has been the development over the last two years of an endothelial "biopsy" technique in which we can now obtain peripheral and coronary artery endothelial cells that have been dislodged and subsequently "captured" on the surfaces of the various wires, catheters, stent balloons and other devices used during the angiogram or PCI procedure. This means we can now work with real ex vivo arterial endothelial cells from patients. One of our external NHMRC reviewers considered this a game-breaker. Invaluable to this has been the generous

assistance of staff in the CATH labs at TQEH and RAH, as well as the many cardiologists doing the procedures. Special thanks go to Dr Peter Psaltis (AI on the grant) and A/Professor Chris Zeitz for their expert help, advice and encouragement. We are now set up to measure, for the first time, arterial endothelial zinc levels and ZIP2 in cells from patients with a range of cardiovascular diseases as well as controls (normal angiograms, non-diseased vessels) and correlate with zinc intake, plasma zinc, nitric oxide, smoking history, use of antihypertensives and disease type in Aim 4.

Outcomes of this grant are expected to include world-first insights into the interaction between vascular nitric oxide and labile zinc, a rationale for a future zinc interventional clinical trial and a reassessment of zinc dietary guidelines within Australia for cardiovascular disease patients. Finally, I would like to acknowledge the University of Adelaide Faculty of Health and Medical Sciences for a timely, near miss grant-in-aid of \$10,000 in 2016 as well as The Hospital Research Foundation for vital equipment purchase support. After several frustrating and moraledeflating years of rejections and near misses, it was very pleasing that the NHMRC group panel recognized our work in 2017 and awarded a category 6 score for its science component. A "very thick skin" and "never give up hope" attitude are vital in getting an NHMRC grant!

Dr Peter Zalewski

NHMRC Project Grant

Prevention of Heart Damage during anthracycline cancer

\$327,214

2018 - 2020

CIA A/Professor Benedetta Sallustio, The University of Adelaide & CALHN CIB Professor Andreas Evdokiou, The University of Adelaide & CALHN CIC Professor John Horowitz, The University of Adelaide & CALHN

The following interview with Betty Sallustio by the Faculty of Health and Medical Sciences, The University of Adelaide, was for their "<u>Spotlight on Researchers</u>" series in December 2017.

Tell us more about your study.

Many of the therapies used to treat cancer take advantage of the ability of cancer cells to rapidly divide. This means that cancer cells are constantly copying their DNA to pass on to their "daughter" cells. Cancer therapies often target this process by damaging the DNA to cause cancer cell death. This approach relies on the fact that most of the other cells in the body do not undergo constant growth and replication and are, therefore, not affected by the chemotherapy agents. We now understand that many cancer chemotherapies can cause heart damage, even though the heart muscle cells are not rapidly dividing. We believe that in the heart, some cancer chemotherapies activate DNA repair pathways that then divert the heart's energy stores from maintaining heart function to priming DNA-repair processes.



Many of the cancer therapies that cause heart damage are used to treat cancers (blood, bone and breast) that can affect children and young adults. However, no medicines are currently approved for the prevention of heart damage during cancer chemotherapy, particularly in children. Our work will focus on the biochemical pathways in the heart that are involved in DNA damage and repair. We hope to develop new therapies that not only protect the heart during cancer chemotherapy but that also increase the cancer-killing effect of the chemotherapy. That would be like "having your cake and eating it too".

What are the issues facing people with cancer?

Many cancer therapies can damage the heart at the high doses required for an effective cure. Because of this, patients are closely monitored for signs of heart damage during their treatment and, if this is detected, the cancer chemotherapy may be stopped or decreased, potentially decreasing its anti-cancer effect and increasing the possibility of treatment failure or cancer recurrence.

For some cancer patients, the first signs of heart damage occur months after the end of chemotherapy treatment. These cancer survivors may then have to deal with the often debilitating consequences of heart disease. To make things worse, many of the cancer chemotherapy medicines that cause heart damage are used to treat cancers that are common in children and adolescents. Early onset of heart disease is a leading cause of illness and death in young cancer survivors.

Tell us about your team.

With my co-investigators, Professors Andreas Evdokiou and John Horowitz, I am based at the Basil Hetzel Institute, The Queen Elizabeth Hospital, a purpose-built state-of-theart research facility that promotes the translation of basic research into the clinic by co-locating research laboratories close to patient facilities, and bringing together biomedical researchers from The University of Adelaide with clinicians and patients. This multidisciplinary environment has allowed us to build a research team with expertise in pharmacology, cancer biology and cardiology, so that we can tackle the issue of cardio toxicity and cancer chemotherapy from different perspectives and knowledge bases. This is a great asset and also provides a very supportive base for the training and development of new and early career researchers.

What are you excited about as part of this study?

I am personally excited that - with all the years of basic laboratory research in therapies for heart disease - we have finally reached the stage where we may have a real clinical impact, helping patients to beat cancer! I would never have guessed this new direction 10 years ago, but there is now a growing appreciation that many of the biochemical changes in cancer cells, that promote their growth and spread are similar to changes that take place in heart muscle cells of patients with heart disease. It's really exciting to think that we can apply some of the approaches for cardiovascular disease to the treatment of cancer.

Has any significant work led to this study?

This work has grown from research initially funded by the Heart Foundation, to develop better therapies for the treatment of heart attacks and heart failure. We initially studied the biochemical changes inside the muscle cells of damaged hearts, and tested possible therapies to reverse these changes. However, we are now aware that many of the same biochemical changes also take place inside cancer cells as they start to grow and spread. In 2016, we received seed funding from Cancer Council SA to carry out a small pilot study investigating the effects of heart medicines during cancer treatment. Our very early results suggested that combining some of these medicines with cancer chemotherapy caused an improvement in a blood test of heart function. These results have helped us secure three years of funding so we can now expand our work using ultrasound imaging of the heart (as well as blood tests) and whole-body imaging of cancer growth and spread.

What or who inspires you to pursue your research?

I am very fortunate that I really enjoy my work. My PhD supervisor really encouraged me to pursue a career in medical research. He was a great mentor and role model, but was sadly diagnosed with cancer and passed away at the age of 44, whilst I was still completing my PhD. His integrity, determination and courage have been a constant source of inspiration in my work.

What's one thing you wish all people knew about cancer and heart damage during cancer chemotherapy?

On a positive note, cure rates for both cancer and heart disease have never been better. Decades of basic and clinical research have led to the identification of important risk factors, early detection and better targeted therapies. There is good reason to be optimistic about the future.

What's your go-to, health/medicine fun fact that you use at parties/gatherings/networking events?

I like that medical discoveries can come from the most unexpected sources. For example, warfarin, one of the most important medicines for preventing blood clots and strokes was originally marketed as rat poison, and nitroglycerine (used to make dynamite) is also used to treat heart disease.

If you were to achieve a breakthrough finding in this area, how would you and your team celebrate?

Dancing, singing and champagne would probably be involved!

ARC Discovery Grant

Improving thermal conditions in housing to support ageing in place

\$413,000

2018 - 2020

CIA Veronica Soebarto, CIB Pisaniello D, CIC Zuo J, CID Williamson T, CIE Hansen A, **CIF Professor Renuka Visvanathan**, CIG PI van Hoof J

Professor Renuka Visvanathan, Director, Aged & Extended Care Services, Medical Directorate of The Queen Elizabeth Hospital, is part of a research team that has recently been successful in receiving an ARC Discovery grant (\$413,298, 2018-2020) for a project entitled "Improving thermal environment of housing for older Australians". The team, led by Professor Veronica Soebarto from the School of Architecture and Built Environment, also includes researchers from School of Public Health (Professor Dino Pisaniello and Dr Alana Hansen) and School of Architecture and Built Environment (Associate Professors Terence Williamson and Jian Zuo), as well as a Partner Investigator from the Hague University of Applied Science, The Netherlands (Professor Joost van Hoof). The project aims to develop strategies to improve the thermal environment of housing for older Australians based on systematic investigations of the links between weather, thermal comfort, energy use, frailty level and well-being. It will be conducted through questionnaire



survey, thermal comfort assessment and indoor environment monitoring of around 60 homes of older people in three different climates in South Australia, as well as through focus group discussions with older people and various relevant stakeholders.

The project is timely and significant in the light of an ageing population, the changing environment and rising fuel costs. Improved thermal conditions will lead to better quality of life, reduce the need for institutional care and reduce public health costs. They will also provide environmental benefits through reduced energy use and carbon emissions. The project will produce evidencebased guidelines and a framework about planning and design issues to assist policymakers, building designers and age care providers. It will also produce guidelines that will address operational and behavioural aspects to support older people living independently.

Heart Foundation - Vanguard Grant

Healthcare Costs and Resource Use associated with 30-day Hospital Readmissions among Heart Failure Patients

\$75,000

2018

CIA Dr Isuru Ranasinghe, The University of Adelaide CIB A/Professor Billingsley Kaambwa, Flinders University CIC Professor Robert Adams, The University of Adelaide



Cancer Council SA - Project Grant

Personal and family history of type 2 diabetes and risk for colorectal cancer in young adults

\$75,000

2018

CIA A/Prof Joanne Young, The University of Adelaide CIB Professor Tim Price, The University of Adelaide & CALHN CIC Professor Ian Tomlinson, University of Birmingham, UK CID A/Prof Christophe Rosty, University of Queensland CIE A/Prof Andrew Ruszkiewicz, SA Pathology CIF Dr Andreas Schrieber, SA Pathology CIG Prof Cameron Platell, St John of God Hospital, Western Australia CIH Dr Jennifer Hardingham, The University of Adelaide CII Dr Eric Smith, The University of Adelaide CIJ Dr Paul Drew, The University of Adelaide



Colorectal cancer (also known as bowel cancer) is preventable by the removal of bowel polyps and curable by surgery if detected early. In our population, screening for bowel cancer begins at age 50, the age at which the rate begins to rise sharply. In recent years, bowel cancer has been increasingly seen in younger adults aged under 50 years. This comes at a time when there is a simultaneous decrease in the incidence rate in patients aged 50 years and over due mostly to screening. The rise in bowel cancer in young adults is currently unexplained.

Recent findings from the South Australian Young Onset (SAYO) Colorectal Polyps and Cancer study have linked bowel cancer in young adults with having a personal history, or family history in a close relative, of type 2 diabetes. At least one first-degree relative with type 2 diabetes was seen in 60% of young adults with CRC, and a personal history of type 2 diabetes was observed in 40%. In patients of similar ages where the bowel was clear at colonoscopy, no patient had a close relative with type 2 diabetes. In the general population, the rate of type 2 diabetes is estimated to lie between 5 and 10%.

SAYO has a number of research questions based around this finding:

1) What is the distribution of this type 2 diabetes associated risk across the population?

2) What are the genetic and epigenetic factors involved?3) Is the bowel prematurely aged in young patients who develop bowel cancer?

4) Given there are many more cases of type 2 diabetes in the population than there are young adults with bowel cancer, what particular features of a type 2 diabetes are more likely to identify an at-risk family?

Addressing these questions will allow us to identify those young adults most at risk in our population with the aim of preventing the cancers through early screening.

SAYO is currently working out of the Department of Onology at The Queen Elizabeth Hospital, and is interviewing patients there and at the Lyell McEwin and Royal Adelaide Hospitals. Funding from BEAT Cancer for 2018 will allow us to employ a research nurse to interview young adults with bowel cancer about their family history and symptom profiles from across the state of South Australia, including private and public hospitals and health centres.

Commercial Accelerator Scheme



\$120,000 (The University of Adelaide and The Hospital Research Foundation)

2018

Professor PJ Wormald & A/Prof Sarah Vreugde ENT Surgery, BHI, TQEH



NHMRC CRE in Health Services

National Centre for Sleep Health Services Research Positioning Primary Care at the Centre of Sleep Health Management

\$2,500,000

2018 - 2022

McEvoy D, Stocks N, Zwar N, Grunstein R, Chai-coetzer CL, Lack L, Professor Robert Adams (The Health Observatory, BHI and The University of Adelaide, Redman S, Vakulin A, Wesselingh S



Pfizer: Global Research Awards for Nicotine Dependence

Varenicline and Nicotine replacement therapy for Smokers admitted to Hospitals (VANISH)

US\$200,000

2018 - 2019

Johnson G, Abramson M, Dooley M, Bonevski B, Professor Brian Smith (Respiratory Medicine Unit & Clinical Practice Unit, BHI, TQEH), Webb A

Arthritis Australia - Project Grant

Community perceptions of rheumatoid arthritis pharmacotherapy: An analysis of social media platforms

\$35,000

2018

Keen H, Dr Sam Whittle (Rheumatology Research Group, BHI, TQEH), Delir Haghighi P, Sharma C





The Garnett Passe & Rodney Williams Memorial Foundation and Fulbright Scholarships

Dr Giri Krishnan is an Otolaryngology, Head and Neck Surgical trainee. He completed his medical degree at The University of Adelaide in 2013 and a Master of Clinical Science at the Joanna Briggs Institute in 2017. He is currently undertaking a PhD at The University of Adelaide, as part of a Surgeon-Scientist training program under the supervision of Professor PJ Wormald and Dr Andrew Foreman, and funded from February 2018 by the Garnett Passe and Rodney Williams Memorial Foundation. His project is investigating the application of novel nanoparticles to advance diagnosis and treatment of patients with head and neck cancer. This work is part of a collaboration with a team of bioengineers and physicists lead by Professor Benjamin Thierry at the Future Industries Institute, University of South Australia.



Giri was recently also awarded the 2018 Fulbright scholarship, which will allow him to

undertake a 10-month research fellowship, as part of his PhD, at Stanford University in California, USA. He will work in the Rosenthal Laboratory where he will have access to state of the art preclinical imaging facilities. While at Stanford he will evaluate the use of advanced magnetic nanotracers for molecular imaging to identify microscopic metastatic cancer deposits in a mouse head and neck cancer xenograft model. He will also be involved in clinical trials studying the use of fluorescent probes for real-time optical imaging during head and neck surgery.

The University of Adelaide Early Career Fellowship Dr Katharina Richter

Kati's fellowship will be used to validate an innovative technology against antibiotic-resistant bacteria with the goal of developing end-user products for infection control after surgery.

Every year antibiotic-resistant bacteria claim 700,000 deaths globally and existing antibiotics can't effectively kill them. Worsening the situation, medical care only targets planktonic bacteria, though by default bacteria reside as sessile communities in biofilms, which offers protection from medical therapies and promotes resistance.

Unaffected by antibiotics, bacterial iron metabolism presents an antimicrobial target as it is vital for all pathogens, including resistant strains. A patented treatment of Deferiprone and Gallium-Protoporphyrin (De GaPP), resulting from Kati's PhD project, destroys biofilms by depleting bacteria of iron and feeding them a poisonous iron analogue.

This treatment showed excellent antibiofilm activity against resistant *S. aureus*, while being non-toxic *in vitro* and *in vivo*. Harnessed in a wound healing gel, the therapy will be used to treat *S. aureus*-associated chronic rhinosinusitis. Under the supervision of Professor PJ Wormald in ENT Surgery a human clinical trial will commence in March 2018 at The



Queen Elizabeth Hospital. In addition, Kati will validate the treatment's activity against resistant *S.epidermidis*, and develop drug-releasing sponges for orthopaedic surgery as a novel therapy to treat *S.epidermidis*-associated implant infections. Testing the treatment's activity against other pathogens on the WHO's global priority list of antibiotic-resistant bacteria will broaden the scope of the technology, opening the path for further product development.

Katharina thanks The Univeristy of Adelaide for awarding her this fellowship, and The Hospital Research Foundation for their ongoing research support.

THRF Travel Award report: Makutiro Masavuli

Makutiro Masavuli, PhD Student, Virology Group, The University of Adelaide Discipline of Surgery, BHI, TQEH

Attended the 24th International Symposium on Hepatitis C Virus and Related Viruses, Hyannis, USA, 25-28 September 2017



I attended as many sessions as I could during the next days. Some of the presentations provided me a new insight into areas related to my PhD research. In particular, there were presentations on HCV-specific B cell immunity and the characterisation of neutralising epitopes of HCV envelope proteins. The authors presented new information relating to conserved neutralising epitopes of HCV envelope proteins and how the immune system uses the antibody repertoire to tackle HCV infection. This session provided insight into the possibility of developing effective antibody-based treatments and vaccines for HCV. The vaccine design and development session was also interesting and showcased some of the latest HCV vaccine research being carried out. In addition, I was inspired by a number of keynote speakers especially Helen Lazear, Richard Kuhn, Dan Barouch and David Thomas.

A personal highlight of the conference was the poster session held during the first two days of the conference. This was an obvious significant point for me not only because I was presenting my poster on novel DNA-based vaccines for HCV, but also because this session provided the opportunity to actively interact with other conference attendees. I received a number of questions and some feedback regarding my poster from senior members of the HCV research community, which has provided me with new aspects to consider in my own research and ways in which my vaccine strategy could still be improved. I used this opportunity to inquire about other researchers' work and in doing so was able to learn a great deal more about the work being done in many laboratories overseas. I encountered many interesting people who had some original ideas and whom will no doubt go on to make some very big contributions to medical research on HCV and other related viruses.

Next year's conference, HCV2018, will be held Dublin, Ireland during October. I have no doubt this conference will include even more exciting research on emerging viruses and vaccine development. By this time I will hopefully have completed my PhD and hope to have the opportunity again to present my work.

Once again, I enjoyed the conference. It was completely new experience for me and an excellent opportunity to present my work to, and receive feedback from experts in my field. I look forward to collaborating with many of these people in the future. The conference was well-organised, the food was delicious, and Hyannis was beautiful. The weather wasn't bad either (well, at least most of the time).

I am grateful for the Travel Award from THRF which made attendance at this conference possible.





THRF Travel Award report: Dr Joanne Dollard

Dr Joanne Dollard, Postdoctoral Researcher, Adelaide G-TRAC, The University of Adelaide and Basil Hetzel Institute, TQEH

Attended The Australian Association of Gerontology National Conference, Perth, Western Australia, 8-10 November 2017

The Australian Association of Gerontology National Conference is held annually over 3 days, and is attended by approximately 500 researchers, policy makers and multidisciplinary clinicians across Australia. The theme of this conference "Ageing: The Golden Opportunity" was about making the most of the opportunities that the ageing population offers.

At the conference, I presented a poster and a "rapid fire" presentation about the Ambient Intelligent Geriatric Management System (AmbIGeM) trial titled "Technological falls prevention in hospitalised older people: our journey so far (health professionals and patient partnership)". The opportunity to present facilitated knowledge exchange with peers and I received valuable feedback on my research. There was interest shown in this technology and whether this technology could be applied beyond the hospital setting. I also attended networking and mentoring sessions, enhancing my professional development and collaborative networks. I heard presentations from key researchers in gerontology and in falls prevention in Australia.

Whilst in Perth, I visited researchers from the School of Physiotherapy and Exercise Science at Curtin University. This included the Head of School, Professor Keith Hill who is a Chief Investigator on the AmbIGeM trial and has an international standing as a falls prevention researcher. I also met other members of the AmbIGeM project team from Curtin University, Ms Eileen Boyle and Ms Katherine Jones, for the trial site at the Sir Charles Gairdner Hospital in Perth. Our face to face meeting has established rapport as we discussed the finer details of the project including project and site specific challenges. I also met with Associate Professor Anne Marie Hill, a leading falls prevention researcher in Australia and Dr Christine Toye, a leading nursing/gerontology researcher. In both meetings, potential future research collaborations were discussed around preventing older people falling in hospital. I visited the Sir Charles Gairdner Hospital (SCGH) to meet some of the clinicians involved in the AmbIGeM trial. This included Dr Sean Maher and Dr Sue Ingram, both Geriatricians, and Ms Su Kitchen who is the CNC/CPI Falls Prevention at



SCGH. I discussed the progress of the AmbIGeM trial at TQEH and further development/implementation at SCGH. These meetings and the rapport developed are critical to the success of the AmbIGeM trial implementation and evaluation.

Overall, attending the AAG conference was a very exciting and productive trip. It has enhanced my professional development, provided many opportunities for networking in both the fields of falls prevention and gerontology, as well as the opportunity to discuss potential collaborations with national experts, to meet staff from Curtin University and Sir Charles Gairdner Hospital and discuss face to face the AmbIGeM trial with them. As an emerging researcher in ageing, I am appreciative of The Hospital Research Foundation for generously supporting my attendance at this conference and site visits, which has been valuable in promoting the AmbIGeM trial conducted at the Basil Hetzel Institute, TQEH.



THRF Travel Award report: Dr Sivabaskari Pasupathy

Dr Sivabaskari (Tharshy) Pasupathy, Postdoctoral Researcher, Translational Vascular Function Research Collaborative, The University of Adelaide and Basil Hetzel Institute, TQEH

Attended the American Heart Association conference, Anaheim, California, USA Visited Professor Noel Bairey-Merz, Cedars-Sinai Medical Centre, Los Angeles, California, USA 10th-15th November 2017



the hospital research foundation

From the 10th to 15th of November, I attended the American Heart Association conference in Anaheim, California, along with John Beltrame, Chris Zeitz, Rosanna Tavella and Clementine Labrosciano (see December 2017 Winning News for Clementine's travel report, and accompanying photos).

Rosanna and I presented posters on Myocardial Infarction with Non Obstructive Coronary Arteries (MINOCA) while Prof John Beltrame chaired a session and presented on MINOCA and ANOCA (Angina with Non Obstructive coronary Arteries). My poster drew significant attention from the attendees and I had the privilege to discuss my research with some of the brightest minds of cardiovascular research. As MINOCA is a new and evolving area of research, there were a lot of suggestions on patient outcomes improvement, medical management and diagnostic approaches to alleviate the underlying cause of this rather heterogeneous presentation. Rosanna's poster was a comprehensive comparison between MINOCA and myocardial infarct patients with coronary artery disease (MICAD) and Clementine presented a poster on variation in early death and readmissions following acute myocardial infarction hospitalisations in Australia and New Zealand. I had the opportunity to meet many of the colleagues and international collaborators of MINOCA. I attended sessions on MINOCA, late breaking clinical trials, MRI sessions and women in heart disease session. It is always a very rewarding and encouraging experience to attend a conference where you get to share and learn the key ideas about evolving areas of medical research.

On the last day, we visited Cedars-Sinai Medical Centre (a hospital in Los Angeles) to meet with Professor Noel Bairey-Merz, one of our collaborators of MINOCA/ANOCA research. As we have arrived early, we walked down Rodeo Drive and spent time as a group for few hours, something that was hard to do during the conference days. Discussions with Prof Noel were very helpful and the startling differences in hospital administration and research structure fascinated me a lot.

Rosanna and I also had the chance to hang out one evening at a hockey game with our own Rachel Dreyer who in now at Yale University, USA. While the conference participation was exciting, a visit to Disneyland was lots of fun. As it was Christmas time, the festive season had already begun and we (Rosanna, Clementine and I - it was impossible to convince Prof Beltrame to accompany us to the Disneyland!) had the opportunity to see the parade and a light show in the pier, highlighting the need of world peace and unity among us. I enjoyed that show very much. Adrenaline inducing rides and Mickey's hug were also some of the perks of this trip. I would like to thank The Hospital Research Foundation whole heartedly for making this exciting and rewarding trip possible.



Above: Tharshy (left) with Rosanna and BHI alumni Dr Rachel Dreyer at an ice hockey game; Below: Disneyland light show



THRF Travel Award report: Dr Danushka Wijesundara

Dr Danushka (Dan) Wijesundara, THRF Early Career Research Fellow, Virology Group, The University of Adelaide and Basil Hetzel Institute, TQEH

Attended the 20th Update New York Immunology Conference (NYIC), NYC, USA, 23-26 October and the Vaccines R&D-2017 Conference in Washington DC, USA, 13-15 November 2017.

Laboratory visit to Associate Professor Yoichi Furuya at Albany Medical Collage, NY, USA, 27 October - 12 November 2017. [photo L-R: Yoichi & Dan]

I presented as a speaker at 2 conferences (20th Upstate New York Immunology Conference (NYIC) and the Vaccines R&D-2017 Conference). I also presented the same research as an invited speaker for Professor Alistair Ramsay at a departmental seminar (Department of Microbiology, Immunology and Parasitology, Louisiana State University) and for Dr Susan Wong at a laboratory seminar (Diagnostic Immunology Laboratory, Wadsworth Center). Given that the content of these presentations pertain to ongoing and unpublished research, I was able to obtain useful feedback as to how I can proceed with advancing the presented research for publication purposes and also get individuals interested in collaborating with our laboratory. In fact, following these presentations, I exchanged contact information with almost 20 academic and industrial research scientists who can benefit the research and translational prospects of our laboratory vaccines. For instance, luminex beads based assay at Dr Wong's laboratory can be exploited to quantify the antibody levels in vaccinated animals given that this assay is significantly more sensitive than the ELISA based assays which we have used previously. Furthermore, we can improve the reproducibility of delivering DNA vaccines into cells of pigs (a translational model we use to test experimental vaccines) by using 3M Pharmaceuticals microneedle devices or Inovio's Cellectra platforms. In fact, we can potentially use these devices on a collaborative basis, which could introduce new industry partners to the university.

Although I intended to give a departmental seminar at the Albany Medical College (AMC), instead, I presented at the 20th NYIC. This was because most of the immunology researchers at the AMC attended this conference along with many other immunologists from several prestigious universities (including Rockefeller University, Cornell University and McGill University). Furthermore, instead of learning how to use the Amnis Imaging flow cytometer as



mentioned in my application, I taught A/Prof Yoichi Furuya at the AMC how to execute a fluorescent target array as a means of initiating the collaboration with him. I overlooked the fact that the Amnis instrument is available at Flinders University and we can access this instrument easily with the help of our collaborator Dr Carr at Flinders University.

Overall, presentations during my trip to the USA, which also included an invited lecture to Albany Pharmacy College students about the recent progress of HIV vaccine development, were extremely beneficial for:

1. Obtaining feedback regarding improving the quality of our ongoing research.

2. Developing academic and industry collaborations that can benefit the research in our laboratory and improve the research profile of the University.



THRF Travel Award report: Professor Eric Gowans

Professor Eric Gowans, Research Leader, Virology Group, The University of Adelaide and Basil Hetzel Institute, TQEH

Attended the Australian Society for HIV Medicine (ASHM) in Canberra, Australia, 6-8 November 2017.

I was invited to present the results of our studies to develop a vaccine for HIV at the annual meeting of the Australian Society for HIV Medicine (ASHM), Canberra, in a paper entitled "Novel strategies to overcome the block in HIV vaccine development". As our studies focus on the development of novel vaccine strategies, my presentation was allocated to a session entitled "Prevention", one of six presentations in this session.

The support from THRF enabled me to attend this session and present the work from my laboratory to a group of informed individuals with expertise in HIV vaccine design. This ensured that the details of our work were presented to individuals who may be in a position to act as grant reviewers for future grant applications submitted from my laboratory. I was also able to attend the other presentations in this session ensuring that I became aware of other ongoing attempts to develop a HIV vaccine. This was invaluable as it presented the opportunity to become aware of potential collaborators.

The ASHM conference is the premier conference related to HIV held in Australia on an annual basis and I am most grateful to THRF for the opportunity to participate in the conference and to present the results of our studies to individuals with a specific expertise in HIV.

2018 THRF Travel Awards

The Hospital Research Foundation is proud to help researchers advance their own research and build collaborations through national and international conferences and scientific meetings.

In 2018, applications for THRF's Travel Awards at the Basil Hetzel Institute for Translational Health Research are available for both Researchers and Higher Degree Students.

"Our Research Travel Awards are aimed to facilitate national and international travel for research purposes and are only possible thanks to the kind support of our supporters," said THRF Chief Executive Paul Flynn.

"Our donors are always interested to hear about students and researchers who attend conferences all over the world, bringing back new learnings to enhance their lifesaving research and make an even bigger impact in our community."



Awards of up to \$1000 will be considered for national travel and up to \$3000 for international travel for:

• A Higher Degree by Research student (HDR): Interstate travel in the 2nd year of the HDR and International travel in the 3rd year of the HDR will be considered. HDR students who have received Postgraduate Research Scholarship support from THRF are eligible to apply.

• Other BHI researchers.

For more information, please visit:

https://www.hospitalresearch.com.au/research/grants/ travel-grants/

Welcome to new BHI visitors and staff



Andrew Hayes has joined the ENT Surgery group as a research assistant working with Dr Sarah Vreugde. He will be investigating the potential of bacteriophage and microbiota transplants as treatments for Chronic Rhinosinusitis. Andrew recently completed his Masters with Professor Grant Booker at the School of Biological Sciences, The University of Adelaide. His research area was the investigation of novel antibacterial agents targeting *S.aureus* and antibacterial resistance mechanisms.

Andrew can be found on Level 1 of the BHI. andrew.j.hayes@adelaide.edu.au



Dr Haruka Yamaguchi is from Japan and will be a visiting research scholar in the Breast Cancer and Biology Unit at the BHI for the next 2 years. After graduating from the Nippon Dental University in Niigata, Japan, Haruka worked as a dentist. She received her PhD from the Graduate School of the School of Life Dentistry, Nippon Dental University in 2015. Her current position is as a research associate of the Nippon Dental University and part of this position involves undertaking research overseas. Her research theme is the development of a Theranostics (combination of therapy and diagnosis) probe to treat cancer.

Haruka can be found on Level 1 of the BHI. <u>haruka_yamaguchi@yahoo.com</u>



Enora Le Maout is in her 5th year of Pharmacy in France. She lives in Rennes, Brittany (west of France), which she describes as "...a beautiful city not so far from the beach, with many students and pubs." Enora says she "...likes music, cinema, cooking, meeting new people and going to the beach! I'm here for a 6 months internship with the Therapeutic Research Centre at the Basil Hetzel Institute and to improve my English." In the TRC she will be working on formulation and skin permeation.

Enora can be found on Level 2 of the BHI. enora.le-maout@orange.fr



Agathe Daria Jadczak (former BHI PhD student and student representative) recently submitted her PhD with The University of Adelaide, and has just started a postdoctoral position within the same research group, Adelaide G-TRAC Centre, led by Prof Renuka Visvanatha. Her PhD investigated various strategies to treat and prevent frailty in community-dwelling older people. She focused on medical education programs, exercise advice provided by general practitioners and the impact of exercise programs combined with nutritional approach. Agathe is currently coordinating the EXPRESS Study (EXercise and PRotein Effectiveness Supplementation Study), a community based intervention study in cooperation with CSIRO. She is investigating the feasibility and the effects of exercise in combination with protein supplementation on physical function in frail older adults. The study is expected to finish later this year. In her new role Agathe also continues her research into exercise advice provided by general practitioners and the impact of medical education programs. She will focus on exercise prescription in clinical practice as a strategy to treat, prevent and delay frailty in our community.

Agathe can be found on the Ground Floor of the BHI! <u>agathedaria.jadczak@adelaide.edu.au</u>

Welcome to new BHI visitors and staff continued



Dr Saranya Hariharaputhiran has begun working as a research officer in the Health Performance and Policy Research Unit under the supervision of Dr Isuru Ranasinghe. Saranya did her medical training at I.M. Sechenov First Moscow State Medical University in Moscow, Russia. She was a practising doctor in India, mostly involved with cardiac patients. Her research interests are improving health outcomes and care practice in cardiac patients. Currently, she is working on Health Outcomes of Hospitalised patients with heart failure.

Saranya can be found on Level 2 of the BHI. saranya.hariharaputhiran@adelaide.edu.au



Dr Beatriz Martins is a geriatrician from Brazil and a current international PhD Student with the Centre of Research Excellence in Frailty & Healthy Ageing at the BHI.

Beatriz is undertaking a higher degree through The University of Adelaide and the University of Nagoya in Japan Joint PhD Program, and is a recipient of the Beacon of Enlightenment PhD Scholarship. In the Joint PhD Program PhD students are fully enrolled in both universities and are supervised by experts from each university in their field of research. At PhD completion, students will receive a jointly awarded PhD degree.

Beatriz began her studies in Adelaide during 2016 with supervisors Professor Renuka Visvanathan (director A&ECS, GTRAC and lead investigator CRE Frailty & Healthy Ageing, University of Adelaide) and Dr Helen Barrie (Centre for Housing, Urban and Regional Planning, School of Social Sciences, University of Adelaide). The aim of her research is investigating if the development of frailty is correlated with the environment of older adults. In Adelaide, she has conducted a cross sectional study looking into correlations between the perceptions of the built environment and frailty status, physical activity levels and body composition.

Farewell to Dr Beatriz Martins

L-R: Dr Beatriz Martins with some of the Adelaide-GTRAC members, Clare McNally, Agathe Jadczak and Dr Joanne Dollard.

At the BHI, Beatriz was able to recruit study participants, and conduct clinical assessments and body composition analysis with recently THRF supported item of equipment, a Bio-impedance Analyser. The data analysis will enable comparisons between the Adelaide sample of participants and a Japanese cohort of older adults. During her time in Adelaide, Beatriz had the opportunity to engage with consumers through community talks, a radio interview and scientific presentations that truly helped improve the quality of her research and shape the project to meet with local interests.

In February this year she (along with her husband and 2 well-travelled cats Hiro and Aiko) will move from Adelaide to Nagoya, Japan. There, she will complete the final part of her study Physical Activity and Frailty: Exploring Cross- cultural and Neighbourhood Influences. Beatriz is really looking forward to experiencing the ancient Japanese culture, and learning from one of the older cultures in the world. She is also looking forward to building international networks between researchers in Adelaide and Nagoya.

The team at the BHI Ageing Research and clinical would like to wish Beatriz all the best with her research and we hope she visits Adelaide again soon!

THRF funded new equipment: FlowJo Software and Macbook

Two FlowJo dongles have been purchased valued at \$7,382, with thanks to support from The Hospital Research Foundation, and a Mac Book Pro provided to assist with complex analysis. FlowJo is a software package which allows analysis of Flow cytometry data. This <u>link</u> provides a quick tutorial on "Getting started with FlowJo". The dongles are available to all BHI researchers and will be managed via a booking system. Sign out the dongle via Kevin Fenix on Level 1 (booking diary at his desk), and the computer is booked via Branka Grubor.

For more information contact Kevin Fenix (<u>kevin.fenix@adelaide.edu.au</u>), Branka Grubor (<u>Branka.grubor@adelaide.edu.au</u>) or Dan Wijensundara (<u>Danushka.wijesundara@adelaide.edu.au</u>). All are based on Level 1 of the BHI.



Example of FlowJo analysis taken from: Ieronimakis N, Balasundaram G, Reyes M (2008) Direct Isolation, Culture and Transplant of Mouse Skeletal Muscle Derived Endothelial Cells with Angiogenic Potential. PLoS ONE 3(3): e0001753. doi:10.1371/journal.pone.0001753

BHI STUDENT NEWS

BHI STUDENT REPS 2017-2018



Zenab Dudhwala (Level 2) zenab.dudhwala@adelaide.edu.au



Maddison Archer (Level 1) maddison.archer@adelaide.edu.au



Chris DiFelice (Level 1) christopher.difelice@adelaide.edu.au

Off the Clock: Thurs 22 February

The first of the monthly social get-togethers for 2018 will be held in February. Keep your eyes out for information about which of the four BHI balconies it will be on!

Welcome Games: Thurs 8 March

Each year the BHI student representatives organise a "Welcome Games" which everyone at the BHI, TQEH is encouraged to come along to. This event is intended to welcome new staff and students to the BHI, with some fun activities to break the ice.

Are you new to the BHI, TQEH?

If you are a new student at the BHI, TQEH please make sure you have been to one of the Induction meetings with Kathryn Hudson, have had a photo taken, and complete and return the information forms for your BHI website profile.

BHI Postgraduate Coordinators for The University of Adelaide

New students to The University of Adelaide need to complete their Researcher Profile, and BHI website profile, in order to gain CaRST points. Please talk to the Postgraduate Coordinators who are based at the BHI for more information:

Discipline of Medicine, Adelaide Medical School, The University of Adelaide A/Prof Betty Sallustio, Level 2, BHI 8222 6510; <u>benedetta.sallustio@sa.gov.au</u>

Discipline of Surgery, Adelaide Medical School, The University of Adelaide Dr Prue Cowled, Level 2, BHI 8222 7541; <u>prue.cowled@adelaide.edu.au</u>

Do you want to "Peform your Science"?

In this project Inspiring South Australia are offering PhD students and early career researchers an opportunity to tell the story of their scientific research through the arts, to bring their science to life through live performance and to awaken the artist within!

The project will culminate in a series of live performances suitable for a general community audience to be held in an Adelaide theatre venue during National Science Week in August 2018.

They invite applications from PhD students who are in their third year of study through to early career researchers (post-conferral of up to five years) based in South Australian universities, research institutes or industry.

For more information visit the Insipiring South Australia website.

COMMUNITY ENGAGEMENT



Community Group Presentations

THRF are always looking for BHI researchers to present at community events. It is a wonderful opportunity for you to practice your public speaking skills, and present your work to a lay audience! If you are interested or would like some more information, please contact Tamara at THRF on 8244 1100 or tpietraszuk@hospitalresearch.com.au

The Advertiser: Professor John Beltrame

An article appeared in The Advertiser on 16 January 2018, and can be read via the BHI Facebook page.

More information about this \$2.4 million NHMRC Partnership Grant can be found on page 3 of this edition of the BHI Winning News.

Study takes a stab at chest pain mystery

ELISA BLACK

THE treatment of South Australian patients undergoing elective heart stenting could change radically as a result of a research project announced today.

Co-ordinated through The Queen Elizabeth Hospital, the four-year project aims to identify the clinical factors that ADVEOZZO1MA

responsible for chest pain after elective stenting. Balloon stenting therapy treats cholesterol blockages in large coronary blood vessels. But chest pain (angina) also can be caused by blockages in microscopic blood vessels that can't be seen in an anoigracan't be seen in an angiogra-phy or treated by a stent — therefore the surgery doesn't alleviate the pain.

In 2016-17, 275 elective stent surgeries were performed in the SA public system and 626

in the private system. Study Chief Investigator Professor John Beltrame said the partnership between re-searchers and SA Health would look at ways to improve outcomes and reduce unnecessary surgery.

"Coronary stenting is a life-

saving procedure after an acute heart attack but when performed as an elective pro-cedure in patients with chronic chest pain, its benefits are less clear," he said.

"The main indication for the procedure is to reduce chest pain yet more than 40 per cent of patients continue to experience pain after elective stenting."

Medical Journal of Australia: Dr Anapam Gupta

Dr Anupam Datta Gupta's work on the treatment of lower limb spasticity has been featured in the Medical Journal of Australia and has led to articles in The Advertiser, and other publications in Australia.

Together with colleague Dr David Wilson, Dr Anupam Gupta has written a perspective article featured in the MJA Insight series "Time to extend PBS inclusions for botulinum toxin in spasticity?" (Issue 3 / 29 January 2018) and has contributed to the MJA podcast series Episode 5: Botulinum toxin for spasticity. Dr Gupta discusses his work and also talks about broadening the PBS indications for the use of botulinum toxin for spasticity. The Pharmaceutical Benefits Scheme (PBS) currently only funds botulinum toxin injections for stroke patients with upper limb spasticity - but not lower limb spasticity - and for selected patients with cerebral palsy. Dr Gupta and Dr Wilson argued that the limited PBS criteria failed to take into account the latest evidence, saying "Botulinum toxin has emerged as the drug of choice for focal spasticity and dystonia because treatment can be targeted and a single treatment can last up to 4 months. Use of the toxin also creates a window of opportunity within which intensive physiotherapy and other therapies can be conducted."

Dr Gupta a is a Senior Consultant in Rehabilitation Medicine with The Queen Elizabeth Hospital, a Senior Clinical Lecturer at The University of Adelaide and a higher degree candidate undertaking a PhD on 'Lower limb spasticity and dystonia' under the supervision of Professor Renuka Visvanathan, Professor Simon Koblar and Professor Ian Cameron.



Dr Anupam Gupta

Links: **MJA Insight Article** MJA Podcast - episode 5

GENERAL INFORMATION

STATISTICIAN AT THE BHI

Dr Stuart Howell works at the BHI on Tuesdays and Thursdays. He is available and can be consulted by TQEH/University of Adelaide Faculty of Health Sciences staff and research higher degree students. Support is limited to 15 hours on a per project basis.



Tuesdays & Thursdays BHI Level 1 Room 1E.07 Phone: 8222 6679 <u>stuart.howell@adelaide.</u> <u>edu.au</u>

Dr Stuart Howell Senior Statistician Data, Design and Statistics Services Adelaide Health Technology Assessment (AHTA) School of Public Health The University of Adelaide

TQEH Librarians

Regular weekly visits by TQEH librarians to the BHI resume on **Wednesday March 7** (BHI Room 1-E07). A librarian from the SA Health Library Service, The Queen Elizabeth Hospital Campus will be available to assist you with constructing suitable literature and database searches for your research and help you obtain relevant material. AutoAlerts can also be configured by library staff to automatically deliver the latest results from a saved database search directly to your preferred email account.

If you are unable to meet with the librarians at the BHI on Wednesday mornings please contact <u>anna.holasek@sa.gov.au</u> or <u>rachel.davey@sa.gov.au</u> to arrange a meeting with them at TQEH Library on level 5B of the main building.

Alternatively, visit their website at <u>www.salus.sa.gov.au</u> to view their services and resources or use the quick online chat option to contact them. To access any of the electronic resources you will need to register online for a SALUS username and password.

Roy Sneddon: 1st Thursday of each month

Roy Sneddon, from the Office of Research Development and Research Education in the Faculty of Health and Medical Sciences at the University of Adelaide spends a day at the BHI each month.

He attends the postgraduate seminars, and is available to speak to postgraduate students about anything concerning their candidature.



Contact Roy to arrange a time to catch up at the BHI.

8313 9996 or roy.sneddon@adelaide.edu.au

GENERAL INFORMATION CONTINUED

CALHN Human Research Ethics Committee Submission and Meeting Dates for Applications 2018

Final Submission Date	IDSC Meeting	CALHN HREC Meeting
Mon 22 January	Thursday 1 February	Thursday 8 February
Monday 12 February	Thursday 1 March	Thursday 8 March
Monday 12 March	Thursday 5 April	Thursday 12 April
Monday 16 April	Thursday 3 May	Thursday 10 May
Monday 14 May	Thursday 31 May	Thursday 7 June
Monday 11 June	Thursday 5 July	Thursday 12 July
Monday 16 July	Thursday 2 August	Thursday 9 August
Monday 13 August	Thursday 6 September	Thursday 13 September
Monday 24 September	Thursday 4 October	Thursday 11 October
Monday 15 October	Thursday 1 November	Thursday 8 November
Monday 12 November	Thursday 6 December	Thursday 13 December

Above are the meeting dates and final dates for submissions of applications for Scientific and Ethical approval. Any study which includes drug therapy is considered by the Investigational Drugs Subcommittee (IDSC) the week prior to the CALHN HREC. Drug studies will be passed on to the CALHN HREC meeting.

Changes in 2018

The new Chairman of the CALHN HREC is Mr Ian Tindall. ALL HREC meetings will be held on Thursdays at Roma Mitchell House, Level 3, 136 North Terrace, Adelaide, and NOT at the BHI, TQEH.

For more information please contact:

Investigational Drugs Subcommittee (IDSC)	CALHN Human Research Ethics Committee (HREC)
Mr Peter Siobodian or Dr Ada Lam	Mrs Heather O'Dea
Executive Officer, Specialist Pharmacist	Executive Officer, CALHN HREC
Phone: (08) 7074 1430 or (08) 7074 1150	Level 3, Roma Mitchell House
peter.siobodian@sa.gov.au	Phone: (08) 7117 2229 or (08) 8222 6841
ada.lam@sa.gov.au	Heather.O'dea@sa.gov.au

CALHN Animal Ethics Committee

Last date to submit a new appli- cation to PRE-SCREEN	Last day to submit final applica- tion without PRE-SCREEN	Date of AEC Meeting
2018 Dates (only two confirmed)		
3 January	10 January	Wednesday 24 January 2018
14 February	21 February	Wednesday 7 March 2018
other dates to be confirmed		

contact: Amy Brunato, Secretary SA Pathology/CALHN AEC Committee <u>SAPathologyAEC@sa.gov.au</u>

WORK, HEALTH & SAFETY

BHI Inductions

All new staff and students working in any capacity within the BHI need to complete a 30min induction session. This includes staff/students that are not permanently based at The Institute. If you have any new researchers joining your group please ensure they book in for one of the following induction sessions to be held in seminar room 2:

- Friday 23rd February 1-1.30pm
- Tuesday 6th March 9.30-10am

Please register for one session by emailing <u>kathryn.hudson@sa.gov.au</u> with the person's name, position and department. More induction sessions can be scheduled if required. New researchers starting later in the year should contact Kathryn to arrange an induction time.

BHI Code of Conduct

The Code of Conduct is developed by the BHI Management Committee and is not designed to inhibit your creative freedom, however The Institute is a work place and many of the policies have been developed in direct response to issues that have occurred in the past. The aim is to clearly outline agreed processes when using the shared and common areas of the building using a common sense approach, issues which affect all researchers.

So please take the time to familiarise yourself with some of the policies. You will find copies located within the "Code of Conduct" folders on each floor, and also on the BHI website at <u>www.basilhetzelinstitute.com.au/bhi-intranet</u>. The BHI Management Committee aims to constantly improve your working environment, so if you have any suggested improvements or questions please come and see me in the first instance.

There are many positives to having an open plan design, such as flexibility of space usage and ease of interaction and collaboration; however researchers are reminded of the following issues affecting their security, privacy and potential disruption to fellow occupants.

The code of conduct policies deal with some of these issues in more depth, but as a reminder:

• Get to know your colleagues. If you don't recognise the person walking into the building behind you, then ask "Can I help you?" or "Are you looking for someone?" It doesn't need to be an aggressive statement. If you have real concerns then please call security on x27222 to investigate or let me know.

- Use the lockable drawers to store your personal items.
- Use the 'time out' password lock on your computer if you are not at your desk, especially if you have personal information or patient information stored.
- The office side of the building should be treated as a 'library' work space, if you are being disrupted by others nearby, don't hesitate to ask your colleagues to reduce the noise, or ask them to move to a more appropriate area in the building, or modifying their activities.
- You are welcome to use the break out spaces for lunch and tea breaks, however if your group becomes too large or rowdy you might be better to use the balconies or ground floor tea room to respect other students and staff working at their desks.
- Even quiet conversations in the atrium and link bridges carry throughout the entire building, those discussions aren't private, and in some cases are very disruptive.
- Utilise the sessional offices for private, sensitive or noisy discussions and phone calls.
- If you are leaving after dark then use security (x27222) to escort you to your car or public transport.

SA Health and Research Education Evening

JOIN US

洮 PRAXIS

PRAXIS Australia is pleased to offer this opportunity to the SA Health and Biomedical Research community. Join us for networking over drinks and canapes and hear from thought leaders in areas relevant to the rapidly changing health and medical research environment and your field of practice.

5:00pm	Dvinks, canapes and networking
6:00pm	Mr Malcoim Crompton (AM): The Power of Patterns in Big Data - How and when can data be repurposed?
6:30pm	Professor Ian Kerridge: A collusion of interests: Hope, hype and science and the shaping of patient's expectations of treatment
7pm	Panel Discussion: Accelerated access to provisionally approved medicines -friend or foe: Lloyd Sansom, Ian Kerridge, Wendy Lipworth, Narcyz Chines and Libby Roughhead
8pm - 8.30pm	Audience Questions

DATE: 19th FEB 2018 TIME: 5PM - 8:30PM

SAHMRI Auditorium, North Tce, Adelaide

Please RSVP by 15th February to: canderson@praxisaustralia.com.au FREE EVENT - LIMITED PLACES AVAILABLE

FOR MORE INFO PLEASE CALL US 08 81224576



OUR SPEAKERS

We look forward to hearing from youl

PUBLICATIONS

If you wish to have a recent publication included, please send details to the BHI Communications Officer rebecca.anderson@adelaide.edu.au

Alison J, McKeough Z, Johnston K, McNamara R, Spencer L, Jenkins S, Hill C, McDonald V, Frith P, Cafarella P, Brooke M, Cameron-Tucker H, Candy S, Cecins N, Chan A, Dale M, Dowman L, Granger C, Halloran S, Jung P, Lee A, Leung R, Matulick T, Osadnik C, Roberts M, Walsh J, Wootton S, Holland A, Lung Foundation Australia and the Thoracic Society of Australia and New Zealand. Australian and New Zealand Pulmonary Rehabilitation Guidelines. *Respirology*. 22(4):800-819, 2017.

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Research Secretariat Contact Details Ground Floor, (DX465101) The Basil Hetzel Institute for Translational Health Research The Queen Elizabeth Hospital 28 Woodville Rd, WOODVILLE SOUTH 5011 Phone: 08 8222 7836 Fax: 08 8222 7872 Email: gwenda.graves@sa.gov.au



THRF NEWS

The Hospital Research Home Lottery has sold out!

The Hospital Research Home Lottery has sold out! Thank you to those who have purchased a ticket, your support means we can continue funding vital research at the BHI and across the state dedicated to saving lives and improving patient care.

If you missed out, you can still purchase a ticket in the Holiday for Life or Cash Calendar draws to be in the running to win cash prizes or a holiday every year for 25 years!

Enabled by our kind donors and ticker buyers in our three lotteries in 2017, we provided more than \$12 million in funding into medical research and South Australia's hospitals for lifesaving research and patient care.

An exciting feature on Adelaide Now depicts some of this research, including showcasing the work of the BHI's Professor John Beltrame and Professor Guy Maddern. Read more and view the videos <u>here</u>!

The Hospital Research Home Lottery gives us the opportunity to support researchers like yourselves!

If you would like to buy a Holiday for Life or Cash Calendar ticket, visit https://homelottery.com.au/



Imagine winning a Holiday each year for 25 years OR \$200,000!



THRF NEWS CONTINUED

Expanding our Support at the RAH

Continuing to expand our support across South Australia to have an even bigger impact on the community, we are thrilled to announce the three successful recipients for our inaugural Translational Grant Round at the Royal Adelaide Hospital!

The three projects in the vital areas of diabetes, cardiology and intensive care displayed a high community impact with the likelihood of translating into a therapy or improved care for patients within three years.

You can read about these research grants via our website.

We are proud to provide research grants each year, not only helping the community but also providing researchers with funds to further their research interests. Stay tuned for more funding opportunities at the BHI throughout the year!



Support your own Research!

Did you know you can support your own research through regular giving?! You can join THRF's Community of Care and give monthly to medical research. This has a significant impact on how much THRF can fund towards medical research, giving you more of an opportunity for us to support the vital research you are undertaking.

In 2017, for every \$1 donated to THRF, we provided \$4 in research grants!

If you have any questions or would like further information you can visit our <u>website</u> or call us on 8244 1100.