

TRIBUTE



Newsletter of the Gallipoli Medical Research Foundation

Spring Edition 2018

New clinical trial brings hope to patients



Learn more about Mental Health First Aid

We shine a light on Australia's hidden health crisis



Gallipoli Medical Research Foundation is supported by -

 **Greenslopes Private Hospital**
Part of Ramsay Health Care

TRIBUTE



The Tribute is where we share our good news stories and aim to demonstrate the impact of your support. I am incredibly fortunate to work with researchers who are determined to understand the causes and consequences of life-altering diseases like liver disease, PTSD and cancer. They're dedicated to investigating innovative treatments and improving existing models of care. Alongside them is a team of fundraisers and support crew who work with you to raise funds to progress this important research.

But we don't know what we don't know. Accompanying this edition of the Tribute is a short survey on your experience of GMRF. Please share with us 'the good, the bad, and the ugly' so we can learn how to serve you better. To provide your feedback, complete the questionnaire in hard copy format, or hop online and have your say at bit.ly/GMRF-Survey2018

Thank you for continuing to support GMRF. I am very proud of what we have achieved together, I hope you are too.

Miriam Dwyer - GMRF CEO

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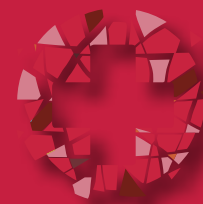
Research at Gallipoli Medical Research Foundation with Dianne (right) with Nish Santrampurwala,



Gallipoli Medical Research Foundation

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Liver Research Update



Shining a light on Australia's hidden health crisis

Fatty liver disease is the big health crisis hardly anyone is talking about. One in four Australian adults has, or will develop, fatty liver disease. It is an issue that will only worsen if this insidious disease continues to fly under the radar.

Fatty liver disease involves an abnormal accumulation of fat, causing inflammation, scarring and an increased risk of liver cancer. Previous research has shown that fat cells, iron and insulin are all major players in the disease, but the exact nature of their influence on each other has confounded researchers – until now.

Thanks to the support of our generous donors, the GMRF Liver Research Unit is contributing to global understanding of fatty liver disease through research conducted by Dr Laurence Britton as part of his GMRF funded PhD project.

Dr Britton has discovered a pivotal mechanism by which iron is able to make the liver more vulnerable to the

injury and metabolic dysfunction that precedes the disease. He found that iron reduced the availability of the protective hormone ApoE, which is involved in fat regulation and insulin resistance.

He said this finding provided another clue as to why obesity and type II diabetes are significant risk factors for non-alcoholic fatty liver disease, and gave researchers a target for future therapeutics.

“Currently there is no standard treatment for the disease, with doctors instead treating the underlying conditions such as obesity and diabetes,” he said.

“Understanding the modulating role of iron gives us a definite starting point from which to map the development of fatty liver dysfunction.

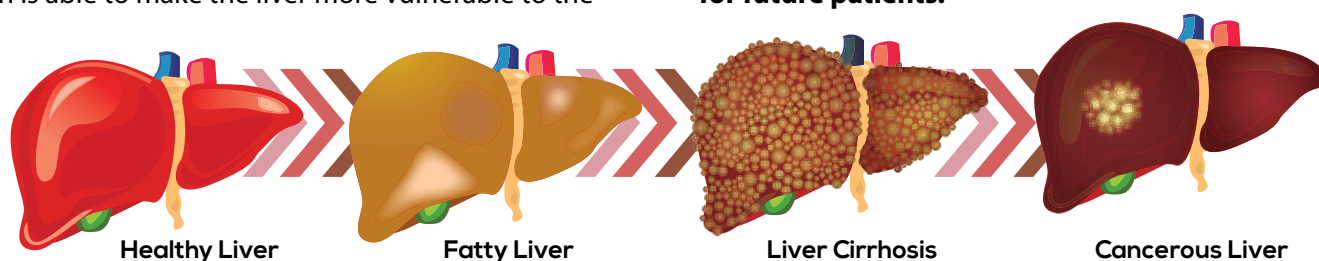
“Each element of dysfunction provides an opportunity to develop a new treatment to block the process and prevent disease progression.”

Dr Britton has now completed his PhD and had findings published in a number of prominent scientific journals. GMRF Director of Research Professor Darrell Crawford believes these findings equate to an important step in combating a deadly time bomb that affects an estimated 5.5 million Australians.

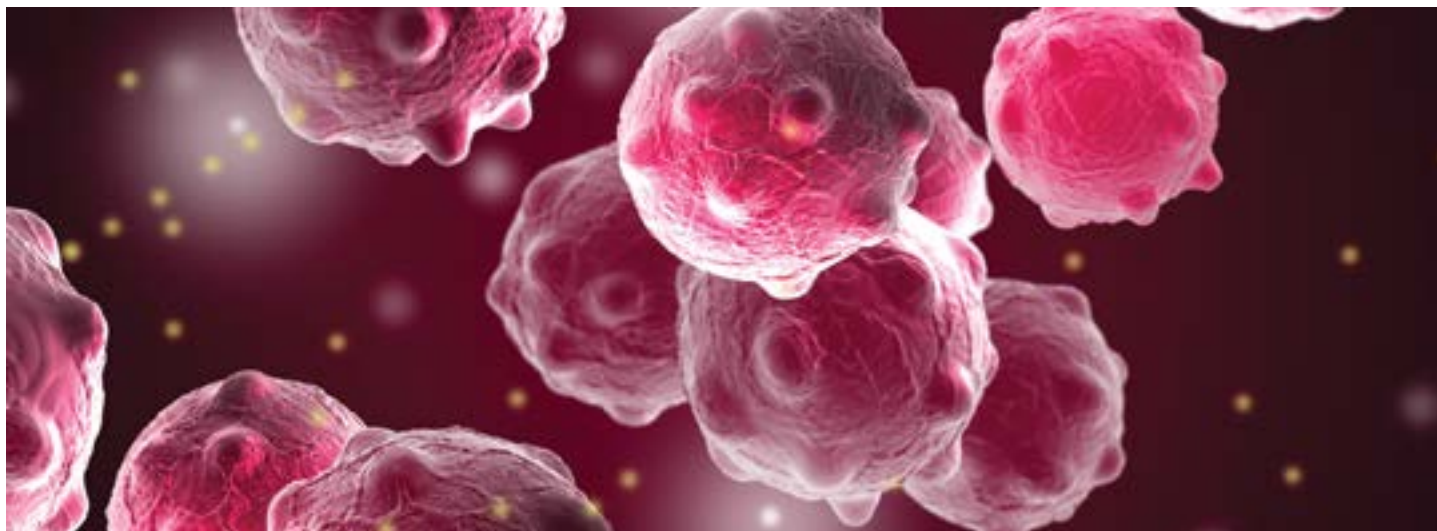
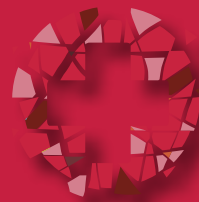
“With our growing obesity epidemic and no known cure for non-alcoholic fatty liver disease, an increasing number of people are sitting on a silent killer,” Prof Crawford says.

“There may be symptoms such as fatigue, pain or weight loss – or no symptoms at all. The sufferer may not be aware that they have the disease until it has progressed to liver cirrhosis or liver cancer.”

This research is vital to creating solutions, and it would not have been possible without the generous support of our donors. When you donate to our liver research you are contributing to further understanding, and ultimately improved treatments for future patients.



Liver Cancer Research Update



Striking liver cancer earlier

For many liver cancer patients, there is an all too common thread - late stage diagnosis. By the time you notice the signs and symptoms, the cancer may be in an advanced stage and the prognosis is grim.

Any form of advanced cancer is not good, but the statistics on liver cancer are particularly bleak. The mortality rate for liver cancer is approximately 85% within five years of diagnosis, a figure which increases to 97-99% if the cancer has advanced to metastasis, which is when the tumour spreads to other parts of the body.

The consequence of late stage diagnosis is a lower likelihood of success through current treatments, meaning many patients are never even really given a fighting chance. Our Liver Cancer Unit, funded by our generous donors, is working to change this.

As part of a multi-pronged approach to addressing liver cancer, our researchers are developing liquid biopsies; a series of tests to detect cancer at an earlier stage.

These liquid biopsies are non-invasive blood and saliva tests that detect cancer by-products. These cancer by-products have potent clinical utilities as novel biomarkers.

Liver Cancer Unit Head Dr Aparna Jayachandran, believes there is great potential impact of this research considering that an effective method for the diagnosis

and prognosis of liver cancer has not yet been developed.

“Early stages present with no clearly identifiable symptoms, and it can be a great challenge to distinguish early HCC from diseased livers,” Dr Jayachandran says.

The first project involved in this body of work is currently underway, with research aimed at discovering novel biomarkers - unique signatures - that can effectively and reliably detect cancer cells. The team aim to use these unique signatures in diagnosing liver cancer at an early stage, monitoring recurrence and treatment response in patients.

“This research is still in its early stages,” Dr Jayachandran says, “but it stands to deliver incredible value in a clinical setting. We can save lives through earlier diagnosis.”

Imagine how different that conversation with your doctor could be thanks to this research. With the development of these liquid biopsies, a simple test could detect cancer at a much earlier stage than current methods of diagnosis. This earlier diagnosis would give clinicians invaluable time to get started on treatment, giving you the best chance of survival.

As a GMRF donor, you are making this research possible. Our Liver Cancer Unit does not receive government funding. In order to progress this research to a clinical setting we're going to need a lot more help. You can make a donation to this research at www.gallipoliresearch.com.au or call 07 3394 7284.

A Collaborative Approach



Strengths in numbers in the fight against liver cancer

Liver cancer is the fastest increasing cause of cancer mortality in Australia. Addressing a problem this big requires lot of brain-power, funding and resources.

Last year, we hosted the Hepatocellular Carcinoma (HCC) Liver Cancer Forum 2017 at Greenslopes Private Hospital. It was more than just a coming-together for the sake of academics, it was the beginning of a movement. GMRF Director of Research Professor Darrell Crawford explains;

What was the outcomes of last year's forum?

The forum was about creating an opportunity for genuine collaboration. We've facilitated connections, shared data and resources and begun discussion on a national bio bank of liver samples. Most encouraging has been the establishment of a national network, led by GMRF.

How will this network fight the impact of liver cancer?

This is a national unified effort aimed at putting liver cancer on the agenda. We've got clinicians and researchers who have been working together for years. The trust has been built, now it's about bringing everything together; sharing what we know and working together to develop and promote emerging therapies.

What is the public perception of liver cancer?

Nobody is really talking about liver cancer and there is little public education. There's still the stigma associated with it being solely a 'lifestyle' illness, eg. due to excessive drinking or poor diet. Liver cancer is increasing at a faster rate than other cancer and the prognosis has hardly changed in 25 years, yet it doesn't get the air-time compared to other types, like breast or prostate cancer.

What's the next step forward?

It's still early days, but we have a clear vision for this network and the HCC Research Workshop. We plan to develop community campaigns to increase public awareness of liver cancer and we want to develop screening methods to better predict those who are most at risk. We know that fields progress when experts collaborate and the public perception starts to shift - the more we work together, the more momentum gained in the fight against liver cancer.

To find out more about GMRF's Liver Cancer Unit visit www.gallipoliresearch.com.au or call 07 3394 7284.

The 2018 HCC Research Workshop is proudly supported by -



Supporting patients on their most difficult journey

In combination with research into life-saving new cancer treatments for future generation, we're also committed to lessening the burden of this devastating illness for patients and their families right now. The GPH Cancer Wellness Program, made possible by our generous donors, continues to expand, providing practical support and advice to cancer patients, their carers and families.



Lynette and John with Program Coordinator Rane Saffioti

“My name is Lynette and I am the carer for my husband John, who has T Cell Lymphoma. John started treatment at GPH in July 2016 after two years at Sunshine Coast Public Hospital.

I was invited to a Wellness Carers meeting which I found helped a lot. Having a loved one with cancer is both frightening and lonely and this meeting (education session) made me aware that we are not alone and that there are many avenues out there that

can help. The nurses here are amazing, always available to help where needed. We live 130kms away and we were going to see if our doctors could arrange closer treatment but after going to the meeting (education session) we have decided to keep having treatment here as both of us feel safe.

I would like to thank the nurses and staff for looking after both of us really well. Hopefully there will be more meetings (education sessions) for us to attend.”

Program Update

Rane Saffioti | Program Coordinator

Since the Cancer Wellness Program commenced 18 months ago it has grown to reach 172 members, with 39 new members since January 2018. This year we introduced two new topics to the free monthly education sessions for patients, carers and their support network. Feedback and numbers from these sessions have shown they were very helpful to participants. The size of the group attending these sessions varies from 30 attendees to 6 attendees. These smaller and more intimate groups allow for a more personal approach which is important for topics such as Talking to Kids about Cancer.

The 2018 program began in February with a session on Financial and Legal support. In April we ran a Survivorship Workshop in conjunction with Cancer Council Queensland, which was complemented by a Palliative Care session in June. The Survivorship Workshop was popular with 19 participants

nominating to attend after they received a Survivorship Discharge Pack. These packs have helped 48 patients and carers feel supported post cancer treatment just this year.

We are currently looking at ways to improve the program, including creating a website to provide information to patients and connect them with the cancer wellness support available across the state. Moving forward we hope to collaborate with the Ramsay Health Plus Program which will offer onsite services such as: exercise physiology, occupational therapy, lymphoedema treatment and speech pathology.

It is such a privilege to co-ordinate the program in the knowledge that the support we offer patients empowers better outcomes. Without the GMRF and its generous donors, this Cancer Wellness Program would not be possible. THANK YOU!

You can help provide ongoing support for cancer patients and their families. Visit <http://bit.ly/GMRF-CancerWellness> or call 07 3394 7284 to make a donation.

Do you need an Enduring Power of Attorney?

In this article, the top four questions about Enduring Powers of Attorney are answered.

What is an Enduring Power of Attorney?

An Enduring Power of Attorney is a document in which you appoint one or more people to make decisions on your behalf. "Enduring" means that the power of the persons appointed (known as the Attorneys) continues even if you lose the capacity to make decisions for yourself.

The types of decisions an Attorney can make are divided into two categories, financial matters and personal/health matters. Financial matters include operating your bank accounts and buying or selling real estate. Personal and health matters include medical decisions and lifestyle decisions such as where you live.

Who should I appoint as my Attorney?

You can choose who to appoint as your Attorney. You should appoint someone you trust, for example, a loved one or a trusted advisor such as your accountant. You can appoint more than one Attorney. You can also direct how your Attorneys are to act, for example, jointly, separately, by majority or successively.

What is the difference between a Will and an Enduring Power of Attorney?

A Will is a document that comes into effect after you have passed away. An Enduring Power of Attorney is a document that operates during your lifetime and ceases to have any legal effect once you pass away. The two documents, therefore, have different purposes.



Both a Will and an Enduring Power of Attorney are important estate planning documents to have in place.

Sometimes, but not always, the persons appointed as the Attorneys in the Enduring Power of Attorney might also be appointed as the Executors under the Will.

What happens if you do not have an Enduring Power of Attorney?

If you do not have an Enduring Power of Attorney and you lose capacity to make decisions for yourself, an application may need to be made to the Queensland Civil and Administrative Tribunal for the appointment of an administrator for your financial affairs and a guardian to look after your personal/health affairs. This could be a lengthy and expensive process and might result in people being appointed who you would not have chosen.

Contact us

If you have any questions about Enduring Powers of Attorney, please contact one of Thynne + Macartney's Wills and Estates Specialists.

Ashleigh Poole P: 07 3231 8880

E: apoole@thymac.com.au W: thymac.com.au

If you would like to have an obligation-free chat about supporting GMRF in your will, contact Sharon Wood, GMRF Community & Bequests Coordinator on 07 3394 7508 or woodsharon@ramsayhealth.com.au

In addition to supporting research, Thynne + Macartney has contributed to a range of GMRF activities such as event support and funding of the Innovation Grants program. We are delighted to have had the opportunity to acknowledge Thynne + Macartney's contribution through the well-deserved awarding of SME Philanthropist of the Year as part of Queensland Community Foundation's Philanthropy Week 2018.



Run for Remembrance



Register at
Redrun.com.au

5km
10km
RUN OR WALK

SUNDAY
4TH
NOV
2018

Run or walk to change lives
through innovative medical research.
Run or walk to remember.

Remembrance Day is always a meaningful and sombre occasion, but this year it will hold extra special significance. At 11am on November 11, we will pause to remember the brave men and women who made the ultimate sacrifice for us, exactly 100 years on from the end of the First World War.

We believe that to truly honour this sacrifice, ours must be an active remembrance. The Red Run was borne out of this belief. Now in its second year, this event is a fun and worthwhile day out for the whole family. Held at the Kedron-Wavell Services Club, the Red Run includes a 5km

or 10km course for you to run, walk or jog, and a gun-fire breakfast after the race to spur you across that finish line!

Make the most of the event by getting a team together and signing up to fundraise for GMRF's research. The first 500 participants to raise over \$250 receive a Red Run T-Shirt. **Visit www.redrun.com.au to sign up now.**

Special thanks to event sponsors Kedron-Wavell Services Club, Kedron-Wavell RSL Sub-branch, Rotary Club of Carindale, Ord Minnett and Red Radiology. Contact GMRF on 07 3394 7284 to discuss sponsorship opportunities.



Tackling veteran homelessness



From the RSL News Desk

One of the most fundamental needs we have is for a roof over our heads, but, sadly, some veterans are lacking just that. With some estimates indicating there are approximately 400 homeless veterans statewide, RSL Queensland has partnered with The Salvation Army to make sure Queensland's veterans have somewhere safe to call home.

Since launching in late 2017, RSL Queensland's homelessness program has helped 94 veterans find secure, stable accommodation. RSL Queensland State Secretary and General Manager Operations Scott Denner said the partnership had allowed RSL Queensland to provide the best possible assistance to veterans in need.

"Sometimes the best way to help our Defence family is to work with an organisation that is an expert in providing complementary services – in this case, The Salvation Army," Scott said.

"But stable accommodation is only part of the solution. By combining our experience and expertise with that of The Salvation Army, we can tailor solutions to each

veteran's unique circumstances and focus on overcoming the root causes that have led to them becoming homeless."

To that end, RSL Queensland has adopted a case management approach, linking veterans with medical, financial and other assistance to get their lives back on track. It supports homeless veterans with up to four weeks of emergency accommodation in suitable premises, payment of the bond on new rental accommodation, help with buying clothing and other essential items, and payment of immediate medical expenses, including primary dental care.

The program isn't limited to veterans living rough on the streets. It also aims to reach veterans who do not have access to stable, secure accommodation or who are moving between short-term lodging options.

"They may be couch surfing or living in their car, staying with family, or living somewhere unsuitable like a squat or illegal campsite," Scott said. "And while our initial focus is on finding veterans a home, we also want to help them create stability and an environment where they can thrive, not just survive."

Mental Health First Aid Training

In the event of a medical emergency, response time is critical. We understand the urgency of treating physical injuries and the value of first aid training, but what if it's not the body that's injured?

We know there is a significant proportion of Australian veterans who experience a mental health concern. As part of an ongoing senate inquiry into the transition from military to civilian life, it was revealed 46% of veterans reported some form of mental health issue after discharging from military service. These include anxiety, depressive disorders, substance abuse disorders and posttraumatic stress disorder (PTSD).

International research indicates these conditions not only affect veterans, but have also been found to negatively impact veterans' family members such as partners, children and parents. What's more, partners and other family members of veterans often take on a carer role.

GMRF's Veteran Mental Health Initiative has identified the important role family members play in a veteran's mental health and has launched Mental Health First Aid Training (MHFA) to enhance veteran family support.

Funded by Medibank's Mental Health and Wellbeing Fund, the project equips families of veterans with information and techniques to understand common mental health issues. It also provides knowledge about available resources and ways to access professional help.

Veteran Mental Health Initiative Researcher Clinical Psychologist Dr Justine Evans coordinates the project and delivers training to participants. She believes equipping and engaging the family in providing support can play a significant role in contributing to a positive reintegration

experience, particularly in instances where a veteran may be reluctant to seek out help.

She notes "At almost one in two veterans reporting a mental health concern since discharge, this is an issue that is impacting a lot of families. There are a number of reasons why veterans often don't seek out help, including shame and fear of judgment and stigma.

"Once we have the skills to recognise when someone is struggling and have the confidence that comes from proper training, we can talk to the person and point them in the right direction to get help," Dr Evans said.

MHFA is a nationally recognised program developed in Australia and used by some veteran services overseas. It helps family members recognise when someone may be developing a mental health problem, or is experiencing a worsening of an existing mental health problem or are in a mental health crisis. The courses provide practical skills to family members who are then more able to make a supportive impact in their veteran's life.

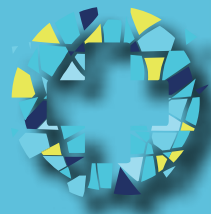
The training aims to address the widespread lack of knowledge surrounding mental health. It teaches participants about general mental health, chronic psychological conditions, behavioural warning signs of distress, and provides information on referring persons to appropriate mental health services.

"This training is certainly not a substitute for professional help, rather it is a 'first step', facilitated by family members or other trained individuals, to direct and guide veterans towards the appropriate avenues for addressing mental health issues," Dr Evans says.

For more information about the Mental Health First Aid Training, or to get involved, visit:



<https://survey.websurveycreator.com/s/MentalHealthFirstAid>



GMRF has undertaken this project to investigate the utility of MHFA training for families, providing an evidence-based appraisal of the reported benefits and outcomes. **The 12-hour program, delivered over two days at Greenslopes Private Hospital, provides participants with:**

-  Skills in how to **recognise the signs and symptoms** of mental health problems
-  Knowledge of the **possible risk factors** for these mental health problems
-  Awareness of the evidenced-based medical, psychological and alternative treatments available
-  Skills in **how to give appropriate initial help and support** someone experiencing a mental health problem
-  Skills in how to take **appropriate action if a crisis arises.**

If mental illness is impacting your life, then you may have experienced firsthand the lack of acknowledgment and support mental health issues often receive. While more professional services are required, we can all play a role in addressing this issue.

This project is made possible by Medibank's 'Mental Health & Wellbeing Fund'.



MENTAL HEALTH FIRST AID ACTION PLAN



MENTAL
HEALTH
FIRST AID
Australia

- A**pproach, assess and assist with any crisis
- L**isten and communicate non-judgmentally
- G**ive support and information
- E**ncourage appropriate professional help
- E**ncourage other supports

Visit www.mhfa.com.au to find your nearest course



Reintegration Study Update

Earlier this year we launched Phase 2 of our Veteran Mental Health Initiative Reintegration Study. This project is investigating the psychological adjustment process from service to civilian to enable more effective assessment and interventions.

Following on from what was, at that time, the largest qualitative research done on transition in Australian veterans, Phase 2 aims to analyse the effectiveness of a screening tool developed in Phase 1 to identify veterans at risk of poor transition.

We have already had almost 400 veterans participate in Phase 2 of the study, which will soon be expanded to include currently serving personnel.

To find out more about this study, or to participate, visit:

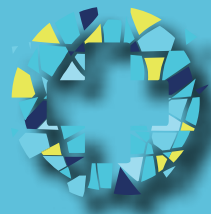
<http://bit.ly/GMRF-reintegrationstudy>

This project is made possible by -



RETURNED & SERVICES
LEAGUE OF AUSTRALIA
PERTH AND BLANCH

Compassionate Mind Therapy



Researching the healing power of compassion for veterans

When you think of compassion it might be in terms of a vague concept of kindness or caring, but there is growing evidence to suggest there is significantly more science behind this powerful emotion.

Thanks to Medibank's 'Mental Health & Wellbeing Fund', our Veteran Mental Health Initiative is using compassion therapy to improve the adaptive coping skills of veterans struggling with posttraumatic stress disorder (PTSD).

GMRF will trial the use of Compassionate Mind Training for veterans and their partners in what will be the first study of this approach to involve partners. Compassionate Mind Training is a skills building off-shoot of Compassion Focused Therapy (CFT), which was developed specifically for individuals with high levels of shame and self-criticism.

CFT has been used to reduce distress symptoms in a variety of psychological and medical conditions. It has also been shown to increase measurements of life satisfaction, happiness and immune functioning.

GMRF Clinical Psychologist and project researcher Dr Sarah Hampton is investigating whether quality of life, relationship satisfaction, PTSD symptom severity, and psychological distress symptoms will improve as a result of participating in this pilot study. Groups will participate in two sessions per week for six weeks, learning strategies to calm highly charged emotions and engage feelings of warmth and self-reassurance.

"If a veteran feels they do not deserve self-care or kindness this can be a significant block to PTSD recovery," Dr Hampton says.

"We want to cultivate an attitude in veterans and partners that says I'm worthy of compassion."

A crucial feature of the GMRF pilot study is the involvement of the partners of the ex-serving personnel who themselves report high rates of mental health challenges. From her clinical experience, Dr Hampton says while veterans may be reluctant to seek professional help, many have a strong desire to learn more ways to connect emotionally with their partner.

"Partners undertaking therapy together learn compassionate communication and strategies, they hold each other accountable and help each other when the treatment has finished."

The program includes evidenced-based techniques and strategies grounded within Professor Paul Gilbert's CFT framework. Participants will be educated on the three primary emotion systems;



Threat System –Directs our attention to threatening situations, and motivates us to engage in a response that will protect us.



Drive System – Evokes feelings such as excitement and anticipation to motivate us to pay attention to and pursue resources and opportunities.



Soothing System - provides a source of safety and reassurance, and direct our mind to recuperate from the threat and drive systems.

The evidence on which CFT is based suggests receiving care, affection and support stimulates the soothing system and plays a role in down-regulating the threat system.

This project is made possible by Medibank's 'Mental Health & Wellbeing Fund'.

medibank
For Better Health



<https://survey.websurveycreator.com/s/CompassionateMindTraining>

Leaders in new treatments



GMRF Clinical Trials Unit

Our Clinical Trials Unit has increased its number of active trials over the past 12 months, and the impact it is making isn't going unnoticed.

The Unit facilitates trials in oncology, liver disease and respiratory illnesses, providing patients access to new and emerging treatments for the benefit of all. Currently there are 34 trials in recruitment, dosing or patient follow-up. As the Unit has grown so too has its reputation. The team were delighted to be recently awarded ARCS Favourite Investigational Site 2018, having already received the accolades in 2014 and 2017.

One of the Unit's latest trials is a new injection based treatment for haemochromatosis, an iron overload disorder which affects an estimated one in 200 Caucasians. If left untreated, it can lead to an increased risk of liver cancer, diabetes and arthritis.

The trial is testing a synthetic hepcidin, a protein developed in the US to regulate iron absorption in the stomach. Dianne Titterton from Brisbane is one of the patients who commenced dosing in August.

Dianne was diagnosed with haemochromatosis at the age of 38 in 1983. She's had regular treatments to manage the condition ever since, but the severity continued to worsen. It was earlier this year that she was referred to the GMRF clinical trial.

"I'd just moved from Sydney," Dianne says, "It's the first clinical trial I've been on and it's been really good so far."



Winner and world-leader:

Our Clinical Trials Unit was awarded the 'Favourite Site in Australia' for the second year in a row, and was the first site

world-wide to commence trials on three new treatments in the past 12 months.



Dianne (right) with Nish Santrampurwala, GMRF Clinical Trial Coordinator for the haemochromatosis study.

Dianne has also suffered arthritis as a result of the condition, limiting the mobility in her hands and complicating daily activities. She hopes the trial works for her, but there was an even more powerful motivator;

"The big reason I'm doing this trial is that I want to make treatment for my children and grandchildren as easy as possible," Dianne says.

Haemochromatosis, being a hereditary condition, also affects two of Dianne's children and two of her grandchildren. The good news is that early diagnosis and intervention restores life expectancy to normal rates.

If you have a family history of haemochromatosis we recommend you see your GP to screen for this condition.

To find out more about these trials visit

<http://bit.ly/GMRF-ClinicalTrials>



Our Community

Blair's Tribute

GMRF Discovery Partner, Blair Smith, is all too familiar with the devastating impact cancer is having in countless lives.

Following a trip to Adelaide in 2010, his wife Joy felt tired and lethargic. She went to a doctor thinking she had a virus, but was diagnosed with cancer and started on treatment and blood transfusions at Greenslopes Private Hospital (GPH) almost immediately. After diagnosis in November 2010, Joy passed away in February 2011.

The impact of cancer didn't stop there. Blair also lost his two brother-in-laws' and his sister to cancer, he has also fought the illness at various stages of his life.

"I've had to think about cancer a lot over the years. I've had bowel cancer, skin cancer and melanoma," Blair says. "You can be healthy one day and then not the next."

Blair gives to cancer research in the hope that others might be saved from going through what he has. When he heard about GMRF and its affiliation to GPH, supporting the foundation seemed to be a fitting tribute



Blair is a GMRF donor and, as of last year, a GPH Care Volunteer - pictured with GMRF Foundation Administrator Maria.

to his wife and the care she received at the hospital.

The impact you make is up to you.

Blair gives to GMRF because he knows his support is directed to where he wants it to go. He's provided seed funding for our Cancer Wellness Program and directly funded a number of liver cancer projects.

"You can direct your gift to a specific project or program that is close to your heart, and have confidence it's making a difference."

The Right Note Cooking up a storm for medical research

There's a range of ways you can get involved in raising funds for medical research. The Right Note, a social group from the Keith Payne Unit at Greenslopes Private Hospital, has pretty much done them all. From shaving heads, hosting plant sales, and recording and selling their own album, the Right Note are now taking to the kitchen with their very own cook book.

In the Kitchen with The Right Note and Friends features tasty recipes and heart-warming yarns on fond memories and the power of good food in bringing people together. To purchase your copy of the cook book, contact GMRF on 07 3394 7284. It would also make a great present!



Keith Payne Unit's The Right Note at music practice

Spreading the word



Ken McDonald playing his tunes at the Pinnacles in Western Australia

Awareness of GMRF's work is spreading to the far reaches of the country thanks to singer-song writer and loyal GMRF donor Ken McDonald.

The country-rock singer has produced 10 albums, and used his music to fight the impact of cancer, an illness that has been part of his journey on multiple fronts.

Ken's wife Heather lost her battle with melanoma in 2016. She was the third wife of the six McDonald sons to die from cancer.

"I know the value of research," Ken says, "thanks to medical science she (Heather) lived for another 33 months. We were given precious time and it allowed Heather to enjoy her life and helped our family cope."

Recently remarried, Ken and his wife Sharon are caravanning around Australia, stopping along the road to perform at caravan parks and other local gigs.

"Some people almost run over when I start playing. When I tell them about the cause and what I'm trying to do with my music they're basically in raptures. I describe my style

as upbeat country-rock, and it's great to see kids and young families get up and dance to the music."

Ken donates 100% of his album proceeds to GMRF. Since his fundraising began in 2014, Ken has raised over \$5,000 for our medical research, meaning his significant contribution will now be recognised on our Discovery Partner Honour Board at Greenslopes Private Hospital.

As well as liver cancer research which has translational benefit for treatment of other cancers, GMRF is also conducting a number of clinical trials into new metastatic melanoma treatments.

Because of GMRF's trials, in combination with others, new melanoma treatments are now available on the Pharmaceutical Benefit Scheme (PBS). It is thanks to these advances that prognosis for advanced stage melanoma is now usually measured in years, rather than months, but there is still more work to be done.

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