More than a network

The IHMRI Research Network was launched on 9 December 2009 and growth during its first year has been steady.

The IHMRI Research Network is a community of academic researchers, clinicians and others in the health sector with a common interest in advancing health and medical research. It supports the sharing of information, connection of individuals and organisations around common research interests, and facilitates collaborative research initiatives.

Now over 500 members strong, this collection of professionals from healthcare and medical science has seen some promising partnerships form and in many cases, progress to successful collaborations.

Achieving our vision of better health services and a healthier Illawarra community is critically linked to strong partnerships via the Network.

At the end of November, the IHMRI Research Network had:
- 350 members;
- 120 individual associates and 26 organisation associates; and
- 15 national collaborators and 4 international collaborators.

Now that the Research Network has been established, maintaining and improving engagement with all members is our challenge.

One of the issues we are looking to address is diversity within the network. Members range from privately operating cardiologists, to mental health support...

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News

Building community

The new IHMRI building has received recognition as a development that demonstrates excellence in providing community benefit, picking up Highly Commended in the Property Development Award from the Australian Property Institute (NSW Chapter). As part of its annual Excellence in Property Awards, the API said the IHMRI building was “realised on time and on budget (and) provides a focal point for all health and medical research within the Illawarra”.

OH&S Award

Congratulations to Dr Kellie Ridges, IHMRI’s Operations Manager, Laboratory and Clinical Research, who has been recognised for leadership in occupational health and safety. For her ongoing initiative in this area, Kellie was a joint winner of the Safety Leadership Award in the UOW Workplace Health and Safety Awards on 25 October. Kellie’s commitment to OH&S was particularly apparent during the move of administration staff, laboratory equipment and research staff into IHMRI’s new building.

Second OSMR grant welcomed

The NSW Office of Science and Medical Research (OSMR) has granted IHMRI $679,931 under its Medical Research Support Program for the 2010–11 financial year. This funding follows a comparable, inaugural OSMR grant in 2009–10. “This grant will allow IHMRI to continue to implement an effective strategic and administrative program to drive our overarching vision, without affecting current research funding blocks,” according to Chief Operating Officer, Sue Baker-Finch.

Nutrition’s healthy

Twenty-eight student research projects were presented to the annual School of Health Sciences Nutrition Research Day on 3 November. Posters reflecting the research projects undertaken were displayed outside of two lecture theatres running concurrent student presentations. Topics were varied and included studies on the impact of diet on health outcomes, with a focus on mental health and diabetes.

Cancer Carers visit

IHMRI hosted a visit by 40 members of the Illawarra Cancer Carers on 24 November, which saw the University of Wollongong present them with a donation of $100,000 for cancer research. The volunteer group have raised over $2 million for cancer support, treatment and research in the Illawarra over the past 20 years. Following an update by Professor Philip Clingan on the progress of the Flurodex drug development project, the President of the Illawarra Cancer Carers, Sue Maxidin, and Cancer Carers volunteer Keith Wilson, presented Professor Clingan and Associate Professor Marie Ranson with a cheque for $100,000 for University of Wollongong cancer research.

Conference collaboration on personality disorder

The fourth annual conference on the Treatment of Personality Disorder—Consultation was held in early November at the Northfields Clinic. Hosted by the UOW Clinical Psychology program and the SESIAHS Specialist Psychological Service, the conference aimed to provide an opportunity for professionals in the field to discuss current and emerging issues in the treatment of personality disorders.

Illawarra Mental Health Awareness Expo

Almost 200 members of the community attended the inaugural Illawarra Mental Health Awareness Expo on 12 October to discover more about 25 local mental health support and treatment services. The Expo was an idea generated from the first Illawarra Mental Health Roundtable in June and aimed to address the lack of awareness of the variety of mental health support available, both in the community, and between organisations in this area. A major success of the day, which was coordinated and hosted by IHMRI, was the overwhelmingly positive responses from support services that participated in the event. Organisations involved included Mission Australia, Alcoholics Anonymous, Lifeline, Uniting Care Aged, ARAFMI, Northfields Clinic, the IDGP and a number of mental health services. Organisations involved included Mission Australia, Lifeline, Uniting Care Aged, ARAFMI, Northfields Clinic, the IDGP and a number of mental health services.

Introducing

October was a big month for the growing team at IHMRI, including the appointment of Dr Andrew Bonney as Scientific Director for the Primary Care and Rural Health theme, and Dr Paul Keeler as Scientific Director of the Infectious Diseases theme.

Dr Andrew Bonney

Scientific Director, Primary Care and Rural Health theme

Dr Andrew Bonney is a general practitioner, Senior Lecturer in General Practice at the Graduate School of Medicine and an active research member of the Centre for Health Initiatives at the University of Wollongong. He has been involved in clinical practice on the NSW south coast since 1992 as a GP to rural town and Aboriginal community. He has been involved in undergraduate and post-graduate general practice education since 1997. He spent six years as program director for the KoHo Health Program in the Shoalhaven Division of General Practice. Andrew completed a Master of Family Medicine (Clinical) degree through Monash University, and is undertaking doctoral research through the Centre for Health Initiatives at the University of Wollongong. He has been published, and had conference papers accepted, both nationally and internationally on aspects of primary care, and is on the review panels of national and international primary care and medical education related journals. His research focus is on inter-personal aspects of patient care, and their impact on behaviours and health care systems. He was chief investigator on a national study into the responses of older patients to general practice trainers. However, he maintains a broad range of research interests in primary health care, and is currently involved in projects as diverse as the use of web-based social networks for GP training and health promotion for residents of aged care facilities. This November, Andrew presented two of his research papers accepted at the 38th North American Primary Healthcare Research Group Annual General Meeting in Seattle. andrew.bonney@uow.edu.au

Anita Markovski

Building Services, IHMRI

Anita began in October as the full-time building services and reception officer. Anita has significant experience in office management and coordination. Anita’s role is to raise any building maintenance requirements with the University, order office supplies, receiving and coordinating deliveries and reception duties.

Patty Bate-Charlton

Clinical Trials Nurse

Patty joined the IHMRI Clinical Research and Trials Unit in early October and has since been working to implement guidelines and procedures for prospective clinical trials. Patty was Senior Operating Theatre Nurse at Wollongong Hospital for more than a decade before joining IHMRI, and we are extremely pleased to have her skills and experience on board.
More than a network

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Researcher Judy Raper, said.

“It’s obvious that developments such as the Graduate School research projects at the Institute to the next level. These results are big winners in the NHMRC Project Grants Research into Alzheimer’s disease, schizophrenia, improvements in measurement of personal vulnerabilities and well-being in adolescence and the time to also engage with IHMRI through participating in research meetings and projects is a big expectation of people with full diaries.

Discovering more about why, when, where and how people want to interact with colleagues in the network is our next step to overcoming some of the barriers to engagement.

In December, every network member was emailed a link to an online survey to provide us with feedback on how we may be able to improve your experience of being a network member. Information we have gathered includes when you prefer events to be held, what research projects you would be most interested in participating in and the reasons why you haven’t been able to attend meetings in the past.

This information is assisting our team to create a Research Network that is as valuable as possible for all members, ensuring that once we have engaged members in our research meetings and projects, their involvement remains relevant and effective.

Finally, I’d like to take this opportunity to thank you all for being involved in the foundation year of the Illawarra Health and Medical Research Institute Research Network. I wish all of our members a safe and pleasant holiday season and look forward to working with you in 2011.

Professor Don Iverson
don.iverson@uow.edu.au

Small grants recipients

Small grants recipients

Dr Chao Deng

Total funding: $359,182 over 3 years

Understanding the mechanisms of functionally selective drugs: implication for new generation antipsychotic drugs

Professor Brett Garner and Dr Tim Karl

Total funding: $440,312 over 3 years

Defining the function of apolipoprotein-D in Alzheimer’s disease

Dr Justin Yenbury and Dr Leila Luokeshi

Total funding: $390,812 over 3 years

Investigating the propagation of protein aggregation in amyotrophic lateral sclerosis

Dr Nadia Solowj, Professor Rodney Croft, Dr Juanita Todd, Dr Francesca Fernandez, Emeritus Professor Patricia Mitchie, Professor Philip McGuire and Professor Robin Murray

Total funding: $499,006 over 3 years

Vulnerability markers in the association between cannabis and schizophrenia

Professor Nicholas Dr. Dixon, Professor Gottfried Gitling and Associate Professor Aaron Oakley

$570,048 over 3 years

Targeting lagenar taggin DNA replication in model and pathogenic bacteria

IHMRI researchers involved in collaborative grants led at other institutions which were announced as part of the NHMRC round are Dr Todd Mitchell and Professor Roger Truscott.

Congratulations to all IHMRI researchers involved in these major grants.

ARC Discovery

ARC Discovery

A number of IHMRI Research Network researchers are members of successful 2010 ARC Discovery Projects funding (the following list is representative of IIHRM Research Network researchers in each project only):

Associate Professor Joseph Ciarrochi, Associate Professor Stuart Johnstone. A longitudinal study into the development of personal vulnerabilities and well-being in adolescence

Dr Christopher Magge, Professor Don Iverson.

Short sleep as a cause of obesity: a longitudinal examination of Australian children and adults

Associate Professor Jennifer Beck, Dr Michael Kerby.

Fragment based screening approach to new antibiotics directed against the bacterial sliding clamping

Professor Anatoly Rosenfeld, Dr Marco Petasecca, Dr Susanna Guattelli, Associate Professor Peter Metcalfe, Associate Professor Martin Cameron. Unified platform for real time QA in radiation therapy in brachytherapy based on high resolution silicon detectors (Magic Plate)

Associate Professor Tony Oksley, Dr Dylan Cliff.

Determinants of children’s physical activity and sedentary behaviour: a follow-up study from early childhood

DART Grant

DART Grant

Congratulations also to Professor Xu-Feng Huang who has been awarded almost $60,000 from Diabetes Australia Research Trust in its 2011 grant round.

SISEAHS Family & Carer Mental Health Program

SISEAHS Family & Carer Mental Health Program Team

Family & Carer Consultant: Megan Green

Area Coordinator: Toni Garretty

VMO Psychiatrist: Dr Annette Dickson

(2 days per month)

The SISEAHS Family and Carer Mental Health Program team drive the development and delivery of group initiatives to increase skills and improve the practise of clinicians when connecting with families and carers, to achieve optimal engagement with families and carers.

Through education and case reviews, the team encourage medical staff to provide carers and families with a range of options, including assistance with navigating the system, support, information and education regarding illness, medications and appropriate referral pathways. To strengthen this sustainable, capacity building approach, the Family and Carer Consultant also provides individual support to clinicians when often works in tandem on the complex family and carer issues.

Both the Family and Carer Consultant and Area Coordinator deliver ongoing education sessions to families and carers to enhance knowledge and build coping skills, while the entire team offers Mental Health Community Forums to increase awareness and reduce stigma.

A recent change to funding has seen a new partnership with Aftercare develop to open referral pathways. Experience has demonstrated that a shared approach by health and the NGO’s when working with families and carers delivers better outcomes for all.

Suicide Prevention

As part of their work, the Family & Carer Mental Health Program also have established a suicide prevention initiative, working with the Wollongong Suicide Prevention Network and Wollongong Police.

The topic of suicide continues to provoke a variety of emotional responses among members of the community. Yet it is a known fact that Australia loses more people to suicide than motor vehicle accidents every year.

The partnership with the Wollongong Suicide Prevention Network and the Wollongong Police has been vital to increase community awareness and provide support to people who may be at risk of suicide and their family and carers. The Network has developed a new resource information pack covering prevention and postvention, which local police have been utilising for some months.

From October 2010, these packs will also be available throughout local police have been utilising for some months.

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From October 2010, these packs will also be available throughout local police have been utilising for some months.
Dementia grants generous

Executive Director Don Iverson has acknowledged the generosity of donors to the University of Wollongong in announcing two $10,000 grants for research into dementia.

“The support from these donors is indicative of the appreciation held within our local community of the good work being done by our IHMRI researchers,” Professor Iverson said.

The $20,000 was made available through the IHMRI 2010 Dementia Grants Program which supports research projects in any aspect of dementia that has the potential to advance the prevention or treatment of dementia or improve the quality of life and experience of people with dementia.

Four applications were received for the grant round, and two were awarded by the assessment panel comprising of Professor Nick Dixon, Professor Noel Tall, Professor WIJ Yeo, Professor Iverson and IHMRI Chief Operating Officer Sue Baker Finch.

The successful research projects are:
- The impact of fruit flavonoids on memory and cognition in older adults with mild to moderate dementia
  Karen Charlton, Jan Potter, Steven Roodenrys, Karen Walton
- Establishing the pathological mechanisms of TDP-43 in frontotemporal dementia and motor neurone disease
  Mark Wilson, Justin Yerbury, Health Ecroyd, Andrew Aquilina

It is hoped that the support of these donors, and others, such as the Illawarra Cancer Carers, is the start of an expanding program of donations that will further medical research being undertaken at IHMRI, Professor Iverson said.

The IHMRI Research Network is integral to the ongoing success of IHMRI and its research program. Our unique status at the nexus of medical research and clinical treatments relies on input from all perspectives. We hope that in 2011, members of the Research Network will continue to get involved and bring a broad range of perspectives to our mission of excellence and innovation in health and medical research.

We wish each and every member of our staff and Research Network a healthy, happy and relaxing festive season and look forward to seeing you at our research meetings and events in 2011.

Research Network News

It has been a fantastic year of growth for the IHMRI Research Network since its launch on Wednesday 9 December, 2009. We’ve seen membership grow to more than 500. Over the coming year we hope to add value to membership of our Network through establishing even stronger research connections and better tailoring of events.

Research Network Survey: We want your feedback about membership of the Research Network this December. Distributed to all of our members by email, we hope that you can spare a few minutes to give us your opinions in this anonymous survey. Also find the link on the IHMRI Central blog.

Research Network Membership Growth

Network Member Profile

Jenny Lane, Refugee Health Nurse, SESIAHS Multicultural Health Service

Describe your work?

The Illawarra welcomes between 150 and 200 people on humanitarian visas each year, and in recent years the majority have come from African countries and various Burmese communities. My main role is to support health service professionals in providing culturally appropriate care, and refugee families as they negotiate our health system. In a typical day I might be at TAFE coordinating a health information session through the Adult Migrant English Program, visiting a newly arrived family at home to explain the initial health screening, including the testing process and the sorts of referrals that might be made; presenting information (such as health issues of relevance to pregnant women with a refugee background) to health service providers; or any combination of these activities! I am also involved in a longitudinal research study with Sydney Children’s Hospital Department of Community Child Health, which is looking at the physical, psychosocial and developmental wellbeing of refugee children in SESIAHS.

How did you come to have the job you have? Your interest in becoming a health professional?

I was in the right place at the right time! I’m privileged to be working with a group of people who never cease to amaze me with their strength, determination, and humour, even after many years of living in the most deprived and stressful environments.

What areas, in terms of research or clinical support, are needed in your area of work?

People with a refugee background have often experienced torture and trauma, and one priority is to work with communities to develop creative and culturally appropriate ways of resolving the post-traumatic stress that can hinder peoples’ settling into a new environment.

What are the most important networks and services for you and the people you support?

Specialist clinical services which bulk-bill are required to ensure that people from refugee backgrounds are healthy enough to participate fully in our society. Networking with a wide variety of health professionals, such as those involved with IHMRI, helps develop the relationship which enable equitable service provision for the people I work with.

Research Network Membership Growth

![Research Network Membership Growth Chart]

What’s the last most recent event you’ve been to or information you’ve read about your area of work that’s interested you?

I read an article written by Dr Mona Williamson from UIW School of Nursing, Providing culturally appropriate care: A literature review (ED NOTE: Int J Nurs Stud. 2010 Jun;47(6):761-9.), which concluded that learning about the culture of specific groups can lead to ‘stereotyping and a failure to identify the needs of an individual’. I’m sure my colleagues from the Multicultural Health Service would agree that it is impossible to define a person’s health status in terms of their being to a particular group, such as ‘Chinese women’: we can only understand how culture influences beliefs and practices by having a conversation with individual clients. Apart from the subject matter which is of relevance to all health practitioners in our diverse society, the article highlights the importance of qualitative research in enabling the implementation of effective treatments and interventions.

Why did you join the IHMRI Network?

It’s a great way to keep in touch with research being done in our local environment. It also helps to raise the profile of the work done by the team at the Multicultural Health Service, which includes an active Learning, Research and Workforce Development program.

What benefits do you hope to get from membership?

The networking events have already enabled connections which can only benefit the diverse communities the Multicultural Health Service works with. I look forward to developing these relationships and meeting other members interested in ensuring that research and services realise the vision of a healthier Illawarra community in all its diversity.

If you had the opportunity to ask whoever you wanted to dinner, who would you invite and why?

I’d ask Tetsuya Wakuda to breakfast, lunch or dinner, provided he was willing to cook it.

Research Network Survey:

We want your feedback about membership of the Research Network this December. Distributed to all of our members by email, we hope that you can spare a few minutes to give us your opinions in this anonymous survey. Also find the link on the IHMRI Central blog.

Upcoming Events

IHMRI has finalised the dates for its 2011 Seminar Series (Tuesday evenings) and Networking Evenings (Wednesday evenings). Speakers will be finalised over coming months and advised through email, online and through Research Network events.

These dates are:

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<tr>
<th>2011 IHMRI Seminar Series</th>
<th>2011 Networking Evenings</th>
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<tr>
<td>Tuesday 15 February</td>
<td>Wednesday 2 March</td>
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<td>Tuesday 17 May</td>
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<td>Tuesday 9 August</td>
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<td>Tuesday 18 October</td>
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We wish each and every member of our staff and Research Network a healthy, happy and relaxing festive season and look forward to seeing you at our research meetings and events in 2011.
The shape of things to come

Molecular chaperones as agents of the ageing process

Like a personal trainer can keep us ship-shape as we age, so too do a class of proteins in the body, known as chaperones.

There are a number of different types of chaperones in the body, their role to ensure that all of the other proteins in the body that keep us fighting fit are of perfect molecular form.

As we age, the ability of proteins to fold and function perfectly reduces; as does the ability of chaperones to keep up their job of quality assurance.

Over time, the misshapen proteins form clumps, or aggregates, around the body. In the brain, these protein aggregates cause devastating diseases including Parkinson’s disease and motor neurone disease (MND). Dementia is also a consequence of protein aggregation in the brain and is one of the fastest growing sources of major disease burden in Australia.

A research team led by Dr Heath Ecroyd and Dr Justin Yerbury, from the Illawarra Health and Medical Research Institute, is investigating how chaperones contribute to the onset of age-related neurological diseases and ageing in general, as well as how they might offer opportunities for prevention and treatment of these diseases.

They are focused on a particular type of chaperone, small heat-shock proteins, which play a ‘surveillance’ role in the body, identifying which proteins are falling out of shape, and dispatching fellow chaperone proteins to assist them in keeping their molecular form.

Using an animal model of motor neurone disease (MND), the researchers are examining the role these chaperones play in a healthy brain, how this role changes in an ageing brain, and what the chaperones are – or aren’t – doing at the onset of the disease.

Looking at the differences between disease onset and a significant deterioration in health, which may occur many years after diagnosis for many of the age related neurological diseases, it is hoped will provide significant insight into why these chaperones seem to fail us as we age.

“People with a genetic mutation that is associated with MND are not born with the disease - the average age of onset is around 50 years,” Dr Yerbury says. “Using this model, we can examine the function and form of the chaperones at each stage of the life cycle and investigate the changes that lead to the sudden onset and progression of MND during ageing.”

The researchers are studying the chaperones from two angles: the “numbers game” – whether ageing throws out the fine balance between chaperones and deforming proteins; and functional deficiency – whether or not the chaperones themselves become inoperative as we age.

Their ultimate goal is to identify opportunities for the development of therapeutic treatments, which can be honed to benefit patients suffering from these diseases of our age.

This work has been made possible through a grant from the Illawarra Retirement Trust Research Foundation. Dr Justin Yerbury holds a Bill Gole Postdoctoral Fellowship, funded by the Motor Neurone Disease Research Institute of Australia.

Technical know-how

The experience of setting up IHMRI’s new PC2 research laboratories from the perspective of our team of technical officers was the subject of a presentation at the TechNet 2010 conference at Flinders University, Adelaide in December.

Senior Technical Officer, Linda Deitch, and Technical Officers Katie Hall and Clare Atkinson, described the move and settling in to the new IHMRI building in their presentation, Setting up PC2 labs in a new facility.

TechNet is a network for laboratory technical staff that shares information, skills and ideas among its members. The first TechNet conference was held in 1998, with the theme for the 2010 conference ‘Broadening the network’.

In their presentation, the IHMRI team detailed the various processes and procedures that were necessary in setting up the operational PC2 laboratories, the challenges that unfolded once the researchers moved in and a look at how the laboratories are working six months since the move.

The move included the purchase and installation of specialist biomedical and various assorted laboratory equipment for the transfer of established research groups from within the University to the state-of-the art research facility.

“It explored the highs and lows, giggles, and grumbles from the perspective of the three of us,” Linda said. “Hopefully the insights we provided were helpful to other technical staff facing a similar mammoth task, and even for those in established facilities who - perhaps foolishly - dream of a starting from scratch.”