# THIS IS YOUR TRIBUTE

Newsletter of the Gallipoli Medical Research Foundation

**Autumn Edition 2021** 



Ground-breaking new tool helps veterans transition to civilian life.

Innovative research progressing from benchtop to bedside.

GALLIPOLI MEDICAL RESEARCH FOUNDATION Remembrance through research

Clinical trials and support initiatives helping patients right now.

# Message from our CEO: Thank you for believing in the life-changing power of medical research!



We're getting through COVID-19, and we're getting through it together! As I reflect on the progress we are making, I am filled with gratitude for you and your contribution to life-changing medical research.

This pandemic has highlighted why medical research is so important, with dedicated researchers from across the globe bringing life-saving vaccines against COVID-19 to our global healthcare systems in less than 12 months! It shows you what can be achieved when people come together in unified effort, and you can certainly see that in action in the GMRF community!

Despite the challenges of last year, our team and the scope of our research continue to grow. Here's just a snapshot:

- Five new members have joined our Veteran Health Initiative team and we've launched a new tool,
   M-CARM, from our reintegration research to improve the transition experience for our veterans.
- Two of our Liver Research Unit PhD students near completion on their projects. Both have published findings with clear translational benefit for liver cancer patients and liver transplant recipients.

- Prof Rachel Thomson, who leads our Respiratory
  Research Unit was awarded a prestigious Queensland
  Advancing Clinical Research Fellowship. She's also
  launched a world-first trial into a system to improve
  treatment for patients from the comfort of home.
- Our Clinical Trials Unit launched further studies and expanded into gastric and other rare cancers.
- The Cancer Wellness Program at Greenslopes Private
  Hospital continues to offer its vital services (needed
  now more than ever!) with a blend of online and inperson activities for patients and their loved ones.

Our work is people-powered. Powered by you, our wonderful supporters who make it all possible. Powered by the brilliant, multi-disciplinary team across research, clinical trial and administrative departments, with everyone performing their work with commitment and passion. And powered by a dedicated and eminent Board of Directors that guide the Foundation in its mission and vision.

I am delighted to announce two new members of our Board of Directors. Rob Skoda, General Manager of Veteran Services, RSL Queensland, and Stephen Gray, Professor of Finance at the University of Queensland Business School and Chairman of Frontier Economics. Both come with a wealth of knowledge and experience in their fields, and will no doubt contribute to strengthening the Foundation and increasing the impact we make together.

Thanks again! I look forward to keeping you updated on how you are changing lives in 2021. Enjoy your Tribute!

**Kind Regards** 

Mikiain Suye

**Miriam Dwyer** Chief Executive Officer

We would like to congratulate Board Director and former Chairman, Mr Tom Ryan, on being awarded the Medal of the Order of Australia for his contribution to medical research and Rugby Union.

A pharmacist by profession, Tom has seen firsthand advances in treatments, and he knows the long journey of medical discovery that goes into getting new medication on the pharmacy shelf. With his professional experience and passion for research, Tom has played a key role in the foundation's direction and in doing so is making a lasting contribution to a future where we can better predict, treat, and prevent serious illnesses.



GMRF Director recognised for contribution to medical research with OAM



# Taking the first step back into civilian life

We know veterans may struggle with transition from service to civilian life. GMRF's veteran health research highlighted the fact that veterans experience a profound sense of loss of purpose when they leave military service.

Simon Payne spent six years as a Trooper in the Royal Australian Armoured Corps, with a deployment to Afghanistan in 2011. He has gone through the transition process, and he knows the risks and the difficulty of taking

"We tend to bottle things up, and if that bottle explodes it can be disastrous."

the first step towards getting support. Simon recently shared his story to help promote the importance of GMRF's research and our ground-breaking new tool aimed at helping to improve the transition experience for our veterans.

I transitioned from Defence in January 2013. The first six months were really hard for me. It was a huge adjustment leaving the structure and the discipline of the military. When I was back in civilian life, it was very strange not having people following me up or having to do things a certain way.

In the army, you get told what your purpose is. Getting

out, I had to retrain my thinking. You've got to give yourself purpose and make decisions for yourself.

For a lot of us veterans, there can be an 'I'm all good' attitude and downplaying of problems. We tend to bottle things up, and if that bottle explodes it can be disastrous. The first step to recognising you've got a problem is to be able to look within yourself, but that can be very hard to do.

That's why GMRF's research and their new adjustment tool, M-CARM resonated with me. Assessing what you need is the crucial first step, and this tool can get veterans going in the right direction.

Turn over the page to read more about our new M-CARM tool and how it will help veterans like Simon to get the support they need as they make the transition from service to civilian life.



# Targeted support for the transition to 'Civvy Street'

Every veteran will have their own unique experience of military service, and the same goes with the process of transitioning out. While one may struggle with finding new purpose, another might have difficulty building meaningful relationships with civilians. There is growing understanding of the difficulties with transition and the need for appropriate support. But how do you know what the best support is for each individual?

Our Veteran Health Initiative team has developed a ground-breaking new tool that will help measure adjustment and reintegration to civilian life following military service. The tool will identify areas of need that can be targeted to support veterans to make the most of life after service.

GMRF Associate Director of Mental Health Research, Dr Madeline Romaniuk, has seen a full range of transition experiences first-hand. While working as a clinical psychologist with veterans she observed that many veterans struggled to adjust to civilian life, while others seemed to transition without difficulty, but there was no research available explaining why.

"For some, the journey from military service to civilian life can be a daunting prospect. 'Civvy Street' may seem at odds with the culture and familiar structure of Defence and can leave some veterans feeling a very real sense of loss. More than just a job, they lose their tribe, their purpose and their identity all at once. It's little wonder reintegration to civilian life has been recognised as a period of increased risk for the development of psychological disorders," Dr Romaniuk said.

To find solutions, Dr Romaniuk and her team undertook a comprehensive research study to determine what goes into a successful and mentally healthy transition. The Service to Civilian Life Study, conducted in partnership with RSL Queensland, is the largest qualitative study into the transition experience of Australian Veterans.

Dr Romaniuk and her team conducted over 180 hours of interviews with

veterans, partners and health professionals. By better understanding the lived experience of veterans, the team were able to identify key themes important to transition.

With the support of RSL Queensland, GMRF has translated these findings into a world-first, self-reporting tool called the M-CARM (Military-Civilian Adjustment and Reintegration Measure).

The M-CARM highlights five factors as most important to psychological adjustment and reintegration:

- purpose and connection
- help seeking
- beliefs about civilians
- resentment and regret
- regimentation

These factors encompass the sense of loss veterans may feel and target cultural and psychological issues that may arise during and after the transition process.

The M-CARM was launched in December 2020 and has already



been accessed by over 150 veterans, health providers and researchers to help determine how a veteran may be adjusting and reintegrating, as well as identifying areas of need.

"When developing this research, it was vital that the end product was a tool readily accessible for veterans,"

Dr Romaniuk says. "It takes just five minutes to complete and it provides an immediate report. It highlights areas you may be doing well in and outlines where you might benefit from some extra support."

With the partnership of RSL Queensland, GMRF continues to

progress research to develop evidencebased real-world solutions to enhance the quality of life for our veterans and their families.

To find out more about the M-CARM, take the survey or send the link to a veteran in your life, visit: <a href="https://www.M-CARM.org">www.M-CARM.org</a>.

### Stronger together: partnership grows in 2021

Part of the success of the GMRF Veteran Mental Health Research Initiatives has been the incredible partnership we've had with RSL Queensland since 2012. It is a partnership that continues to provide positive outcomes for veterans and their families.

In 2020, GMRF and RSL Queensland signed yet another agreement, committing to the continuation and expansion of the research partnership for another five exciting years.

Together, we will continue to work to enhance the transition process, we will seek to understand and address the link between mental health and physical health, and we will expand our research endeavours to include specific research focusing on the Military Family.

Collectively and collaboratively, GMRF and RSL Queensland will work tirelessly to deliver improvements in the quality of life for veterans and their families.



RSL Queensland General Manager of Veteran Services Robert Skoda said the GMRF partnership delivered valuable insights for shaping the organisation's service delivery.

"Understanding the underlying challenges of transition and reintegration, and the effect these have on Defence families, is critical if RSL Queensland is to provide appropriate and effective services," Mr Skoda said.

"Our partnership with GMRF is a key pillar in our ongoing strategy to ensure a bright future and enduring legacy for all Australian veterans and their families.

"Over the past eight years, we have partnered with them to deliver world-first studies under two key research initiatives, helping us refine the services we deliver and how we deliver them.

"There is limited Australian research into the impact of service on families and how they can successfully address the challenges they face.

"The extension of our partnership with GMRF will build upon our previous research and help us gain a better understanding of the challenges facing veterans and their families."





### "When one person joins, the whole family serves..."

Veterans face health and wellbeing challenges that can extend to their family members, and their social and occupational networks. While there are many services available, gaining access to the right mix of services, at the right time, can be a difficult and frustrating process.

Over the past three years, GMRF's veteran health research focus has expanded to include veteran families. In 2019, the team launched the Families with a Veteran project, led by Clinical Psychologist and Principal Research Fellow, Dr Angela Maguire. She has seen the challenges that some families face when trying to gain access to holistic, family-centred care.

"The Australian health and social care system can be challenging to navigate if you're a civilian. Then you add the Defence, DVA, and ESO systems of care. Some families can get overwhelmed by the care coordination challenges".

"There are experiences related to military service – like combat-related trauma – that place stressors on these families. When you think of the breadth and depth of need that some of these families are dealing with, it is little wonder that problems can get worse over time without the right supports."

Commissioned by RSL Queensland and Legacy Brisbane, the 'Families with a Veteran' project was a collaborative initiative designed to address identified gaps in system integration and care coordination for veteran families with needs that span health, social, and economic concerns.

"It was clear the research was sorely needed," Dr Maguire says. "Families were keen to share their experiences. Agencies are looking for solutions. Everyone has contributed to provide the evidence we need to better support veteran families".

The project developed recommendations for a model of care to guide service delivery for veteran families with complex, multi-agency needs. This focused on:

understanding the health and

wellbeing needs of veteran families;

**Dr Angela Maguire** 

- identifying service access barriers and facilitators;
- detecting unmet needs and gaps in service provision; and
- developing practical solutions for improving service delivery.

"Basically, what is needed is a "no wrong door" approach to integrated care. Ideally, families would be able to make one phone call and trigger a process that would put the all the right supports in place," said Dr Maguire.

Right now, a number of key agencies, including RSL Queensland, Legacy Brisbane, and Mates4Mates are planning a staged implementation of the proposed model of care. These agencies are committed to ensuring that veteran families get the help they need, when they need it, to stop them from 'falling through the gaps' in the service system.

# Real people creating real solutions for our veteran community



With the support of RSL Queensland and our incredible community of supporters, our Veteran Health Initiative team is growing rapidly. This multidisciplinary team of clinicians and researchers are working on developing innovative solutions to the major health and wellbeing issues affecting our veterans and their families. Over the past 12 months, we've had some wonderful new additions to the team we'd like you to meet!



Hi! I'm Dr Rebecca
Mellor, a Senior
Research Fellow who
joined the team in
March 2020. My
focus is on the quality
use of medicines
among veterans with
PTSD. This research
aims to provide a
basis for education
for prescribing
clinicians, as well as

for veterans in terms of awareness for self-management of their medications. We've also just begun a project on dietary interventions for the management of chronic pain. The ultimate goal is to design a dietary intervention that can be used as a component of a holistic approach to management of veterans with chronic pain. I love my job because I work with a great team and I get to help translate research findings into improved quality of health management.



Hello! I'm Dr Emina Prguda. I joined the team as a Research Fellow in January this year. I'm working on a sub-study of the Veteran Sleep Therapy Study, which investigated novel techniques for improving sleep quality for veterans with PTSD. The aim

of the sub-study is to examine the perspectives of veterans and sleep therapy facilitators. Finding the best treatment approach, that veterans view as acceptable and want to engage in, may have significant benefits to physical and mental health outcomes. I am inspired to conduct research at GMRF because the research has real-world impact. GMRF assesses key needs and aims to find solutions that will meaningfully benefit veterans and their families.



Hi! I'm Dr Ben Singh.
I joined the team
in October last
year as a Research
Officer. I am working
within the Transition
& Reintegration
Research Program,
particularly focussing
on assisting with
the Veteran
Reintegration
project. The aim

of this project is to develop and provide a program that will help veterans transition into civilian life after discharge from the military. A reintegration program can help to lessen the substantial burden of mental illness and negative psychosocial outcomes in the veteran community that occur during the transition to civilian life. I am proud to contribute to research that will directly benefit our veterans and create solutions to serious health issues.



Hi there! My name is Elise Saunders-Dow, I've been working as a Veteran Health Research Assistant since January last year. My main work is within the Quality Use of Medicines stream, specifically looking at psychotropic

polypharmacy in patients with PTSD (the use of multiple medications to treat mental health concerns). Taking multiple medications can sometimes cause issues, such as harmful interactions between drugs or drugs and medical conditions. It is exciting as we are almost finished with the data collection stage and are on to the data analysis. I love to learn, so coming to a place every day that allows me to do so, and help people at the same time, really motivates me!



As we progress our research, we know discovery of new treatments is only half the battle – early detection is equally, if not more important. Even here in Australia, some areas will have better access to detection and treatment than others.

In regional areas of Australia there is a need for better screening and diagnosis of serious health issues like fatty liver disease and liver cancer.

PhD Candidate Lucas Trevisan Franca de Lima is exploring a novel way of detecting liver injury through the use of a saliva-based screening test in an effort to prevent progression of cirrhosis which can lead to liver cancer.

"Patients in big cities generally have access to a Fibroscan machine which can detect liver injury. But at a cost of \$200,000 this machine is quite hard to come by in smaller towns, regional areas and Indigenous communities.

"Cirrhosis is a silent disease. There is a very long period where the disease progresses before noticeable symptoms are present. It means if you don't have access to early diagnosis

then chances of survival are definitely

reduced," Lucas says.

Lucas has recently published his first paper, a literature review summarising existing research and identifying gaps in the current understanding on the use of biopsies to detect liver injury.

"There is a major gap in early detection. At present there is a tissue or biopsy screening. There is no validated saliva test that is being clinically used for the diagnosis of liver disease. It's a fairly new field of research and no one is really looking into it" Lucas says.

The use of saliva as a diagnostic tool has a number of benefits over blood samples. It's more stable and can be frozen for long periods of time and remains suitable for analysis. It also doesn't require a trained nurse; you could take the sample yourself.

"After validating the screening tool, I hope it will be rolled out on a big scale and reach the point where it can make a difference in patient care," Lucas says.

As part of the pilot study and to refine the screening tool, Lucas has worked with patients directly in hospitals and clinics throughout Brisbane.

"It is devastating to see people who are in a bad way because of this disease. I've always worked in the labs, so it is challenging to see the impact of the disease firsthand, but it's also very motivating. It is clear to me we need to have a better way to deal with liver cancer than we do now," Lucas says.

Lucas's project is undertaken in collaboration with QUT and receives generous funding from the John & Wendy Thorsen Foundation.



# Boosting the immune system to fight bile duct cancer

Right now, there are very few treatments for bile duct disorders and cancer of the bile duct (cholangiocarcinoma).

Published research on these disorders is limited and there is a significant need for improved understanding in order to advance effectiveness of current treatments and find new ones.

Recently, GMRF's Liver Research Unit expanded the scope of its work to investigate bile duct disorders and cancer, but they certainly didn't start from scratch. The projects are investigating ways to fight these disorders based on the team's work in hepatocellular carcinoma (HCC), primary liver cancer.

Lu Cao, a Research Officer in GMRF's Liver Research Unit since 2018, says the project came about to address the urgent need for better bile duct cancer treatments, particularly as the disease is often resistant to chemotherapy.

"There are regulators which block the immune cells from recognising and killing the cancer cells. We believe if we target these regulators, we can boost the effectiveness of chemotherapy in combination with immunotherapy," Lu says.

Lu's work focuses on three key elements to target bile duct cancer.

- Understanding the differences between how bile duct and liver cancer stem cells behave to inform treatment selection.
- Investigating methods that will improve the effectiveness of current treatments by re-engaging the immune system to fight the cancer.
- Identifying new treatment approaches for bile duct cancer that target the cancer stem cells and prevent recurrence.

# Why is this research so important?

The bile ducts are the tubes that take bile from the liver and pass it to the small bowel. These ducts play an important role in the digestive system, particularly in the digestion of fat. Current treatments are ineffective and liver transplant is the only definitive cure.

"We're working to publish this research now and validate our findings. After that we hope it will then begin in clinical trials to benefit patients," Lu says.

Our Liver Research Unit is 100% funded by incredible people like you. Through your support of GMRF you are creating treatment options where few exist and fighting cancer for generations to come. You can continue the vital progress of this research by donating at:

www.gallipoliresearch.com.au



# Fast-tracking the right treatment for liver cancer patients

Time can play a crucial role in the outcome of a cancer journey. To give patients the best chance at beating cancer, not only do we need to diagnose the disease in the early stages, we need to ensure the right treatment option is administered as soon as possible.

With a range of genetic, lifestyle and disease progression factors at play, a treatment that works for one patient may not work for another. Crucial weeks or months could be lost trying to find patients the most effective treatment available. As part of her overall PhD project, Ritu Shrestha has identified key signatures, known as EMT biomarkers, that will help predict the effectiveness of treatment for patients.

Ritu's work focuses on cancer stem cells and their role in the development of liver cancer. She has been examining how these cancer stem cells change their behaviour to hide from the immune system. Ritu's work has shown that these cells undergo a process called EMT, which changes their behaviour and also acts to dampen immune responses. Through this, she identified novel targets for better therapy in primary liver cancer. The identification of the EMT process has enabled further application of Ritu's research in the use as predictive biomarkers.

"Liver cancer patients who have higher expression of these EMT markers have poor survival along with higher expression of immune check point modules. We have seen that EMT is responsible for drug resistance so we can use these biomarkers. "Even before we treat the patients, we can see the progression of these markers to predict whether the immunotherapy would be effective. That allows us to fast-track treatment."

**Drug Treatment** 

Ritu is in the process of submitting her PhD thesis, along with a number of other manuscripts for publication. 2020 was a busy and productive final year, presenting at the GESA Australian Gastroenterology Week Forum, Brisbane Cancer Forum and the Liver Cancer Forum hosted by GMRF.

As her PhD project comes to an end, Ritu says she is grateful for the opportunity GMRF donors have given her through the funding of her project.

"I have had a wonderful experience here at GMRF. We're a small institute, but there are great facilities here and very experienced researchers like Professor Darrell Crawford and Dr Kim Bridle to seek help from.

"Getting to meet our donors has motivated me even more. It can be quite sad to meet people who have lost a loved one to cancer, or who are going through cancer when you meet them, but it is also motivating you to keep going and do better."

You are changing lives through this innovative research. With your help, liver cancer patients in the future will have access to more effective treatment options from the moment they're diagnosed - changing the entire trajectory of the cancer journey. Help us take the next step by making a donation online at <a href="https://www.gallipoliresearch.com.au">www.gallipoliresearch.com.au</a>



### Research findings to improve quality of life for liver transplant patients

Third year PhD Candidate Raji Baidya, has recently published findings from her research which have identified potential ways we can treat donor livers prior to transplantation to improve the success of the transplant. We sat down with Raji recently to ask her about this publication and her research as her project nears completion.

#### What's the problem you set out to address?

There are many limitations to liver transplantation, including the scarcity of donor livers and an increased number of livers which are unsuitable to transplant, such as fatty livers. Due to the obesity epidemic, 1 in 4 livers have too much fat in them. Unfortunately, fatty donor livers tend to fail after transplant.

#### What is necroptosis and why is it significant?

There are actually many different ways for cells to die – each have their own special characteristics. Necroptosis is one of these forms of cell death. It has been shown to play a role

### National collaborative event continues through pandemic

Through collaboration, individual research efforts can be combined to make an even greater impact. We're working with a number of leading institutes, and each year we bring many of them together for the Liver Cancer Forum. In 2020, the Forum was a two-day virtual event.

The growing national burden of liver cancer highlights the need and value of meetings like the Liver Cancer Forum hosted by GMRF. As our Director of Research, Prof Darrell

AstraZeneca

during liver transplantation. I've been looking at critical steps

as superior research facilities helping us to solve perplex mysteries underlying liver

diseases."

#### What is the importance of the findings you've published?

in this cell death pathway during my PhD.

My work has highlighted how fatty liver worsens injury and cell death in our liver transplantation model. The most important finding of my work is understanding of the importance of targeting cell death as a potential therapy to reduce injury during transplantation. Reducing the number of livers that fail during transplant will result in better outcomes for patients.

#### What does the support of GMRF donors mean to you?

Donors investment in our research demonstrates their commitment to liver research and education. I am sincerely grateful to all our donors. Your donation has significantly contributed to the successful completion of our research!

Crawford says: "We have gained so much momentum in the past three years, and it would have been a terrible shame to lose that due to COVID-19. We are starting to see a shift to a wider recognition of the problem of liver cancer through an increase in grants, new policies, and the research conducted in the institutes represented at the forum."

This meeting would not be possible without the support of event sponsors, AstraZeneca, Eisai and Gilead and their dedication to helping develop solutions. We are proud to be a part of a collaborative effort to progress liver cancer research and we look forward to hosting this event again this year.







# Ground-breaking respiratory research gains momentum

After decades of limited advances in treatments, there is new hope for sufferers of some difficult to treat respiratory illnesses. Right now, GMRF's Respiratory Unit is progressing world-first clinical trials and bench-to-bedside research.

The unit, led by Professor Rachel
Thomson, works to address the gap in
understanding and treatment options of
non-tuberculous mycobacterial (NTM)
infections and bronchiectasis. Professor
Thomson has launched a new project
investigating pulmonary aspiration
(breathing foreign objects into your
airways) as a cause of lung infection.

"You may have content from your stomach drift up into your mouth and spill into your lungs while you're sleeping. Over time, this can lead to infection in the lungs and acid in the airways, which can cause NTM or bronchiectasis," Professor Thomson says.

Professor Thomson's team are using a combination of a dye and a drug to detect if contents of the stomach are being transferred into the lungs. The findings of this investigation will form the basis of a non-invasive test of aspiration in patients to pre-empt disease progression.

The unit is also a part of a multi-country grant from the Asia Pacific Society of Respirology to investigate genetic susceptibility of NTM. In collaboration the National Institutes of Health (NIH) in the United States of America and institutes in Japan and Korea, the unit is screening genes to find the defect responsible for NTM susceptibility.

"If you have a genetic predisposition to the disease, there is something your immune system should be doing to fight these bugs but isn't. We want to enhance the immune system of patients to target the bug, rather than relying on multiple courses of antibiotics," Professor Thomson says.

#### A world-first in clinical trials

In December 2020, Professor Thomson and GMRF's Clinical Trials Unit were the first site in the world to screen patients

and commence the 'Beyond Air' trial, a proof of concept study testing the use of nitric oxide in treating NTM.

Nitric oxide is produced naturally by the body's immune system to fight infection. Preliminary studies have indicated that nitric oxide possesses anti-microbial activity that may combat harmful pathogens.

**Professor Rachel Thomson** 

"It's fabulous to be part of new options for patients," Professor Thomson says.
"10 years ago, all people had available was a prolonged course of three antibiotics. And if it didn't work, you had no other options, and for a long time there was nothing new on the horizon."

"There has been a small study in a hospital setting, but this will be the first study on patients using this novel system themselves in their own homes. Patients are looking for non-antibiotic options for NTM and this system may provide a better quality of life," Professor Thomson says.

# Unit recognised as national leaders in respiratory research



The unit was recently given a further boost with Prof Thomson awarded a prestigious Queensland Advancing Clinical Research Fellowship.

"The Fellowship will be really helpful. It will allow me more time to focus on our research, to coordinate more projects and take on more students. It means the work we're doing will gather further momentum, and increase the profile of the unit," Professor Thomson says.

The Queensland Advancing Clinical Research Fellowship supports clinical researchers with grant funding for projects aimed at translating research into clinical practice and improved health outcomes for Queenslanders. Professor Thomson has been awarded the grant for her work in the acquisition, prevention and management of pulmonary NTM.

"There is so much work that needs to

be done. Through this Fellowship and the wonderful support of GMRF donors we are able to do more for people suffering from respiratory conditions."

"We are gaining recognition from pharmaceutical companies and other research institutes. We are the primary NTM research unit nationally and that's why we attract studies like 'Beyond Air' and other key trials and projects." Professor Thomson says.

## Meet Prof Thomson's growing team



**Dr Felicia Goh** Research Manager

Dr Goh joined the team in March this

year to coordinate research projects and clinical trials. She's also developing a biobank of specimens for current and future NTM research projects.

"A biobank will provide researchers with easy access to specimens and data from multiple sites, ensuring that research can progress much quicker than one group working alone. Through collaboration we can fast-track research," Dr Goh says.



Mark Clayton
PhD Candidate

Mark began his PhD project in July 2020 thanks to a Pacific Golf Club Patron's

Scholarship. He's helping to understand the environmental and transmission aspects of mycobacteria in order to develop better ways of controlling the spread of infection and reducing the risk of contracting an infection.

"We're working with hospitals, utilities and other institues to collect patient samples from across Brisbane. It's exciting to contribute to increasing our knowledge on how these infections are being contracted. Through this, we can lessen the impact and improve quality of life for patients," Mark says.



**Bahar Sahin**Data Officer

Bahar joined the team in late 2020 to assist

with collecting data for the Australian Bronchiectasis Registry. Bahar is helping investigate the cause, treatment, and quality of care for patients. She aims to help fill the knowledge gap on the incidence, diagnosis, and mortality rates of bronchiectasis. To date, the unit has contributed data for 200 patients.

"My background in medical research has shown me the importance of delivering accessible, clinical research outcomes for patients. Working here allows me to be a part of that translational process," Bahar says.



Robyn Carter Researcher

As well as helping with Mark's project, Robyn

is looking at soil and dust as a source of mycobacterial infection. She is investigating patient samples to find out why some patients get worse infections than others.

"I'm glad for the donors who give us the opportunity to do this work. For me, it's all about improving outcomes for patients," Robyn says.

#### Kim Smith Research Assistant



Kim joined the team in mid 2020 to help investigate mycobacteria transmission in the

Queensland and South Australian water supplies.

"Patients are asking 'how am I getting this bug?', and at this stage we have no definitive answer. That's what motivates me to make advances in science and find answers for patients," Kim says.



### A chilical charactering

Chris Murphy is a Sunshine Coast local, husband, father, grandfather, and one of the 'lucky ones'.

After a brief bout with stage 1 melanoma in 2009, Chris had been clear of the disease for over eight years when in 2017, he began having trouble concentrating while driving. On the insistence of his wife, Chris went to the hospital for an MRI scan.

What was originally thought to be a brain tumour turned out to be melanoma. The prognosis still wasn't great, but at least Chris had options. Dr Victoria Atkinson, his doctor at Greenslopes Private Hospital (GPH), recommended him for a GPH-GMRF clinical trial.

"I was a little bit uneasy with the trial as first. It was all so new and unknown. The whole team were really supportive and would always be on hand to answer any questions." Chris says.

The trial tested the effectiveness of a combination of new immunotherapy treatments that boost the immune system to fight the cancer. After commencing the trial in September of 2017, the scans started showing positive results from the following January.

"I am now disease free! Though the cancer may come back, I continue to be closely monitored and I will survive," Chris says.

Chris says he's living proof of why supporting medical research is so important. The treatments being accessed by trial patients like Chris, and those that become available to our communities, are only possible because you believe in

the life-changing power of medical research.

"Without the research that had been done to get this treatment to trial, I wouldn't be here. That's the benefit that can come when you give to medical research," Chris says. "I will be forever grateful for this trial and to Dr Atkinson, the GPH Cyril Gilbert Cancer Centre, and the CTU team."

Chris is now enjoying life in retirement and making the most of his time with his family. He's eagerly looking forward the easing of pandemic restrictions when he will be able to travel overseas with his wife.

In 2020, the CTU produced trial outcome data from trials like Chris's which contributed to the registration of earlier Stage III Melanoma Immunotherapy treatment on the Pharmaceutical Benefits Scheme, giving the community affordable access to this ground-breaking new treatment.

"I am now disease free! Though the cancer may come back, I continue to be closely monitored and I will survive."

GMRF's Associate Director of Clinical Trials, Dr Suzanne Elliott, says "It is very exciting to see the progress of new treatments and what it means for patients. Off the back of our trials into melanoma treatments, which are now publicly available, the science is being transferred into other cancers."



# New trials provide options for patients with gastro-intestinal cancers

Clinicians like Dr Warren Joubert know there is generally one question patients ask when they are given a cancer diagnosis – 'What are my treatment options?'

The answer Dr Joubert can give usually depends on how much research has been done in the disease area. Dr Joubert's main interest is in gastro- intestinal cancer. These cancers include more common cancers like colo- rectal and pancreatic cancer; but also rare cancers such as cholangiocarcinoma (cancers arising in the bile ducts)

"There is a real unmet need for new treatments in gastrointestinal cancers," Dr Joubert says. "A lot of these cancers have limited treatment options. Through clinical trials we can offer treatments beyond those currently available that may prolong survival and improve patients' quality of life."

Dr Joubert has been an oncologist for over 13 years, working in both the private and public sectors. In 2020, he went into full-time private practice at Greenslopes Private Hospital. Dr Joubert is expanding GMRF's focus on gastro- intestinal cancers with several new trials commencing this year. One of these trials in incurable biliary tract cancer is open for accrual, and Dr Joubert is already the top recruiter for patients in the New Zealand and Australian region.

"Biliary tract cancer affects patients across a broad age

spectrum and can be associated with an auto-immune disease called PSC, or be sporadic in nature. When a patient comes in, they expect for me to have answers. Unfortunately, there are very few options, particularly when their disease progresses on chemotherapy," Dr Joubert says.

"This trial gives patients the option of immunotherapy in addition to chemotherapy in the first line setting, and investigates how these potential treatments, not available for these diseases, may be progressed further with other disease stages. We are also looking at trials in the later line setting, when chemotherapy is no longer effective. These trials often look at more targeted approaches to these cancers."

A key focus for Dr Joubert is looking to create and improve options where none or few exist.

"The driving purpose of these trials is to give patients options — to give them access to a treatment they might not have otherwise had. With rare cancers like this, any step forward can make a big difference in improving the odds and enhancing survival and potentially quality of life," Dr Joubert says.

Our Clinical Trials Unit is proud to be working with leading physicians like Dr Joubert to test new treatments. You can find out more about our Clinical Trials Unit at:

www.gallipoliresearch.com.au/clinical-trials-unit



Despite the challenges of 2020, the Cancer Wellness Program at Greenslopes Private Hospital continued supporting cancer patients and their loved ones through treatment and beyond.

Your support of GMRF was in action for patients during a year when going through cancer treatment became even more difficult. Through the isolation of lock-down and social distancing regulations, the program provided vital support, advice and a sense of belonging for many patients.

Someone who has seen firsthand the power of community for patients undergoing cancer treatment is our new Program Coordinator, Ursula McDonnell, an oncology nurse with over 20 years' experience.

In 2021, the program offerings will continue to be a blend of online and in person contact, including 'Feel Good Friday' group sessions to provide patients with an opportunity to connect with others undergoing treatment.

"What I noticed about the program's craft activities was that peer support was really important for a lot of people. This initiative isn't about having a 'support group'. It's about creating social connections and patients wanting that support of one another," Ursula says.

"People have been facing treatment without visitors and support and they haven't been out and about as much themselves which has left many feeling isolated and alone. The program helped patients feel a bit more connected through regular emails, phone calls and online resources enabled participants to feel connected," Ursula says.

With over two decades experience in cancer care, Ursula understands the value in a personalised approach to holistic care.

"Individualised care is so vital. People of all different ages and ethnicities come in for treatment and they all need support in different ways. I have a lot of direct one-on-one and small group contact to ensure I can get to know patients, build a relationship, and be a helping hand in the way they need it," Ursula says.

The Cancer Wellness Program at GPH exists because you care! This life-changing program is wholly funded by your generous support of GMRF. You can find out more about the program or make a donation at:

www.gallipoliresearch.com.au/cancer-wellness

### Get to know our new Cancer Wellness Program Coordinator



#### Ursula, what motivated you to take the Program Coordinator role?

I am a people-person and I knew this role would give me more one-on-one patient contact. I was keen for a challenge and to take a new direction in holistic care. This was the perfect fit!

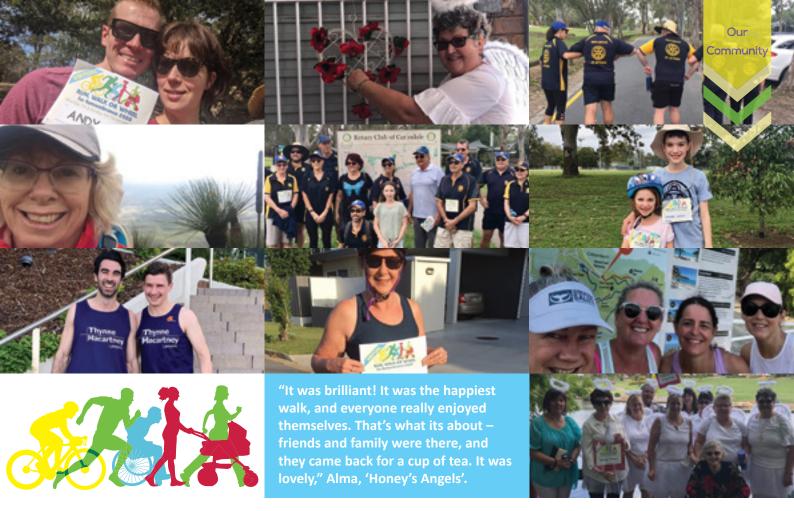
#### What inspires you to do this work?

I love seeing patients empowered through

education. In the whirlwind of a cancer diagnosis, patients often can be a bit 'deer in the headlights' – understandably so.
Through education we can peel it back and go with them on the journey.

#### What's your favourite quote?

"Don't count the days, make the days count". Seeing firsthand the impact of cancer, this quote reminds me to make the most of opportunities that come my way.



### Together while apart: our community remembers

Through a global pandemic, GMRF's community adapted and rallied together in 2020 to raise funds for our research. We would like to sincerely thank everyone who got involved in the Run, Walk or Wheel for Remembrance, presented by the Rotary Club of Carindale.

With traditional fundraising events on hold, our community came together for this virtual event to raise funds for GMRF. It was great to see families, friends and colleagues getting out and having fun for an important cause – together.

"It was so exciting to see our community in action and to reach our goal of \$15,000!" GMRF CEO Miriam says. "All of this money will go towards helping support our veteran mental health research and the other research being conducted here at GMRF."

The fundraising efforts of all participants will help make a big difference, but there were a few who well and truly went above and beyond in their fundraising. Long-time supporter of GMRF, Alma Williams got her 'Honey's Angels' together in Toowoomba, donned their fluffy wings and walked for remembrance, raising \$3,500.

The Coordinating Chaplain at Greenslopes Private Hospital, Petra Milaudi, inspired people to give by committing to walk for 5km for every person who donated. With 32 people giving over \$1,600, Petra had quite a bit of walking to do! Special thanks also to one of our Corporate Discovery Partners, Thynne & Macartney Lawyers. It was great to see their staff getting out and running and walking for remembrance as a team. Combined, they raised over \$500.

"I got involved in the Run, Walk or Wheel for Remembrance to honour people I've cared for during their cancer journeys and for their families. They are all real people who are loved and remembered, and I wanted to honour them personally through my walk and my fundraising," Petra says.

This event would simply not have been possible without the generous support of our sponsors. The financial contribution of the Rotary Club of Carindale and Ord Minnett ensured 100% of registration fees and fundraising goes directly to GMRF to continue its progress in life-changing research.

"We were very proud to be part of this event," Rotary Club of Carindale member Marie Turner says. "Everyone got really enthusiastic and it inspired club members who didn't have a lot to look forward to because of the pandemic. We got an incredible sense of achievement watching the tally go up, and we know that our support will really make an impact!"

If you would like to raise funds for life-changing medical research, get in touch with us today at 07 3394 7284.



### Why I give: Jan's commitment in loving memory

Our community of supporters are a diverse bunch of very special people. They'll be the ones to thank when we have new treatments for liver cancer and other serious illnesses. We love getting to know our community and sharing their stories. Recently, we had a chat to Jan Celledon, a long-time supporter who is a big believer in the power of research.

Jan has had a longstanding relationship with Greenslopes Private Hospital. She served in the catering team in the early 1990's and had an unexpected stay in 2008 when a trip out to her mailbox ended with a compound fracture of her ankle.

"The injury was a horrible experience, but the staff at the hospital were incredible," Jan says. "I was so impressed with the knowledge of the doctors and the care shown by the hospital. Between the outstanding treatment and my good bones, I healed up very quickly!"

On top of the care shown by the hospital, Jan's giving was also motivated by her connection to the military community. Her late husband Glen served in the Royal Australian Air Force during the Second World War.

"He was a navigator, serving three years in Papua New Guinea. After the war, Glen taught aviation students all there was to know about all air craft and radio and machines, and became a Technical Officer at Eagle Farm. He knew everything there was to know about anything you could fly."

As was the case for many like Glen, there was not the same

understanding of the physical and mental effects of service like there is today thanks to the research of institutes like GMRF.

"They didn't have the health services available like you would now. They just had to make do and get on with things," Jan says.

Jan has been a regular giver to GMRF for over seven years. She has also made an extra special decision in choosing to become a GMRF Future Discovery Partner and leave a gift in her Will to medical research.

"I've only chosen a few to leave a gift in my Will and this was an important cause for me. It's not only a gift in gratitude for this hospital. It's for that incredible liver research and for looking after these young blokes coming back from the war."

Jan says one of her favourite things about being a GMRF supporter is getting updates directly from researchers at supporter events and lab tours.

"I am very interested in learning more about the research. You feel like you're part of something really important, and I love seeing what's going on in the labs," Jan says.

You can change lives for generations to come as a Future Discovery Partner or a regular giver. To find out more, contact our friendly team today on 07 3394 7284 or at enquiries.gmrf@ramsayhealth.com.au

## Your Will through the ages



If the coronavirus pandemic has taught us anything, it's that we don't know what the future has in store, no matter what our age. We can't predict the future, but we can prepare for it.

A Will helps to ensure your loved ones are looked after and your wishes are carried out after you have gone. It is an important document yet it is estimated more than 50% of Queenslanders do not have a Will or an estate plan.

The team at Thynne + Macartney lawyers has seen firsthand the stress and expense that can be caused when there is no Will providing clear instructions.

They recommend that everyone over 18 needs a Will and, if you already have a Will, you check regularly that it is up to date and reflects your wishes and circumstances.

**In your 20s** - Even though many people in their 20s think they don't need a Will, this is often not the case. Most people in this age bracket will have at least some form of superannuation, often including a life insurance component. At this stage of life, your estate plan should consist of:

- 1. a Will to distribute your assets after you are gone,
- an Enduring Power of Attorney appointing someone to make decisions or sign documents on your behalf if you are unable to due to impairment or being outside the jurisdiction; and
- a Binding Death Benefit Nomination to bind the trustee of your superannuation fund to distribute your superannuation in a particular way in the event of your death.

**In your 30s and 40s** – Often people in this age bracket have started to accrue some assets and may have a home and family. Things to consider include:

- Whether your Will and estate plan reflect your current wishes. For example, marriage or divorce may affect the validity of your Will.
- 2. If you have children, who will be appointed guardians to look after your children.
- 3. Do you need a Testamentary Discretionary Trust to help you protect your assets for your family's future? A TDT is a flexible structure that protects or fences off assets for a range of beneficiaries and allows you to nominate who can make decisions relating to the disbursement of funds from the trust.
- **4. In your 50s** In your fifties you may be caring for both children and parents –it is sometimes known as the "sandwich" age.

- 1. If you make gifts or loans to family members, it is important to document and clarify the nature of the assistance provided and how it is to be dealt with after you are gone to prevent issues arising when dividing assets in the Will.
- Check your Will still meets your current needs as there might have been significant changes to your business, assets or personal life.
- 3. As parents age, check with them regarding their own estate planning. Do they have Wills that reflect their wishes, have they appointed attorneys under Enduring Powers of Attorney in case their own decision making capabilities are impaired? Where are the originals of these documents held?
- 4. Consider if you need an Advance Health Directive. This document sets out your wishes and directions regarding the treatment you will receive for various medical conditions if you are unable to make and communicate decisions yourself.

**In your 60s and beyond** – By now you should have a Will and estate plan in place. Although you may still have many years ahead of you, it is best to be prepared for the inevitable and leave clear instructions about your estate.

Considerations at this age include:

- Is a Testamentary Discretionary Trust a tax effective way to support your children with the expenses of your grandchildren?
- 2. Could your estate be subject to a Family Provision Application? This is litigation commenced by an eligible applicant for further and better provision out of a deceased estate. If so, what can you do to protect your estate?



GMRF Discovery Partner, Thynne +
Macartney has one of the leading Wills &
Estates teams in Queensland. Both Karen
Gaston and Ashleigh Poole are Queensland
Law Society Accredited Specialists in

succession law. Accredited specialists are lawyers who have successfully completed an advanced, peer-reviewed assessment program specific to their area of expertise, demonstrating their high level of knowledge and skills in that area.

Visit www.thymac.com.au to start your Will online or access our resources to help you in your own estate planning.

Visit <u>www.gallipoliresearch.com.au/GiftinWills</u>
to find out more or to download our Future Discovery Partner Brochure



Make a donation on our website at www.
allipoliresearch.
com.au



Call us on

#### 07 3394 7284

to donate over the phone via credit or debit card



# Donate via cheque and post to:

Gallipoli Medical Research Foundation C/- Greenslopes Private Hospital, Newdegate St, Greenslopes, QLD 4120



#### Become a Regular Giver

A regular gift enables us to plan for the future and further progress our work.



#### **Hold a Fundraiser**

A great way to bring friends and family together for a good cause.

Ask us about ideas!



# Leaving a Gift in your Will

Ask us about how you can leave a lasting gift for the health of future generations.

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I have enclosed a cheque/money order payable to Gallipoli Medical Research Foundation	
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All donations of	07 3394 7284.
\$2 or more are tax deductible.	If you no longer wish to receive this information please advise us in writing or by telephone and we

You can donate online via our secure website at <u>www.gallipoliresearch.com.au</u>

Please return to: GMRF, Greenslopes Private Hospital, Newdegate Street, GREENSLOPES QLD 4120.



#### Gallipoli Medical Research Foundation

Greenslopes Private Hospital, Newdegate Street, Greenslopes QLD 4120
ABN: 42 077 750 693 | ACN 077 750 693
T: 07 3394 7284 | Frenquiries amrf@ramsayhealth.com.au

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