



WATER DRAGON

PICTURE COURTESY GAIL BENSON

We, Barwon Health, acknowledge the Traditional Owners of the land, the Wadawurrung people of the Kulin Nation. We pay our respects to the Elders both past and present.

A word from the Director of Research.

Dear Colleagues

Hard to believe that the first quarter of the year has been and gone already!

Nothing stands still at Barwon Health, particularly on the research front. We have been busy moving some research staff to the beautiful newly refurbished St. Mary's Building and settling in there. REGI Unit is still at its old address in Kitchener, only the Director and Research Support Unit have moved to St. Mary's. Come and visit and take a look around the fabulous new Library and study spaces whilst you are here.



Research Week 2016 will be the week of November 14th -18th so save the date in your calendar and the venue will be St. Mary's! We are planning to make

good use of the new facility with an academic skills program to run regularly supported by the Research Directorate, Library and Literacy Services and Clinical Education and Training. We'll be asking you for input soon on what topics and content you would like to be delivered. Let us know so we can provide you with the support that meets your needs whether you are a new or a seasoned researcher!

The main grant writing season for NHMRC Project Grants is now over and anyone submitting to NHRMC for funding this year has our best wishes for a successful outcome.

Professor Frances Quirk, Director of Research

Barwon Research Bulletin

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International Women's Day

On March 8th Barwon Health celebrated International Women's Day with an interactive Q&A Panel Discussion facilitated by Dr Giuliana Fuscaldo. The panel members included

Dr Margaret Sommerville

Dr Stephen Gill

Robyn Hayles

Dr Mel Thomson

Mr Matthew Deppeler

The audience was invited to contribute their thoughts and to vote on controversial propositions including Sheryl Sandberg's (COO of Facebook) claim that *the most important career choice we can make is the partner we choose!*

In this lively and well attended discussion the statistics on women in science were presented and remind us that there is still a long way to go to close the gender gap.

Celebrating Women in Research

Associate Professor N. Deborah Friedman MBBS, FRACP, MD, MPH Infectious Diseases Physician Director General Medicine, Director of Physician Training

Dr Deb Friedman is an Infectious Diseases specialist at Barwon Health. She is also the Director of physician education, and the Director of the Department of General Medicine at



Barwon Health and a senior lecturer in the Deakin school of Medicine.

She received her MD in the area of *Infection Control and hospital-acquired infections.*

Her main research interests are infections that develop in hospitalised patients, cleaning in hospitals, skin and soft tissue infections, and optimal antimicrobial use. She is a member of the National Centre for Antimicrobial Stewardship (NCAS) research team and



she recently returned from a sabbatical in Israel where she researched the global epidemiology of Carbapenem-resistant *Enterobacteriaceae* (CRE) which is a contemporary threat to human health. In her work she created a preparedness plan to deal with CRE and emerging bacterial resistance.

Dr Fiona Collier

BAppSci, PhD Senior Medical Laboratory Research Scientist

Both of Fiona's parents were scientists. She grew up tinkering with test tubes and various chemicals "so it was probably not surprising that I also became a scientist". She commenced work in 1974 in a Histology-Electron Microscopy laboratory in the Pathology Department at Melbourne University. Here she was spurred on to complete her Science degree (RMIT) finishing the course with the George Swanson Christie Award for top student. In the mid-1980s Fiona joined the prestigious bone research group at the Repatriation Hospital (headed by Professor Jack Martin) and from there moved to the co-aligned University of Melbourne Department of Medicine at the Geelong Hospital (1993). A sideways move in 2000 saw Fiona join the Stem Cell research group at Barwon Health and turn her focus to the isolation of cells from umbilical cord blood and discovery of previously un-identified genes. Fiona's PhD (Deakin University) was completed during this time and described a novel immune gene that enhanced CD4 T cell survival and played a role in regulatory T cells.

Fiona then became the manager of the small group of laboratory researchers at the University Hospital, Barwon Health, and her interest in the immune cells flowed naturally into the current focus of the Barwon Infant Study (BIS). BIS is a longitudinal pre-birth cohort, funded by a number of NHMRC grants and lead by Principal Investigator, Associate Professor Peter Vuillermin. Her interest in the balance of immune cells has led to a number of important findings, and provided data that initiated collaborative work with the WEHI and a recent Science Translational Medicine publication, "Cord blood monocyte-derived inflammatory cytokines suppress IL-2 and induce non-classic "TH2-type" immunity associated with development of food allergy"; also cited in Nature Reviews Immunology.



"It has been a very enjoyable career. I still love working in the laboratory. I love to design and implement experiments. I love to teach and assist students/staff to understand exactly how to get the very best out of working in the laboratory. Finally I still love the excitement of obtaining results from an experiment or assay - data that inevitably leads to further questions and the continuing research cycle."

Did you know...

The REGI Website provides easy 'how to' guides for research ethics applications

Presentations

Statistics Presentations

On 23rd March the Endocrinology Department hosted the first of its series of statistics workshops for 2016 open to all.

The workshops are facilitated by Dr Helen Barraclough (Senior Clinical Research Scientist, Eli Lilly Australia). Helen is well respected internationally for her approach to teaching biostatistics to non-statisticians and has presented workshops in 15 countries. Helen has extensive experience and expertise in the design, analysis and interpretation of phase I-IV clinical trials, and in regulatory and reimbursement submissions globally having a proven track record of success.

The first of Helens workshop was extremely well attended and the capacity audience enjoyed the interactive approach to statistics through live quiz's and question answer sessions using live-response technology



Presenter - **Dr Helen Barraclough**, Director of Asia Pacific Trials and Research at **Eli Lilly**, facilitating workshops on biostatics and statistics in clinical trials.

Clinical Inertia

Presentation by **Dr David Strain**, Senior Clinical Lecturer, University of Exeter, U.K.

On April 7th International researcher Dr David Strain addressed Barwon Health staff about his latest work in Type 2 diabetes .

Dr Strain chairs the steering committee for the "Time 2 Do More" project- a collaboration between the International Diabetes Federation and experts from around the world, which aims to address the phenomenon of "clinical inertia" by encouraging patients and physicians to communicate more effectively and respond appropriately to changes in patient circumstances.



Box 1. Definitions of clinical inertia. For those recently diagnosed with type 2 diabetes, clinical inertia is defined as a failure to start treatment at the most appropriate time (usually at diagnosis). Treatment to lower blood glucose levels usually starts with changes to diet and physical activity patterns and may include one or more oral hypoglycaemic agents.

For those already receiving treatment for type 2 diabetes, clinical inertia is when treatment is not escalated, whether by increased doses, additional tablets or initiation of insulin, at the most appropriate time (usually when blood glucose levels are above the target set by physician and patient).

Dr Strain presented the principal findings of the "Time 2 Do More" survey, and those specific to India and suggested impairments in communication are at the heart of clinical inertia, Dr Strain presented key strategies to combat clinical inertia in daily practice.

Grant Success

WESTERN ALLIANCE GRANTS IN AID

The Western Alliance Grants-In-Aid Program supports research into the causes of diseases and the treatment and care of people in the western region of Victoria.

Western Alliance Academic Health Science Centre has announced funding support for the following research studies, which will commence in early 2016. Congratulations to the successful applications.

Development of a Grampians small towns cancer strategy

Dr Sarity Dodson, Professor Richard Osborne, Mr Glenn Reeves, Mr Roy Batterham, Dr Alison Beauchamp, Professor Patricia Livingston and Ms Joanne Gell

A recent needs assessment conducted across the Grampians region found that people in small towns face particular barriers to their participation in care across the cancer journey. This study will work with a range of stakeholders from services and community groups in small towns in the Grampians region to develop strategies to overcome these barriers. The study will lay the groundwork for the development of a framework to guide small town service development nationally.

This project is a collaboration of researchers, clinicians and the local communities in participating towns. In addition, the project provides a focal point for new collaborations between researchers at Deakin University and clinician-researchers at Grampians Integrated Cancer Services.

Western Alliance AHSC is providing \$80,000 to support this important research.

Farm-related major trauma in Victoria and both the long-term and immediate impact on recovery

Professor Daryl Pedler, Ms Meg Murray, Ms Jessica Beattie, Professor Belinda Gabbe and Associate Professor Susan Brumby

Farms are known to be dangerous sites for both work and leisure activities, but few studies have explored in detail the effects of farm-related injury. This study will measure the social, mental and physical effects of farm-based major trauma. The aim is to provide a realistic insight into the barriers that prevent farmers from returning to a pre-injury lifestyle and to identify interventions that may assist in promoting a return to their pre-injury work role.

This project is a collaboration of researchers and clinicians from Deakin University, Monash University and the National Centre for Farmer Health. Western Alliance AHSC is providing \$40,000 to support this important research for our region.

Does 20-minute rounding reduce the number of falls in aged care?

Ms Bronwyn Roberts, Ms Tatum Pretorius, Ms Katherine Armstrong and Dr Kara Holloway

Falls in aged care continue to be problematic and often result in injury. Hourly 'staff rounding' of aged-care residents at high risk of falls (to observe and intervene if necessary), has been shown to be effective in reducing the incidence falls and relate injury. This study aims to examine whether staff rounding on a 20-minute basis can further reduce falls and minimise falls-related injury.

This project is a collaboration of nursing and allied health clinicians in aged care at 6 sites of Western District Health Service and Deakin University. Western Alliance AHSC is providing \$30,000 to support this research project.



Outstanding success in the recently announced NHMRC Partnership Project Grants for 2015 (Round 2).

The following applicants were successful in leading these important research collaborations:

5 Year Projects:

- Associate Professor Peter Miller – Driving Change: Using Emergency Department Data to Reduce Alcohol Related Harm
- Professor Steven Allender – Whole of Systems Trial of Prevention Strategies for Childhood Obesity: WHO STOPS childhood obesity

2 Year Project:

- Professor Tracey Bucknall Prioritising Responses of Nurses to Deteriorating Patient Observations (PRONTO)

Congratulations to our Deakin University and Barwon Health colleagues on their success.

Research in the news:



Acetaminophen 'an ineffective treatment for osteoarthritis'

[http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(16\)30002-2/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)30002-2/abstract)

Taken alone, acetaminophen is "not effective at any dose" for relieving pain or improving physical function for patients with osteoarthritis, concludes a large-scale meta-analysis recently published in *The Lancet*.

Dr. Sven Trelle, of the University of Bern in Switzerland, and colleagues found that acetaminophen - also known as paracetamol - was only marginally better than a placebo for treating symptoms of the degenerative joint disease. The team also found that the non-steroidal anti-inflammatory drug (NSAID) diclofenac was most effective for short-term pain relief from osteoarthritis, though the authors recommend against taking the medication long term due to its side effects.

Nerve damage in MS could be prevented with epilepsy drug

[http://www.thelancet.com/journals/lanneu/article/PIIS1474-4422\(16\)00004-1/abstract](http://www.thelancet.com/journals/lanneu/article/PIIS1474-4422(16)00004-1/abstract)

In a study published in *The Lancet Neurology*, researchers found that an anti-seizure drug called phenytoin protected against nerve damage in people with optic neuritis. Optic neuritis is a common symptom of MS, in which the optic nerve that carries visual information from the eye to the brain becomes inflamed and damaged.

For some people, optic neuritis can be the first sign of MS.

The study team enrolled 86 individuals aged 18-60 with optic neuritis. Participants who took phenytoin had around 30% less damage to the RNFL compared with participants given the placebo.

Phenytoin could open the door to a new treatment for optical neuritis and could also lead to a new treatment for all nerve damage caused by MS.

[http://www.thelancet.com/journals/lanneu/article/PIIS1474-4422\(16\)00004-1/abstract](http://www.thelancet.com/journals/lanneu/article/PIIS1474-4422(16)00004-1/abstract)

Scientists generate a new type of human stem cell that has half a genome

<http://www.nature.com/nature/journal/vaop/ncurrent/full/nature17408.html>

Scientists have succeeded in generating a new type of embryonic stem cell that carries a single copy of the human genome,



instead of the two copies typically found in normal stem cells. These are the first human cells that are known to be capable of cell division with just one copy of the parent cell's genome. The scientists reported their findings in the journal *Nature*. Since the stem cells were a genetic match to the egg cell donor, they could also be used to develop cell-based therapies for diseases such as blindness, diabetes, or other conditions in which genetically identical cells offer a therapeutic advantage.

Because their genetic content is equivalent to germ cells, they might also be useful for reproductive purposes and assist the infertile.

Teledermatology and clinical photography: safeguarding patient privacy and mitigating medico-legal risk

Med J Aust 2016; 204 (5): 198-200.
<https://www.mja.com.au/journal/2016/204/5/teledermatology-and-clinical-photography-safeguarding-patient-privacy-and>

"Capturing clinical images is becoming more prevalent in everyday clinical practice,

and dermatology lends itself to the use of clinical photographs and teledermatology. "Store-and-forward", whereby clinical images are forwarded to a specialist who later responds with an opinion on diagnosis and management is a popular form of teledermatology. ...Failing to use appropriate security precautions poses an emerging medico-legal risk for practitioners."

Eighth retraction for former Baker IDI researcher

Anna Ahimastos, a former heart researcher with Baker IDI Heart and Diabetes Institute in Melbourne, has recorded her eighth retraction after faking patient records. "The [Baker IDI] investigation found fabricated patients records in some papers; in other papers, such as the newly retracted 2010 study in *Atherosclerosis*, the original data source could not be verified," **Retraction Watch** reports. "The latest retraction — *A role for plasma transforming growth factor-β and matrix metalloproteinases in aortic aneurysm surveillance in Marfan syndrome?* — followed up on a previous clinical trial, examining how a blood pressure drug might help patients with a life-threatening genetic disorder. That previous trial — which also included 17 patients with Marfan syndrome treated with either placebo or perindopril — has been retracted from *JAMA*; the *New England Journal of Medicine* has also retracted a related letter." From MJA news Brief

<https://www.mja.com.au/journal/2016/204/4/news-briefs-Zika-virus>

Did you know...

All projects including Quality Assurance, Quality Improvement or Audit activities, where there is an intention to publish or otherwise present the data beyond the hospital staff must be submitted to REGI for review.

This includes presenting at a conference!

WORLD BIPOLAR DAY

Wednesday March 30th was World Bipolar Day, an Internationally recognised event aiming to raise awareness of bipolar disorders and eliminate the social stigma that often surrounds mental illness.

To celebrate this significant event, Deakin University's Innovation in Mental and Physical Health and Clinical Treatment (IMPACT) Strategic Research Centre along with Barwon Health, held a public display and information session at the University Hospital Geelong's main cafeteria.

The event was a great success with IMPACT's bipolar disorder experts available to talk about the disorder and World Bipolar Day more broadly.

IMPACT also ran a quiz about bipolar disorder that had 48 entries! The lucky winner scored a prize pack including a signed 2015 limited edition Geelong Football Club framed picture, vouchers for The ROCK climbing centre Newtown, Timezone Geelong, Readings Cinemas and The Lounge Café.

IMPACT wishes to thank the Barwon Health cafeteria staff and everyone who came to chat and learn about bipolar disorder. Let's keep the conversation going about mental health all year round and continue to reduce the sting of stigma.

INTERNATIONAL CLINICAL TRIALS DAY

Friday, 20th May is International Clinical Trials Day

Save the date

International Clinical Trials Day commemorates the day James Lind started his study to determine the cause of scurvy. By dividing 12 sailors into separate groups and testing the effect of providing different treatments to each group, Lind was able to provide evidence of the link between fruit and preventing scurvy. This is the first recorded controlled clinical trial and

changed modern medicine. Around the world International Clinical Trials Day is celebrated to raise awareness of the importance of clinical trials and research in healthcare. What are you doing to help celebrate?

<https://www.australianclinicaltrials.gov.au/what-are-you-doing-celebrate-international-clinical-trials-day>

National Close the Gap Day: Thursday 17 March 2016

Barwon Health recently acknowledged National Close the Gap Day (Thursday March 17th). This is a day for individuals organisations and communities to unite to hold events and raise awareness of the health inequalities faced by Aboriginal and Torres Strait Islander people..



Interim CEO Dr Paul Cohen reiterated Barwon Health's commitment to addressing the inequities experienced by Aboriginal and Torres Strait Islander people through our RAP, our Aboriginal employment plan and the work of our Aboriginal Liaison Staff. The MC for the day was Mr Casey Ritchie and special thanks to the Byernitj Events Working Party for a delicious BBQ lunch featuring crocodile and kangaroo (did you know Byernitj is the Wadawurrung word for 'celebration')

The life expectancy of Aboriginal people is on average 10-17 years less than other Australians. You can help by signing the Close the Gap pledge with more than 185,000 other Australians via: <https://act.oxfam.org/australia/close-the-gap-pledge>. Another way to help is by learning more about Aboriginal health and understanding why it's so important to close the gap



Selected Recent Publications

Rogers, M. J., Pawlak, J. A., Mason, A., Mayze, L., Sharp, S., & Smith, M. (2016). The Prevalence of Caries Free Deciduous Teeth upon Visual Examination in Kindergarten Settings: A Preventative Approach to Oral Health for Children in a Regional/Rural Community in South-West Victoria. *Journal of Preventive Medicine*.

Gabriel, L. E., Bailey, M. J., Bellomo, R., Stow, P., Orford, N., McGain, F., ... & Pilcher, D. V. (2016). Insurance status and mortality in critically ill patients. *Critical care and resuscitation: journal of the Australasian Academy of Critical Care Medicine*, 18(1), 43.

Rogers, Margaret J., Leigh M. Matheson, Brooke Garrard, Violet Mukaro, Sue Riches, Michael Sheridan, David Ashley, and Graham Pitson. "Cancer diagnosed in the Emergency Department of a Regional Health Service." *Australian Journal of Rural Health* (2016).

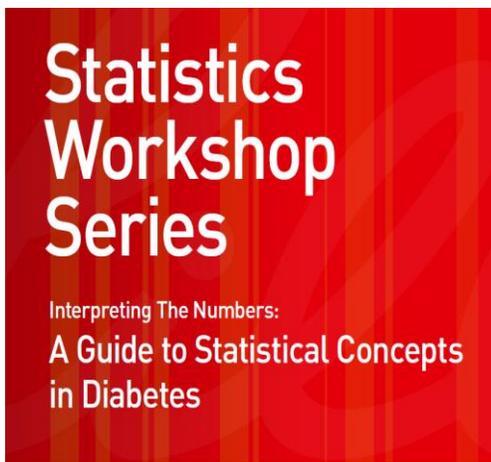
Friedman, N. D., Athan, E., Walton, A. L., & O'Brien, D. P. (2016). Mycobacterium ulcerans disease: Increasing experience with Primary Oral Medical Therapy in an Australian cohort. *Antimicrobial agents and chemotherapy*, AAC-02853.

O'Neil, A., Fisher, A. J., Kibbey, K. J., Jacka, F. N., Kotowicz, M. A., Williams, L. J., ... & Taylor, C. B. (2016). The addition of depression to the Framingham Risk Equation model for predicting coronary heart disease risk in women. *Preventive medicine*, 87, 115-120.

Parsons, S. R., Hughes, A. J., & Friedman, N. D. (2016). 'Please don't call me Mister': patient preferences of how they are addressed and their knowledge of their treating medical team in an Australian hospital. *BMJ open*, 6(1), e008473.

Williams, L. J., Pasco, J. A., Mohebbi, M., Jacka, F. N., Stuart, A. L., Venugopal, K., ... & Berk, M. (2016). Statin and Aspirin Use and the Risk of Mood Disorders among Men. *International Journal of Neuropsychopharmacology*, pyw008

Upcoming Education and Training



Lilly | DIABETES

Session Two: Subgroups, 1st June, Lecture Theatre, HERB Building

Session Three: Real World Evidence, 21st September, Lecture Theatre, HERB Building

Session Four: Endpoints and Analysis Methods, 23rd November, St Marys Building

Each session involves a 45 minute presentation with a 15 minute Q&A session.

Details to follow

ARCS TRAINING

Pharmacovigilance

An Introduction to Pharmacovigilance - A Theoretical Approach

Melbourne-27th April 2016

Pharmacovigilance in Practice - The Pharmacovigilance

Professional
Melbourne-18th May 2016

Clinical Research –

Applied GCP Training for Clinical Research - ARCS GCP Refresher Training for Investigational Sites Investigational Sites and Sponsors ([Full Programme](#))

Research Workshops

<http://www.arcs.com.au/events/event-listing>

Barwon Health training workshops

see <http://library.barwonhealth.org.au/c.php?g=21792&p=2970719>

The Centre for Nursing and Allied Health Research

Workshop 2

Research and vulnerable people: who are vulnerable people?

Thursday 16th June 2016

9 to 11 am Presenters: Prof Trisha Dunning, Dr Giuliana Fuscaldo

Next BH HREC Meeting

11th May 2016

(Submission date 27 March 2016)

For all 2016 calendar dates go –

http://www.barwonhealth.org.auRRC_HREC_Meeting_Dates_2016.pdf

MJA Poll

Would you report an impaired colleague to AHPRA?

Choices

Yes

Only if I thought there was a danger to the public

No

Vote [here](#)