

Gallipoli Medical Research Foundation

# ANNUAL REPORT

## 2020-21

*Remembrance through Research*

**GALLIPOLI**  
MEDICAL RESEARCH FOUNDATION

## Contents

3	Message from the Chairman Liam Kelly
4	Message from the CEO Miriam Dwyer
6	Message from the Director of Research
8	GMRF Vision and Strategy
10	Impact Snapshot
12	Veteran Health Research Unit
16	Liver Research
18	Respiratory Research
20	GMRF PhD Scholarship Program
22	GMRF Innovation Grants
23	Cancer Wellness Program
24	Board of Directors
26	Retired Directors
27	Committees
28	Patrons and Ambassadors
30	Acknowledgments
32	Financial Overview
34	Appendix – Publications

## Message from the Chairman Liam Kelly

Reflecting on another challenging year living in a COVID-19 world, I am deeply proud to have witnessed the achievements of GMRF both as an independent research foundation and as a committed and vibrant community. GMRF's COVID response strategy placed the Foundation in an effective and forward-looking position to continue undertaking critical research with some major achievements in Veteran Mental Health, Clinical Trials, Liver and Respiratory research units.

There were important personnel changes at a board level in the past year, as the Foundation ensured that appropriate renewal of talent occurred, and proper governance was observed. Some of our long-standing and highly valued Board Members retired and two new very able directors joined the Board. I express my deep gratitude to Ms Carmel Monaghan, Dr Michael Harrison, Professor Gerald Holtmann and Mr Karl Morris for their dedication to the Foundation and invaluable support of the Board. Ms Monaghan and Dr Harrison were founding members of the GMRF Board and with their insight, experience, and goodwill the Foundation advanced significantly over the past 16 years. In turn, I warmly welcome Mr Rob Skoda and Professor Stephen Gray to the Board and look forward to working with them to continue advancing GMRF research. Each of them is a very valued member of the new Board.

As Chair of the Board, I am grateful for the support and the diverse experience and genuine commitment my fellow Board Members bring to GMRF. From business operations to medical expertise, the collaborative nature of this group ensures that GMRF continues to conduct critical and relevant research. Together with the Executive Committee, the Board reinforces GMRF's strategic direction by supporting the implementation of organisational strategies and objectives.



GMRF is focused on finding solutions to serious health problems impacting our veterans, and the Australian community, through research. These solutions include diagnosis, treatment, mitigating strategies, and preventative medicine. This is no small feat and a responsibility taken to heart by everyone from the Board to research assistants and their supervisors.

GMRF's success is a result of the dedication from, not only the GMRF Board, but also Ms Miriam Dwyer (the CEO), Ms Jane O'Brien (the COO), the Executive Committee, the Research Advisory Committee, our valued corporate partners and donors, and exceptional staff.

Finally, without the support of our GMRF community, including our very loyal and generous supporters, the success outlined in this report would not be possible. Through the hard work of everyone involved we aim to continue positioning GMRF as a trusted and respected Independent Research Institute lessening the impact of disease today, while also searching for the cures of tomorrow.

  
Liam Kelly QC - Chairman

***"GMRF is focused on finding solutions to serious health problems impacting our veterans and the Australian community, through research."***



*"The contributions of our staff, as well as the support from our partners, allows our research to extend from the bench to the bedside and deliver positive solutions into the community."*

## Message from the CEO Miriam Dwyer

My gratitude for the GMRF staff, Board and community of supporters is extraordinarily high, seemingly more so than other years, because this year I celebrated 10 years as GMRF CEO. Leading GMRF for the past decade has provided me with proud insights as I have witnessed year on year an increase of exceptional staff, the expansion of our research capabilities and the growth of our reputability as an Independent Research Institution. If the past 10 years are any indication of what's to come, I look forward to continuing to lead GMRF on this journey. This year, in the face of more changing and challenging times, I'm proud to say GMRF continued to show agility and a resilience that has helped the Foundation move from strength to strength in all areas.

Our relationship with Greenslopes Private Hospital continues to positively evolve through mutually beneficial initiatives like the GMRF Innovation Grants and Cancer Wellness Program. The financial and academic support of our valued corporate partnerships has allowed our research capabilities to expand, resulting in the growth of our team. Over the past year we have employed even more highly experienced and qualified professionals from physiotherapists, clinical trial coordinators, principal investigators and assistants to advance research. The contributions of our staff, as well as the support from our partners, allows our research to extend from the bench to the bedside and deliver positive solutions into the community.

The recent announcement of the Royal Commission into defence and veteran suicide highlights that more needs to be invested into supporting current and ex-serving ADF members. At GMRF, our support is delivered through critical



research and we will positively contribute in any way we can within our areas of expertise such as understanding the challenges and issues members and families face relating to transition and integration to civilian life. As an Independent Research Institute, we welcome any due process that will improve the lives of veterans and their families.

In May 2021, after six years of research, GMRF launched Go Beyond in partnership with RSL Queensland. Go Beyond is a free online tool for all veterans that measures how well they are adjusting to civilian life and provides online learning resources which can improve their adjustment. Go Beyond simply scratches the surface of GMRF's potential to provide real world, research informed solutions for veterans. Through continuous hard work, dedication and perseverance to achieve excellence in research, GMRF continues to be recognised as a trusted voice for veteran, biomedical and clinical trials research.

  
Miriam Dwyer - GMRF CEO



*"Through cross-disciplinary collaboration with other research and academic institutes, we are on track to lessen the burden of serious illness like liver disease, liver cancer, respiratory illness and veteran health concerns."*

## Message from the Director of Research Professor Darrell Crawford

At GMRF, research never slows. Our research projects have progressed at a rapid pace with thanks to our supporters and research partners such as The University of Queensland and RSL Queensland. Whether in the laboratory or the clinic, our scientists are working relentlessly to realise our vision of enhanced health of the Australian community through the highest quality research. Through cross-disciplinary collaboration with other research and academic institutes, we are on track to lessen the burden of serious illness like liver disease, liver cancer, respiratory illness and veteran health concerns. We strive to honour our pledge, Remembrance through Research, by conducting world class medical investigations to create a brighter future for our veterans and their families.

Our PhD candidates continue to conduct innovative new research, with two candidates completing their PhD journeys in the last year. This talented group of GMRF PhD students embodies the values of collaboration, dedication, and future thinking. Their projects significantly contribute to advances in respiratory and liver research, providing additional knowledge to other clinicians, researchers and medical experts.

The past year has seen a significant growth in our clinical trials unit, driving research into action by conducting



multi-site national and international trials providing people with limited options an alternative choice. Alongside cancer and disease research, GMRF veteran health research was acknowledged as a world leader in translational research for veterans through the launch of a new evidence informed tool to help veterans navigate life after service.

Excellence in research is key to securing academic sustainability, an integral outcome for every research foundation and we endeavour at every point to maintain high standards of research. Looking forward, we aim to strengthen our future academic partnerships to enhance the impact of GMRF.

A handwritten signature in black ink, appearing to read 'Darrell Crawford'.

**Prof Darrell Crawford - Director of Research**



# GMRF Vision and Strategy

## About us

Gallipoli Medical Research Foundation (GMRF) is a thought leader in research and discovery. Based at Greenslopes Private Hospital, we continue the Hospital's proud tradition of supporting current and former service personnel through our pledge, Remembrance Through Research. We investigate areas of significant clinical need identified by a multi-disciplinary leadership team. We engage with individuals, businesses, academic institutions, and communities to grow our research and focus on translational research with immediate and meaningful impact.

### Our Vision

**Enhanced health of the Australian community through the highest quality research.**

### Our Mission

**Lessen the impact of disease today while also searching for the cures of tomorrow by:**

1. Working to alleviate the burden of the diseases directly impacting our veterans and their families.
2. Using a multi-disciplinary and collaborative approach to understand and address areas of significant clinical and social need. veterans and their families.
3. Delivering high quality clinical trials of emerging therapies and interventions.
4. Facilitating and financially supporting a culture of research and innovation within Greenslopes Private Hospital.
5. Sharing our research findings for the greatest benefit of all.

## Strategic Intent

Driving the strategic direction for 2019-2023 are our core values of excellence, integrity, relevance and innovation. Our focused efforts will continue to deliver increased understanding around issues facing the veteran and military community, and those who love, support and rely on them.

We will continue our commitment to identify and deliver insights and therapeutic pathways that can change lives, improve treatments and cure disease within the general population. To enable this important work we will continue to strengthen our profile as a unique and successful independent research institution, demonstrate our impact and inspire financial support to ensure long-term sustainability.

### Strategy

- Maintain excellence in biomedical and clinical research
- To be a voice that is trusted and respected by the military family and those organisations entrusted with their care
- Translate awareness of GMRF into appropriate financial and other support for the work that we do
- Share research outcomes and impact of our work to all Australians
- Strengthen current academic partnerships and establish new affiliations to enhance the academic impact of GMRF



2020-2021 Impact Snapshot

Our Reach

Patients for screening; and randomised studies ..... 91

Patients to active treatment/observational/device studies ..... 71

Donors

828

(donors in the last year)

Cancer wellness program participants

105

Researchers

25

PhD candidates

5

GMRF staff

51

New trials

14

Clinical trials

29

Our Research

Conference presentations

41

Publications

56



# Veteran Health Research Unit

## Overview

The Veteran Health Research Unit has a core focus on understanding the psychological and physical impact of service on veterans and their families. By using research to understand the challenges veterans may face, we can translate information into real world resources to help veterans, contribute to collective academic knowledge and inform policy. Through world class research we honour our commitment to creating a brighter future of veterans and their loved ones.

## Veteran Health Initiative

The Healthy Veteran Initiative aims to generate research findings which positively contribute to supporting veterans' physical health through research. This research draws upon the vast experience of multi-disciplinary academic professionals in fields such as musculoskeletal physiotherapy, health psychology, and pharmacotherapy. Outcomes of this important research will contribute to current knowledge bases, provide recommendations for intervention and develop resources. Projects in the past year include:

- **Data analysis of Gastrointestinal Investigations** - This project studies a database provided by the Department of Veterans Affairs (DVA), regarding the incidence of gastrointestinal investigations in veterans with and without PTSD. Outcomes of the project aim to educate health professionals about potential dangers of over-investigation in veterans with gastrointestinal conditions.
- **Quality use of medicine** – Investigating the incidence of psychotropic polypharmacy (the use of multiple medications commonly used to treat mental health concerns) in veterans with PTSD. The research aims to increase awareness of polypharmacy and the potential associated risks, highlight the need to improve medication monitoring, and to promote development of education resources for relevant prescribers.
- **Systematic literature review** – Scope of use and effectiveness of dietary interventions for improving health-related outcomes in veterans. Currently in initial stages, a systematic literature review is critical to understanding the current knowledge of dietary interventions delivered to the veteran population, and to subsequently inform an effective research plan.

This area works closely with researchers and academic partners from the University of Queensland, Department of Veterans' Affairs, Nutrition Research Australia and Queensland University of Technology.



## Military Families Initiative

Acknowledging that most veterans have a community of loved ones such as partners, parents, children and other carers, the Military Families research project works closely with Ex-Service Organisations and veteran service providers to gain a better understanding of the needs of families with a veteran. In 2020, GMRF delivered:

- **The Australian Defence Community Needs Assessment Report** – This report was prepared for RSL Queensland, which examined dominant health and wellbeing needs in ADF families. The report was a targeted literature review that synthesized relevant government reports and epidemiological research to inform the combined services strategy for RSL Queensland and Mates4Mates. The report highlighted the breadth of needs in the veteran community, and areas of focus for service delivery organisations seeking to assist veterans with increased access to support services.
- **Families with a Veteran: A Model of Care** – This report for RSL Queensland and Legacy Brisbane was completed in the past year. The project was designed to develop recommendations for a model of care to guide service delivery for veteran families with complex, multi-agency needs. The project included a qualitative study, which examined complex needs in veteran families, and explored service providers' and families' experiences of accessing and navigating the veterans' support system. The study participants included service providers employed by, and veteran families engaged with, RSL Queensland, Legacy Brisbane, Open Arms and Mates4Mates. The report highlighted the care coordination challenges faced by veteran families with complex, multi-agency needs, and delivered a series of recommendations designed to better integrate service responses for these families.

This research area works closely with Department of Veterans' Affairs, RSL Queensland, Australian Defence Force, Mates4Mates, Legacy, and Open Arms.



# Transition and Reintegration

While working as a clinical psychologist with veterans, Dr Madeline Romaniuk observed that many veterans struggled to adjust to civilian life, while others seemed to transition without difficulty. There was no scientific research available explaining why. In response, Dr Romaniuk and her team undertook a multi-phase research study aimed at determining the factors that contribute to a successful and mentally healthy transition.

**Service to Civilian Study** - The first phase of this study included 180 hours of interviews with 60 veterans, 20 partners and 20 health professionals. This phase investigated the lived experience of veterans who had separated from the military with focus on their psychological adjustment and cultural reintegration. Interviews were analysed and key themes important to transition were extracted.

The next phase translated key themes into a self-report tool called the M-CARM (Military-Civilian Adjustment and Reintegration Measure). The M-CARM was trialed and evaluated in a sample of 725 Australian veterans. Five factors emerged as most important to psychological adjustment and reintegration to civilian life.

The key factors identified are:

1. Finding Purpose
2. Resentment and Regret
3. Social Connections
4. Regimentation
5. Beliefs about Civilians.

After seven years of research, the M-CARM was found to be a valid and reliable tool to assess these factors, and is now being used by veterans and health providers to help determine how a veteran may be adjusting, as well as identifying areas of need within these five factors.

The M-CARM is a world first. No other psychometric measure that is validated to reliably and accurately assess a veteran's level of adjustment to civilian life exists.

[m-carm.org](http://m-carm.org)



# Translating Research

In addition to the M-CARM, the accompanying online program - Go Beyond, Navigating Life Beyond Service was launched in May 2021. Go Beyond is an online learning platform that supports veterans in areas relevant to improving their adjustment and reintegration to civilian life, as identified by the M-CARM.

Overall, the Go Beyond learning modules bring focus and attention to psychological and cultural factors that are often overlooked during transition, but we know are so important.

*"This is research in action – where scientific knowledge translates into real support for veterans" Dr Madeleine Romaniuk*

## Next chapter – Civilian Readiness Study

The next chapter of transition research aims to improve transition for Australian current serving members by focusing on developing a method to determine 'readiness' for civilian life prior to discharge.

The outcome of the research will enable timely detection and assessment of a person's needs before they transition. Additionally, it will inform development of education programs to inform current serving ADF members based on their needs and better equip them for the transition process.

This research area works closely with RSL Queensland, Mates4Mates and Open Arms.

Total team members	Total publications	Major research partners
12	13	RSL Queensland
		Department of Veterans Affairs
Conference presentations	Major research projects	University of Queensland
25	7	Mates4Mates
		Open Arms



# Liver Research Unit

## Overview

Our mission is to alleviate the burden of diseases that directly impact veterans and their families. Liver disease has been reported as the second most common cause of death in Australian Vietnam Veterans (*The Third Australian Vietnam Veterans Mortality Study, 2005 by The Australian Government Department of Veterans Affairs*). The clearly urgent need to address liver health issues for veterans has shaped the research projects within the unit. The GMRF Liver Research Unit focuses on liver disease and liver cancer. Research projects range from investigations to mitigate the effects of liver disease and stop cancer progression, to identifying new stem cells as a target for cancer treatment.

## Liver Disease Research

One in four Australian adults has or will have fatty liver disease. Many things can contribute to fatty liver disease, from genetics to eating fatty foods or drinking more than the recommended amount of alcohol. In the past year the GMRF Liver Research Unit's main liver disease research projects were:

- **Iron metabolism, Hepcidin Therapeutics, and Adipocyte Biology:** Currently under investigation by PhD candidate, Afolabi Akanbi. This project investigates the role of the hepcidin protein in fatty liver disease and its potential as a therapeutic drug that could slow or even reverse the impact of liver injury. The desired outcome is the use of a new drug for people with fatty liver disease and haemochromatosis.
- **Saliva based diagnosis of liver fibrosis and liver cancer:** PhD Candidate, Lucas Trevisan Franca de Lima is studying a minimally invasive way to detect liver disease by investigating if proteins present in saliva can reliably reflect the degree of liver fibrosis. This research has the potential to benefit millions of Australians in rural and remote areas with limited access to health care services. The research project aims to progress into addressing biomarkers of liver cancer in the future.

## Key Research Projects

- **Improving graft outcomes in liver transplantation:** completed in April 2021 by PhD Candidate Raji Baidya. Liver transplants are a common solution to severe liver disease. However, there are numerous limitations with liver transplantations including the scarcity of donor livers and the accelerating rise of unsuitable livers such as fatty livers. This research will help improve the number of successful liver transplants and increase the life expectancy of those on the transplant waitlist.

Total publications	Major research projects	Conference presentations
20	13	8



# Liver Cancer Research Unit

If left undetected over a long period of time, liver disease can from time to time turn into liver cancer. People diagnosed with liver cancer often present with advanced disease, as a result options are often limited. Lack of early detection methods and limited cancer treatment options are the main challenges. Liver cancer researchers have dedicated their time to uncovering new and innovative ways to alleviate the burden of liver cancer for veterans, and the wider Australian community. Projects in the past year include:

- **Therapeutic Targeting of Self Seeding Cells in Liver Cancer:** a challenge in treating liver cancer is our limited understanding of all of the factors that allow tumours to grow. Researchers at GMRF are studying the process of tumour self-seeding, whereby cancerous cells can leave the main tumour to travel and spread cancer to other parts of the body or return to the main tumour. Dr Tina Liang is investigating the mechanisms underlying this process to inform better treatment options.
- **Treatment induced hepatic stellate cell activation in liver cancer** – Dr Tina Liang's other project investigates the microenvironment around cancer cells and aims to understand the relationship between the environment and the cancer stem cells. Understanding the relationship can potentially inform new treatment options.
- **Improving treatment efficacy of stem cell-based therapy for bile duct disorders** – Research Assistant, Dr Lu Cao is examining a niche sub-population of cells, cancer stem cells, in bile duct cancer to determine how targeting them can lead to better treatment outcomes.

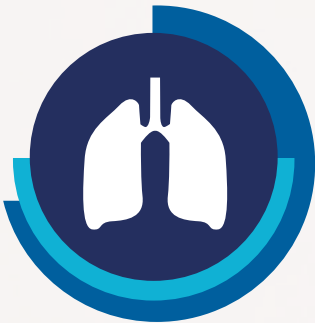
## Completed 2021

- **Cancer Stem cells and Drug Resistance - the mechanistic link and clinical relevance in HCC:** Completed by PhD Candidate Ritu Shrestha in 2021, this project investigated how subset of cancer cells, cancer stem cells, evade cancer treatments by changing their features. Currently, liver cancer treatments have relatively low success rates but this research investigates how we can combine treatments which target cancer stem cells and different cellular processes to achieve a better result for patients.

Major research partners	Total team members
The University of Queensland	Total..... 10
Queensland University of Technology	Researchers ..... 6
	PhD Candidates..... 4



# Respiratory Research Unit



## Overview

Nontuberculous Mycobacteria (NTM) disease and bronchiectasis are illness that are having a rising impact on people in our community. For most people the bacteria found in our water and soil are harmless but people with pre-existing lung conditions can be seriously impacted. There is a severe gap in knowledge within the respiratory sector and the Respiratory Research Unit is committed to filling this gap through collaborative research.

## Key Research Projects

The Respiratory Research Unit is contributing to multiple areas of interest for Nontuberculous Mycobacteria disease and bronchiectasis. From PhD research projects to collecting data for a sample registry, research projects in the past year include:

- **Mycobacterium abscessus in Drinking Water:** Conducted by PhD candidate Mark Clayton, this project investigates multiple sources of drinking water as a cause of NTM lung disease. Mark is collecting samples from current NTM patient households, local hospitals in South East Queensland and city water providers. By comparing the different strains of M. abscessus and types of water sources they are found in, scientists can better understand how bacteria are transmitted and find ways to prevent infections.
- **Mycobacterium intracellulare in soil and dust:** PhD candidate and experienced scientist Robyn Carter is working on identification of M. intracellulare from soil and house dust, and comparing the strains identified with those found in patients. Robyn is also comparing the genomes of patient isolates across different disease.
- **Building a biobank:** Dr Felicia Goh is building a specimen biobank at GMRF using samples collected from NTM patients in South East Queensland. The team are taking the opportunity to collect and store samples from patients as part of their usual care. This will enable future discoveries by ensuring researchers have a large collection of high quality samples to work with.
- **Contributing to the Australian Bronchiectasis Registry:** Bronchiectasis is associated with chronic infection of the airways. There is currently no cure and little information is available on the disease's incidence, diagnosis or mortality rates in Australasia. By collaborating nationally to expand the Australian Bronchiectasis Registry, GMRF is contributing to knowledge which will assist in informing future researchers and clinicians about the disease and ways to help those with bronchiectasis.
- **Beyond Air Clinical Trial:** led by internationally renowned Professor Rachel Thomson, this world first clinical trial conducted in partnership with GMRF Clinical Trial Unit began in May 2021. This trial investigates the use of nitric oxide for NTM disease.

Total research projects

12

Conference presentations

8

Major research projects

4

Total team members

Total ..... 7

Researchers ..... 6

PhD Candidates ..... 1

Major research partners

Centre for Childrens' Health Research

The Prince Charles Hospital

The University of Queensland



# PhD scholarship program

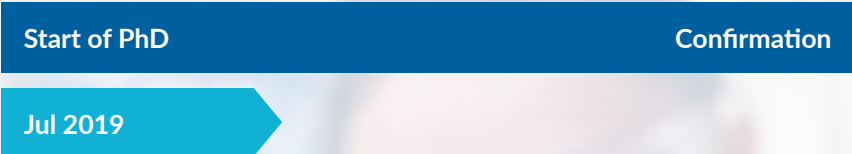
## Current PhD Candidates

GMRF is proud to facilitate a rich learning environment for scientists and researchers of the future. Providing a world class facility for international and national PhD candidates to conduct life changing science is a commitment by GMRF in collaboration with Greenslopes Private Hospital and The University of Queensland. Across 2020 and 2021 two PhD candidate submitted their thesis projects while two candidates began their journey.



### Afolabi Akanbi

Afolabi is part of the GMRF Liver Research Unit, led by Professor Darrell Crawford. Afolabi is studying the role of the protein hepcidin in liver disease and the potential to use a drug to mitigate the progression of liver disease. Afolabi passed his first PhD milestone in July 2020 Afolabi is progressing well and is expected to complete his PhD in late 2022.



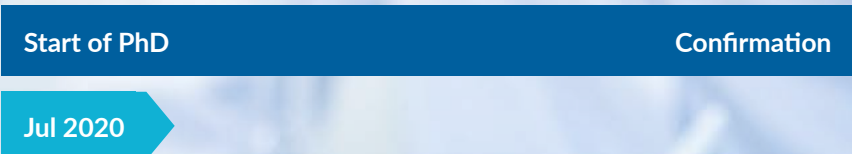
### Lucas Trevisan Franca De Lima

Lucas, also part of the GMRF Liver Research Unit is undertaking an important investigation to help predict and prevent liver disease by identifying proteins present in saliva. This project has the potential to benefit rural and remote communities where diagnostic techniques are limited. Lucas began his PhD project in early 2020, successfully passing his first milestone in August 2020. Lucas is expected to complete his PhD project in 2023. Lucas's PhD is proudly sponsored by the Thorsen Family Foundation.



### Mark Clayton

Mark began his PhD in the Respiratory research Unit in July 2020 under supervision of Professor Rachel Thomson. His thesis is investigating the incidence of Mycobacteria abscessus in local drinking water. This knowledge will assist in understanding how the bacteria is transmitted, with a view to developing ways of controlling the organism in the environment and reducing human exposure. Mark is expected to complete his PhD in July 2023. Mark's PhD is proudly sponsored The Pacific Golf Club's Patron's Scholarship.



## PhD Completion



### Ritu Shrestha

Ritu's thesis centred on identifying how drug therapy can target treatment resistant cancer stem cells. By targeting a different cancer cell processes, which are less resistant to the treatment, some liver cancer patients may have an improved treatment response and increased chance of survival.



### Raji Baidya

Raji's thesis focussed on understanding cell death in donor fatty livers in the context of liver transplantation hoping to ensure more donor organs were available for transplant. In March 2021 Raji submitted her final thesis for examination and has undergone the oral examination required before confirmation. Raji expects to receive her PhD confirmation before the end of 2021.



## Through their PhDs, Raji and Ritu:







## GMRF Innovation Grants

Owing to the ongoing COVID19 pandemic during 2020 and into 2021, the GMRF Innovation Grants Program for Greenslopes Private Hospital staff was unable to commence. The GMRF Innovation Grants aim to provide an immediate and meaningful difference that contributes to practical advances in hospital operations and patient outcomes. The grants are an opportunity for GMRF to facilitate research in the hospital

campus, in recognition of GPH for their ongoing support of the Foundation. In May 2021, GMRF re-launched the program with a revised application process encouraging a broader range of applicants, receiving more than previous years. The Innovation Grants will benefit GPH through improved patient care and innovative staff education and training.



## Cancer Wellness Program

The Cancer Wellness Program, proudly supported by GMRF, is run at Greenslopes Private Hospital and is a unique program that fosters peer to peer support within a community of people receiving cancer treatment at GPH. It facilitates positive relationships between patients by providing emotional and practical support and education resources. Furthermore, the Program not only supports those living with cancer, but also their loved ones. This holistic approach to wellness has had a positive impact on many participants in the program. The Cancer Wellness Program is delivered by an experienced Clinical Nurse in the Cyril Gilbert Cancer Centre, specialising in oncology. The Coordinator's thorough understanding of oncology and cancer treatment provides patients and families peace of mind and support.

### Cancer Wellness Program during COVID19

- The Cancer Wellness Program Coordinators demonstrated agility when adapting to COVID19 circumstances. Aiming to provide a community of support with tight restrictions the Coordinators:
- Developed a wellness newsletter to keep members in good spirits and share resources
  - Turned to web based online conference platforms to deliver programs virtually. Additionally the virtual swap enabled members located in rural areas to access information and advice
  - Became an invaluable friendly face to many patients admitted to the wards at Greenslopes who were isolated due to restrictions. Connecting with patients online enabled the Coordinators to lift spirits and have a positive impact on patients' mental health in the absence of their own family/friends and support network.

Number of active participants* in the past year	Number of group sessions run (both in person and online)	Number of participants at sessions*
417	46	105

\*Participants are classified as active if they attend sessions or, receive resources and information via email or, have private consultations with the Cancer Wellness Coordinator

\*Many participants attend multiple sessions. Sessions include craft, education and community catch ups



## GMRF Board of Directors



### Chairman

#### Mr Liam Kelly

BA (Hons) LLB (Hons) (UQ); BCL (Oxon)

#### Barrister and Senior Counsel

Mr Liam Kelly graduated from the University of Queensland in 1988 with honours in English literature and in law. He commenced private practice as a barrister in Brisbane in 1992 and continues to practise at the bar as a Queen's Counsel.



### Deputy Chairperson

#### Ms Chris Went

RN, BN, GradCert Critical Care, GradCert Emergency, GradCert Business Admin

#### CEO of Greenslopes Private Hospital

Currently the Chief Executive Officer of Greenslopes Private Hospital which is one of the largest Private hospitals, Chris leads the GPH executive team in managing the daily operations.



### Director

#### Professor Scott Bell

MBBS, FRACP, MD

#### Chief Executive Officer, The Translational Research Institute (TRI)

Professor Scott Bell is the Chief Executive of the Translational Research Institute and a Senior Physician of the Adult Cystic Fibrosis Centre at TPCH (>320 patients) where he has worked since 1996 in Brisbane. He leads the Lung Bacteria Laboratory at UQ's Children's Health Research Centre.



### Director

#### Dr Amanda Dines OAM

MBBS, MPH, FRACGP, FRACMA

#### Acting Director Medical Services, Redcliffe Hospital, Metro North Hospital and Health Service

Dr Amanda Dines was appointed as the Acting Director Medical Services Redcliffe Hospital, Metro North Hospital and Health Service in July 2020 and, since January 2020, has been Director General Health Reserves - Air Force. She has also served as the Honorary Aide de Camp to the Governor General of Australia since 2014.



### Director

#### Professor John Horvarth OA

M.B, B.S, E.C.F.M.G., M.R.A.C.P., F.R.A.C.P., F.R.A.C.P.(Hon), F.A.A.H.M.S.

#### Strategic Medical Advisor, Ramsay Health Care

Professor John Horvath AO was appointed as Strategic Medical Advisor for Ramsay Health Care in 2016. Professor Horvath served as Australia's Chief Medical Officer between 2003 and 2009 and has served as Chair of the Health Committee on the National Health and Medical Research Council (NHMRC). He has represented Australia's interest with the World Health Organisation and was Deputy Chair of the WHO's international cancer research institute based in Lyon, France. He was awarded an Officer in the Order of Australia in 2001.



### Director

#### Mr Tom Ryan OAM

B Pharm, FACP, FAICD

#### Former Director and Chairman, Australian Pharmaceutical Healthcare Systems (APHS)

Tom was a founding partner, Director and Chairman of the Australian Pharmaceutical Healthcare Systems Group. He also owned and operated the pharmacy service at Greenslopes Private Hospital (GPH) from 1995 until 2010.



### Director

#### Mr Rob Skoda

BSc, Masters Business

#### General Manager, Veteran Affairs and Policy

Robert Skoda commenced his career as a Ground Defence Officer in the Royal Australian Air Force, is a current reservist and has deployed to Afghanistan, Middle East and Timor Leste. Since 2016 has demonstrated commitment to the military family through growing and enhancing RSL Queensland services.



### Director

#### Professor Stephen Gray

PhD, LLB (Hons), Bcom (Hons)

#### Professor of Finance at the University of Queensland Business School and Chairman of Frontier Economics

Stephen Gray has been a Professor of Finance at the University of Queensland since 2000, and a Director of advisory firm Frontier Economics since 2014. He teaches a range of award and executive education courses in financial management, asset valuation, and corporate finance.



## Retired Directors in 2020

Four GMRF Board Members retired in 2020. GMRF would like to thank Ms Carmel Monaghan, Dr Michael Harrison, Professor Gerald Holtmann and Mr Karl Morris for their dedication and service in leading GMRF to success over many years.

### Ms Carmel Monaghan

B.BusComm, MBA

Chief Executive Officer (CEO) of Ramsay Health Care's (Ramsay) Australian operations

### Mr Karl Morris

BCom, FAICD, MSAFAA, FFSIA

Executive Chairman of Ord Minnett Limited

### Dr Michael Harrison

MBBS(1st Class Honours). FRCPA (General Pathology)

Chief Executive Officer/Managing Partner of Sullivan Nicolaides Pathology and is a Consultant Pathologist at the main Taringa Laboratory.

### Professor Gerald Holtmann

MD, PhD, MBA, FRACP, FRCP

## Committees

### Executive Committee

The role of the GMRF Executive Committee is to implement the strategic direction of the Board of Directors and to oversee the day to day management of the Foundation in line with our vision, mission and values.

#### 2020/2021 Members

Ms Miriam Dwyer, GMRF Chief Executive Officer

Ms Jane O'Brien, GMRF Chief Operating Officer

Professor Darrell Crawford, GMRF Director of Research

Dr Suzanne Elliott, GMRF Associate Director of Clinical Trials

Dr Madeline Romaniuk, GMRF Associate Director of Mental Health Research

Ms Laura McMahon, GMRF Director of Marketing and Development

Ms Julieann Keyser, GMRF Translational Research Unit Manager/HR Advisor

### Research Advisory Committee

The Research Advisory Committee (RAC), established by the Gallipoli Medical Research Foundation (GMRF) Board of Directors, provides independent expert advice to the Board to ensure the highest quality research is considered, supported and delivered by the Foundation.

#### 2020/2021 Members

Dr Amanda Dines (Chair)

Professor Scott Bell

Professor John Horvath

Dr Andrew Khoo

Dr Ian Gardner

Dr Richard Skoien



## Patrons and ambassadors



### Patron

#### Dame Quentin Bryce

##### AD CVO

A. LLB (Qld). Hon LLD (Macquarie). Hon DLitt (Charles Sturt). Hon DUniv (Griffith). Hon DU (QUT). Hon LLD (Qld). Hon DUniv (JCU). Doctor of Laws (honoris causa) (Syd). Doctor of Letters (honoris causa) (UWS). Doctor of Laws (honoris causa) University of Melbourne

The Honourable Dame Quentin Bryce AD CVO has enjoyed a rich and distinguished career as an academic, lawyer, community and human rights advocate, senior public officer, university college principal, and vice-regal representative in Queensland, and now Australia. On 5 September 2008 Quentin Bryce was sworn in as Australia's twenty-fifth Governor-General. As the first woman to take up the office, she remains a pioneer in contemporary Australian society, and yet one who brings more than forty years of experience in reform, community building and leadership to the role.



### Patron

#### Professor John Pearn

AO RDF MBBS (Hons I), MD (Qld), PhD (Lond), DSc, MPhil, DCH, FRACP, FRCP, FRCPS (Glas), FRACMA, FCollTropMed (Australas), FCollTropMed (USA), FAMA, FADI, FAIM, FLS

Major General John Pearn has served as one of Australia's most senior doctor-soldiers. Professor Pearn is Senior Paediatrician at the Queensland Children's Hospital where he has served as a full-time staff clinician since 1968. His major clinical, research and teaching interests in paediatrics and internal medicine have included medical genetics, clinical toxicology, bioethics and accident prevention.



## Veteran Ambassador

### Tim Thomas

Tim Thomas is an ex-special forces Commando with deployments to Afghanistan and East Timor. Tim joined the GMRF Team as a Veteran Ambassador to help promote GMRF's research in veteran mental health and reintegration.



## GP Ambassador

### Dr Phil Parker

MBBS, BEd, BappSci(Hons1), FRACGP

Dr Parker works as a general practitioner at Newstead in inner Brisbane. He enlisted as an Army soldier in 1988 and has served in both full and part time roles over 27 years. As the Foundation's GP Ambassador, he provides advice about PTSD management within primary health care and continues to educate fellow GPs about the condition.



## Media Ambassador

### Pat Welsh

7 News sports editor, reporter and presenter Pat Welsh is one of Australia's leading sports journalists and commentators. Pat was a Founding Board Director for the Gallipoli Medical Research Foundation. He's continued his unwavering commitment to the Foundation as an Ambassador, generously donating his time and talents to GMRF events.



# Acknowledgement

Our heartfelt thanks to the 1,010 donors who gave generously in 2020/2021 to fund our research and initiatives.

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<b>Mastery (\$500,000 +)</b>	Calleija Jewellers	Queensland X-Ray
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Kedron-Wavell Sub Branch RSL & Kedron Wavell Services Club Inc	<b>Innovator ( \$10,000 +)</b>
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Pacific Golf Club	Clarries Green
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Estate of Jean Linz
Estate of Eugenie J MacLennan
Mr G.D (Doug) Murray
Estate of Shirelle Nahow
Estate of Mrs Jean Pocket
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Estate of W.G. Patrick

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Redlands RSL
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RSL Pioneer-Fitzroy-Highlands District Branch Inc.
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Sherwood Services Club Inc.
Stephens RSL Sub Branch
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## Individuals

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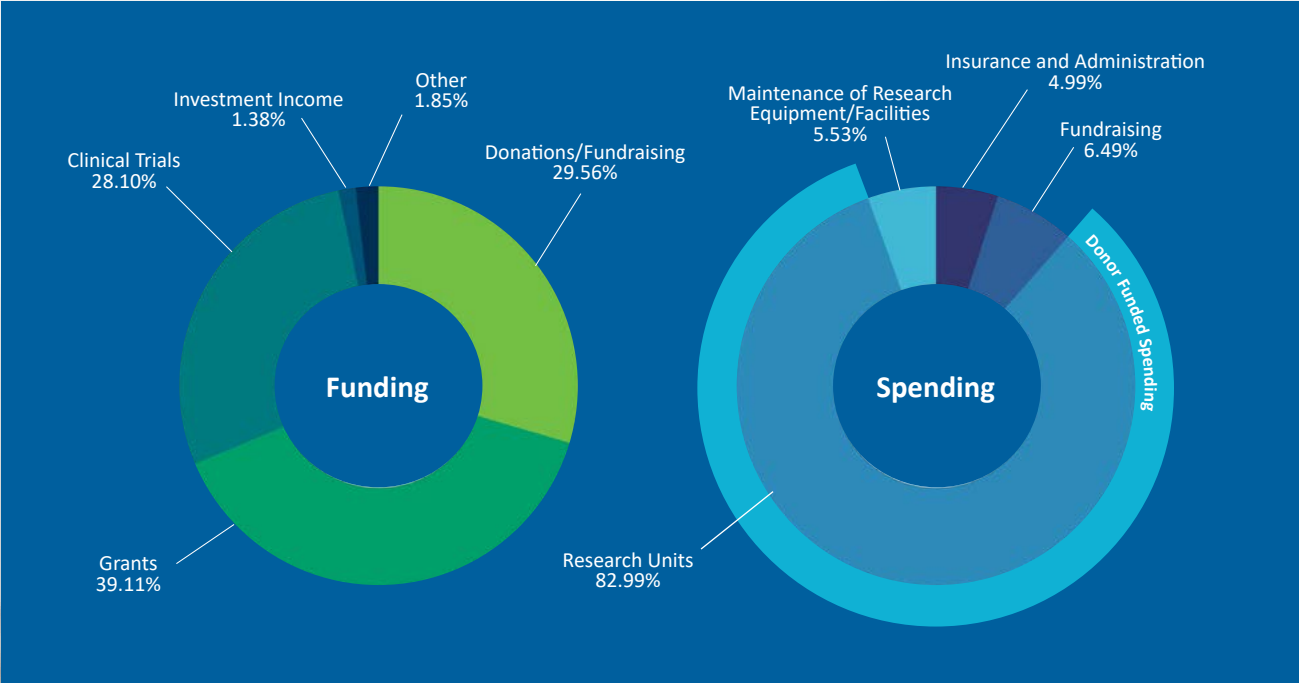
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Dr P Whiting
Mrs Alma Williams
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Dr Glen & Mrs Susan Wood



Facilitating GMRF growth

The 2020/21 financial result exceeded expectations. Total revenue grew to \$6.95M due largely to increased grant funding and growth in clinical trials. Our wonderful supporters continued to give generously with just over \$2M received from donations, fundraising and bequests. Expenditure totalled \$5.23M leading to an operating result for the year of \$1.71M. GMRF is fortunate to have very low overheads due to the significant in-kind support provided by Greenslopes Private Hospital. The Foundation strives to allocate as much as possible to its research activates and this is reflected in the expenditure breakdown with 83% spent directly on GMRF’s ground-breaking research and clinical trials.

With interest rates at an all time low the Board agreed to diversity our investments this year to improve capital growth and income from existing cash and term deposits. \$5M was invested via an external wealth management company with a ‘balanced’ portfolio incorporating equities, fixed interest, and property. The portfolio performed strongly and this, combined with a strong Balance Sheet, leaves the Foundation with a strong financial base and financial stability in the longer term.



*“As the world changed and adapted to COVID, I’m pleased to see GMRF maintained financial stability and capacity to continue conducting important research with thanks to our donors, corporate partners and GPH”* Jane O’Brien, GMRF Chief Operating Officer

Facilitating GMRF growth

GMRF’s world class research, clinical trials and hospital connection programs would not be possible without the unwavering support of our valued donors. From regular donors to corporate research partners, the financial support of our community enables GMRF scientists to advance the health of Australian veterans and their loved ones through research. We have been very fortunate over the last year to have the received ongoing support from our community, supporters and corporates that has enable us to continue to deliver innovative research and programs that help the community.

Although restrictions left us unable to see our supporters face to face, we managed to find new and innovative ways to engage with our community. We received critical support through:

- Corporate partnerships - our flagship research partners commit to long term research funding, investing in the future of research as well as providing resources to help people right now at Greenslopes Private Hospital
- Major givers – the support of major donors significantly help to fast-track research projects and provide extra resources for the Cancer Wellness Program
- Gifts in will – making a lasting difference to future generations, gifts in will significantly contribute to scientific advancement
- Regular donors – our community of everyday heroes pledging to frequently contribute to the areas of greatest needs
- Community Groups – investigating solutions for veterans allows us to connect with the many ex-service organisations that advocate for GMRF and provide financial support

GMRF receives no government funding. All our research is funded by generous donors, community groups and like-minded corporations. The dedicated and secured funding allows our research and programs to continue into the future with the thanks to our supporters.



*“Joining the team in 2021 allowed me to witness first-hand, not only the ground-breaking research being conducted at GMRF, but also the dedication and commitment of the community to ensure this research continues.”* Laura McMahon, Director of Marketing and Development



Veteran Mental Health Publications

1. Sumner, J.A., Maihofer, A.X., Michopoulos, V., Rothbaum, A., Almlil, L.M., An-dreassen, O. A., Ashley-Koch, A.E., Baker, D.G., Beckham, J.C., Bradley, B., Breen, G., Coleman, J.R.I., Dale, A.M., Dennis, M.F., Feeny, N.C., Franz, C.E., Garrett, M.E., Gillespie, C.F., Guffanti, G., Hauser, M.A., Hemmings, S.M.J., Jovanovic, T., Kimbrel, N.A., Kremen, W.S., Lawford, B.R., Logue, M., Lori, A., Lyons, M.J., Maples-Keller, J., Mavissakalian, M.R., McGlinchey, R. E., Mehta, D., Mellor, R., Milberg, W., Morris, C.P., Panizzon, M.S., Ressler, K.R., Risbrough, V.B., Rothbaum, B.O., Roy-Byrne, P., Seedat, S., Smith, A.K., Stevens, J.S., Van Den Heuvel, L.L., Voisey, J., Young, R., Zoellner, L., Nievergelt, C.M., Wolf, E.J. (2021). Examining Individual and Synergistic Con-tributions of PTSD and Genetics to Blood Pressure: A Trans-ethnic Meta-analysis. *Frontiers in Neuroscience (Neurogenomics)*, Vol 15 (June), 1-14. doi: 10.3389/fnins.2021.678503

2. Crawford, D., Mellor, R., Teo, A., Duenow, P., Connolly, L., “ Post-Traumatic Stress Disorder Is Associated with an Increased Rate of Polypectomy Inde-pendent of Increased Diagnostic Colonoscopy Rates in Australian Veterans” - In review with DVA pre-submission.

3. Mellor, R., Khoo, A., et al. “Investigation of the rate of psychotropic polypharmacy in Australian veterans with posttraumatic stress disorder upon admission to an in-patient mental health facility – a retrospective chart review” - In draft

4. Young, R., Lawford, B., Mellor, R., Morrisa, C.P., Voisey, J., “C reactive Pro-teïn and AIM2 Methylation as a marker for PTSD in Australian Vietnam veter-ans” - In Review

5. Maguire, A. M. (2021, April). Generic Measures of Health and Wellbeing - Ex-ecutive Summary. Brisbane, Australia: Gallipoli Medical Research Foundation.

6. Maguire, A. M. (2020, July). Families with a Veteran - A Model of Care. Bris-bane, Australia: Gallipoli Medical Research Foundation and RSL Queensland

7. Maguire, A. M. (2020, July). The Australian Defence Community needs as-sessment report: Priority areas for service planning. Brisbane, Australia: Gallip-oli Medical Research Foundation and RSL Queensland.

8. Maguire, A. M. (2019, October). Invited Written Interview: PTSD, Trauma, and Childhood Trauma. Brisbane, Australia: Gallipoli Medical Research Foundation.

9. Kerr, K., Romaniuk, M., McLeay, S., Khoo, A. (2021). The relationship between guilt, mental illness and suicide attempts among combat veterans with PTSD. *Journal of Veteran Military Health* (in press).

10. Evans, J., Romaniuk, M., Theal, R. (2021). Evaluation of mental health first aid training for family members of military veterans with a mental health condition. *BMC Psychiatry*, 21, 128.

11. Romaniuk, M., Fisher, G., Kidd, C., Batterham, P. (2020). Assessing psycho-logical adjustment and cultural reintegration after military service: development and psychometric evaluation of the post-separation Military-Civilian Adjustment and Reintegration Measure (M-CARM). *BMC Psychiatry*, 20, 531.

12. Theal, R., Kerin, J. L., & Romaniuk, M. (2020). Psychosocial Outcomes of Aus-tralian Male and Female Veterans Following Participation in Peer-Led Adven-ture-Based Therapy. *Journal of Veterans Studies*, 6 (2), 70–87.

13. INTERNAL - Open Arms Pilot Review, July 2021. Julieann Keyser

Liver Research Unit Publications

1. Ruan Q, Wang H, Burke LJ, Bridle KR, Li X, Zhao CX, Crawford DHG, Roberts MS, Liang X. 2020. Therapeutic modulators of hepatic stellate cells for hepatocel-lular carcinoma. *International Journal of Cancer*. 147(6):1519-1527. doi: 10.1002/ijc.32899.

2. J Yang, M Hou, W Sun, Q Wu, J Xu, L Xiong, Y Chai, Y Liu, M Yu, H Wang, ZP Xu, X Liang, C Zhang. 2020. Sequential PDT and PTT using dual-modal single-walled carbon nanohorns synergistically promote systemic immune responses against tumor metastasis and relapse. *Adv Sci*. 2020, 7(16):2001088.

3. LJ Spannenburg, M Cook, A Brooks, S Wei, X Li, X Liang, W Gao, H Wang. 2020. Surgical Outcomes of Colonic Stents as a Bridge to Surgery versus Emergency Surgery for Malignant Colorectal Obstruction: A Systematic Review and Meta-analysis of High Quality Prospective and Randomised Controlled Trials. *Eur J Surg Oncol*. 2020, 46(8):1404-1414

4. Y Zhang, H Wang, T Chen, H Wang, X Liang, Y Zhang, J Duan, S Qian, K Qiao, L Zhang, Y Liu, J Wang. 2020. C24-ceramide drives gallbladder cancer progression through directly targeting PIP4K2C to facilitate mTOR signaling activation. *Hepa-tology*. 2021, 73 (2), 692-712.

5. J Yan, H Feng, H Wang, F Yuan, C Yang, X Liang, W Chen, J Wang. 2020. He-patic artery classification based on three-dimensional CT. *British Journal of Sur-gery* 2020. Doi:10.1002/bjs.11458.

6. Reiling J, Butler N, Simpson A, Hodgkinson P, Campbell C, Lockwood D, Bridle K, Santrampurwala N, Britton L, Crawford D, Dejong C, Fawcett J. 2020. Assess-ment and transplantation of orphan donor livers - a “back-to-base” approach to normothermic machine perfusion. *Liver Transplantation*, 26:1618-1628. doi: 10.1002/lt.25850.

7. R Baidya, DHG Crawford, J Gautheron, H Wang, KR Bridle. 2020. Necroptosis in hepatosteatotc ischaemia-reperfusion injury. *International Journal of Molecular Sciences*, 21(16):5931.

8. DS Barkauskas, G Medley, X Liang, YH Mohammed, CA Thorling, H Wang, Hao-lu, MS Roberts. 2020. Using in vivo multiphoton fluorescence lifetime imaging to unravel disease-specific changes in the liver redox state. *Methods Appl Fluoresc*. 2020, 7;8(3):034003.

9. Brooks A, Liang X, Zhang Y, Zhao CX, Roberts MS, Wang H, Zhang L, Crawford DHG. Liver organoid as a 3D in vitro model for drug validation and toxicity as-sessment. *Pharmacol Res*. 2021, 169:105608.

10. Baidya R, Gautheron J, Crawford DHG, Wang H, Bridle KR. Inhibition of MLKL Attenuates Necroptotic Cell Death in a Murine Cell Model of Ischaemia Injury. *J Clin Med*. 2021 Jan 8;10(2):212.

11. Lubel JS, Roberts SK, Strasser SI, Thompson AJ, Philip J, Goodwin M, Clarke S, Crawford DH, Levy MT, Shackel N. Australian recommendations for the manage-ment of hepatocellular carcinoma: a consensus statement. *Med J Aust*. 2020 Dec 13. doi: 10.5694/mja2.50885. Online ahead of print.

12. L Trevisan França de Lima, D Broszczak, X Zhang, K Bridle, D Crawford, C Pu-nyadeera The use of minimally invasive biomarkers for the diagnosis and progno-sis of hepatocellular carcinoma, *BBA - Reviews on Cancer* (2020), 1874(2):188451.

13. Shrestha R, Bridle KR, Cao L, Crawford DHG, Jayachandran A. Dual Targeting of Sorafenib-Resistant HCC-Derived Cancer Stem Cells. *Curr Oncol*. 2021 Jun 11;28(3):2150-2172. doi: 10.3390/curroncol28030200.

14. Shrestha R, Bridle KR, Crawford DHG, Jayachandran A. Immune checkpoint mol-ecules are regulated by transforming growth factor (TGF)- β 1-induced epithelial-to-mesenchymal transition in hepatocellular carcinoma. *Int J Med Sci*. 2021 Apr 22;18(12):2466-2479. doi: 10.7150/ijms.54239. eCollection 2021.

15. Shrestha R, Prithviraj P, Bridle KR, Crawford DHG, Jayachandran A. Combined Inhibition of TGF-β1-Induced EMT and PD-L1 Silencing Re-Sensitizes Hepatocel-lular Carcinoma to Sorafenib Treatment. *J Clin Med*. 2021 Apr 27;10(9):1889. doi: 10.3390/jcm10091889.

16. Crawford DHG, Ross DGF, Jaskowski LA, Burke LJ, Britton LJ, Musgrave N, Briskey D, Rishi G, Bridle KR, Subramaniam VN. Iron depletion attenuates steato-sis in a mouse model of non-alcoholic fatty liver disease: Role of iron-dependent pathways. *Biochim Biophys Acta Mol Basis Dis*. 2021 Jul 1;1867(7):166142. doi: 10.1016/j.bbadis.2021.166142. Epub 2021 Apr 9.

17. Cao L, Prithviraj P, Shrestha R, Sharma R, Anaka M, Bridle KR, Kannourakis G, Crawford DHG, Jayachandran A. Prognostic Role of Immune Checkpoint Regula-tors in Cholangiocarcinoma: A Pilot Study. *J Clin Med*. 2021 May 19;10(10):2191. doi: 10.3390/jcm10102191.

18. Wang H, Ruan Q, Burke L, Cao L, Bridle K, Crawford D, Liang X. 2020. Reactive oxygen species/platelet-derived growth factor receptor β paracrine loop contrib-utes to chemotherapy-induced hepatic stellate cell activation in liver cancer. *Jour-nal of Gastroenterology and Hepatology*, 35 (Suppl. 1):S22.

19. Shrestha R, Bridle KR, Crawford DHG, Jayachandran A. 2020. Combination tar-geting of epithelial-to-mesenchymal transition and immune checkpoint molecules resensitizes hepatocellular carcinoma to sorafenib treatment. *Journal of Gastroen-terology and Hepatology*, 35 (Suppl. 1):S28

20. Baidya R, Zacchi L, Gautheron J, Wang H, Crawford D and Bridle K. 2020. Pre-dicting graft dysfunction in steatotic donor livers: Analysis of differentially abundant proteins and pathways during ischemic injury in steatotic hepatocytes. *Journal of Gastroenterology and Hepatology*, 35 (Suppl. 1):S22.



Respiratory Research Unit Publications

1. Winthrop KL, Flume PA, Thomson R, Mange KC, Yuen DW, Ciesielska M, et al. Amikacin Liposome Inhalation Suspension for Mycobacterium avium Complex Lung Disease: A 12-Month Open-Label Extension Clinical Trial. *Annals of the American Thoracic Society*. 2021;18(7):1147-57.

2. Burke A, Smith D, Coulter C, Bell SC, Thomson R, Roberts JA. Clinical Pharmacokinetic and Pharmacodynamic Considerations in the Drug Treatment of Non-Tuberculous Myco-bacteria in Cystic Fibrosis. *Clinical Pharmacokinetics*. 2021.

3. van Ingen J, Aliberti S, Andrejak C, Chalmers JD, Codecasa LR, Daley CL, et al. Man-agement of drug toxicity in M. avium complex pulmonary disease – an expert panel sur-vey. *Clinical Infectious Diseases*. 2020.

4. Thomson RM, Furuya-Kanamori L, Coffey C, Bell SC, Knibbs LD, Lau CL. Influence of climate variables on the rising incidence of nontuberculous mycobacterial (NTM) infec-tions in Queensland, Australia 2001–2016. *Science of The Total Environment*. 2020;740:139796.

5. Shoemark A, Finch S, Torres A, Elborn S, Ringhausen F, De Soyza A, et al. Sex related differences in aetiology, severity and quality of life in bronchiectasis: data from the EM-BARC, EMBARC-India and Australian bronchiectasis registries. *European Respiratory Journal*. 2020;56(suppl 64):3335.

6. Ruis C, Bryant J, Bell S, R T, Davidson R, Hasan N, et al. Dissemination of Myocbacte-rium abscessus via global transmission networks. *Nature Microbiology*. 2021.

7. Griffith DE, Thomson RM, Flume PA, Aksamit TR, Field SK, Addrizzo-Harris DJ, Morimo-to K, Hoefsloot W, Mange KC, Yuen DW, Ciesielska M, Wallace Jnr RJ, van Ingen J, Brown-Elliott B, Coulter C, Winthrop KL, for the CONVERT Study Group. Amikacin Lipo-some Inhalation Suspension for Refractory MAC Lung Disease: Sustainability and dura-bility of culture conversion and safety of long-term exposure.

8. Amikacin Liposome Inhalation Suspension for Refractory MAC Lung Disease: Sustaina-bility and durability of culture conversion and safety of long-term exposure.

9. Kapur N, Stroil-Salama E, Holmes-Liew C-L, King P, Middleton P, Maguire G, et al. Pre-dictors of ‘Frequent Exacerbator’ phenotype in children with bronchiectasis: the first report on children from the Australian Bronchiectasis Registry. *Respirology*. 2021;26.

10. Lee A, Smith R, Osadnik C, Burr L, Chang A, Holmes-Liew C-L, et al. The educational needs of people with bronchiectasis in a pulmonary rehabilitation setting. *European Res-piratory Journal*. 2020;56(suppl 64):76.

11. Shoemark A, Finch S, Torres A, Elborn S, Ringhausen F, De Soyza A, et al. Sex related differences in aetiology, severity and quality of life in bronchiectasis: data from the EM-BARC, EMBARC-India and Australian bronchiectasis registries. *European Respiratory Journal*. 2020;56(suppl 64):3335.

12. Stockwell RE, Leong L, Wheeler N, Bryant J, Wood M, Sherrard L, et al. Alternative transmission pathways of Mycobacterium abscessus group (MABS) respiratory infections. *Respirology*. 2020;25.

Clinical Trials Unit Publications

1. Atkinson V, Quagliano, P, Aglietta M, Del Vecchio M, Depenni R, Consoli F, Bafa-loukis D, Ferruci P, Tulyte S, Krajsova I, Ascierto P, Gueli R, Arance A, Gogas H, Banerjee H, Salidba T, de Jong E, and Neyns B, (2021) A retrospective analysis of Dabrafenib and or Dabrafenib Plus Trametinib Combination in Patients with Metastatic Melanoma to Characterise Patients with long term benefit in the Indi-vidual patient Program (DESCRIBE III) *Cancers* 13 (10 )2466 <https://doi.org/10.3390/cancers13102466>

2. Ferrucci P, Di Giacomo M, Del Vecchio M, Atkinson V, Schmidt H, Schacter J, Queirolo P, Long G, Stephens R, Svane I, Lotem M, Abu-Amna M, Gasal E, Ghorri R, Diede S, Croydon E, Ribas A, and Ascierto P. (2020) Keynote-022 part 3, a randomised, double-blind, phase 2 study of Pembrolizumab, dabrafenib and trametinib in BRAF mutant melanoma. *Journal of Immunotherapy Cancer* <https://doi.org/10.1136/jitc-202-001806>

3. Dummer R, Lebbe C, Atkinson V, Mandala M, Nathan P, Arance A, Richtig E, Yamazaki N, Robert C, Schadendorf D, Tawbi H, Ascierto P, Robas A, Flaherty K, Pakhle N, Cambell C, Gusenleiter D, Masood A, Brase J, Gasal E and Long G. (2020)

4. Combined PD-1, BRAF and MEK inhibition in advanced BRAF mutant melanoma: safety run in and biomarker cohorts of COMBI-I. *Nature Medicine* 26. 1557-1563 <https://doi.org/10.1038/s41519-020-1082-2>

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